# Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Α	For th	ie 2014 calen	dar year,	or tax	year be	ginning 🔘	ct)	1	, 2014,	and end	ing	Sep	30	,	2015		
В	Check if	applicable:	C Name of	of organiz	ation CA	WACO RESOU	URCE	CONSERVATI	ON & DEVELOPM	MENT COU	NCIL,	INC.	D Employ	er identi	fication nur	nber	
	Ad	dress change	Doing b	ousiness a									63-	10272	283		
		me change				box if mail is n	ot deliv	ered to street a	address)	Roor	n/suite		E Telepho				
		•			,				,								
	Init	tial return	2112							543	L		(20	5) 62	23-045	7	
	Fina	al return/terminated	City or	town, stat	te or provin	ce, country, an	id ZIP o	or foreign posta	I code								
	Am	nended return	BIRMI	NGHAN	N.				AL	35205			<b>G</b> Gross re			,036.	
	Ap	plication pending	F Name a	and addre	ess of princi	pal officer:					H(a)	Is this a	group return	for subor	rdinates?	Yes	X No
			рант, ма	CALE:	B 2112 11	TH AVE SOUTH	STE 54	1 BIRMII	иснам ат.	35205	H(b)	Are all s	ubordinates ttach a list. (	included?	,	Yes	No
ī	Tay-	exempt status	X 501(c)		501(c)			sert no.)	4947(a)(1) or	527	_	If 'No,' a	ttach a list. (	see instru	ictions)	_	
<u>-</u>		-			_	( )	(111.	scrt no.)	4747 (a)(1) OI	327	 ,	•					
			W.CAWA										xemption nu				
K		of organization:	X Corpora	ation	Trust	Associati	ion	Other ►	LY	ear of forma	ation:	1972	I M S	State of le	gal domicile:	: AL	
Pa	rt I	Summar															
	1	Briefly describ	_				_						/ITIES		Τ		
ģ		INCREASE	CONSE	RVAT	ION C	F_RESO	URCI	ES AND	SUPPORT I	ECONOM	IIC_	DEVE:	LOPMEN	IT			
<u></u>																	
Ë																	
ĕ	2	Check this bo	x ►	if the o	rganizat	ion disconti	inued	its operation	ons or disposed	d of more	than	25% of	its net as	sets.			
Ğ	3	Number of vot	ting memb	ers of	the gove	rning body	(Part	VI, line 1a	)					3			17
•ŏ	4	Number of inc	dependent	voting	member	rs of the go	vernir	ng body (Pa	art VI, line 1b)					4			17
ë.	5	Total number	of individu	uals em	ployed i	n calendar	year 2	2014 (Part	V, line 2a)					5			2
Activities & Governance	6	Total number	of volunte	ers (es	timate if	necessary	)							6			30
Ac	7a	Total unrelate	d busines	s reven	nue from	Part VIII, c	olumr	n (C), line 1	2					7a			0.
	b	Net unrelated	business	taxable	e income	from Form	1 990-	T, line 34 .						7b			0.
													ior Year		Curr	ent Ye	
	8	Contributions	and grant	s (Part	VIII. line	1h)							479,0	36			803.
Revenue											_		51,8				700.
Ne.		-												83.			376.
æ									11e)					33.			157.
									mn (A), line 12								
													537,8				036.
											_		165,9	72.		231,	028.
											_						
S	15	Salaries, othe	r compens	sation,	employe	e benefits	(Part	IX, column	(A), lines 5-10)	lines 5-10)							797.
Se	16 a	Professional f	undraising	g fees (	Part IX,	column (A)	, line	11e)									
Expenses	h	Total fundrais	ina exnen	ses (Pa	art IX co	lumn (D) li	ine 25	5) <b>►</b>		0							
爫			•					· —			_		044 3	0.5		010	D D 1
		•	•		1 /			,					244,3				771.
		•						. ,	ine 25)		_		490,2				596.
		Revenue less	expenses	s. Subtr	act line	18 from line	e 12						47,6	03.			440.
0 or											В	eginnin	g of Currer		End	of Yea	ar
alan alan	20	Total assets (	Part X, line	e 16) .	<i>,</i>								646,4	32.		668,	227.
ğ ğ	21	Total liabilities	(Part X, I	ine 26)									6,3	91.		17,	882.
Net Assets Fund Balanc	22	Net assets or	fund balar	nces. S	Subtract I	ine 21 from	line :	20					640,0	41		650	345.
	rt II	Signatur			7								01070			0307	313.
						un in alcudina a		an in a aabaali i	lan and statements	and to the d				inf it in tw			
comp	olete. De	claration of prepare	er (other than	officer) is	s based on	all information	of whic	anying schedul th preparer has	es and statements, any knowledge.	and to the t	best of r	ny knowie	eage and bei	iei, it is tri	ue, correct, a	and	
<b>~</b> :		Signatu	re of officer									Date	e				
Siç																	
He	re		L MCCA								С	HAIR	. `				
			print name a														
		Print/Type p	reparer's nam	ne		Preparer	r's signa	ature		Date			Check	if	PTIN		
Pa	id	J KEVIN	SMITH, (	CPA, C	GFM, CO	MA J KEV	IN SM	MITH, CPA	, CGFM, CGMA	11/11	/15		self-employe	ed ]	P00107	7054	
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_ <b>_</b>	Firm's address 112 SOUTHSIDE SQU. HUNTSVILLE						ALL	, OIL L		1				0 2			
N 4 -	, 4h - 15	 				aha1		/000 !== t==	AL 3580	Т			Phone no.	(∠56	5) 536		
ivia	/ tne II	RS discuss this	s return w	ıın tne p	preparer	snown abo	) / veر	see instruc	uons)						. X Ye	<b>5</b>	No

			Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2		2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to 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? <i>If</i> 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
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>	10		Х
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.			
á	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
I	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	11 b		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 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(	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	11 d	Х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
I	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13		13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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 (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		X
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

# Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
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>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	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	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes', complete Schedule L, Part II	26		Х
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? If 'Yes,' complete Schedule L, Part III	27		Х
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? If 'Yes,' complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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>	32		Х
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>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA Form **990** (2014)

## Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1 8	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ı	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
(	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	. 0		
	ments, filed for the calendar year ending with or within the year covered by this return 2a 2	2 6	Х	
•	o If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Λ	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	0 -		v
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	a If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
ŀ	o 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)			
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
ŀ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
(	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7.0		Х
	of Yes,' did the organization notify the donor of the value of the goods or services provided?	7 a 7 b		- 21
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 b		Х
,	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 0		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
		- ' '		
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
1	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	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		
9	Sponsoring organizations maintaining donor advised funds.			
á	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ŀ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter:			
á	a Initiation fees and capital contributions included on Part VIII, line 12			
ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
11	Section 501(c)(12) organizations. Enter:			
á	a Gross income from members or shareholders			
ŀ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 8	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
ŀ	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
á	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
ŀ	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
(	Enter the amount of reserves on hand			
14 8	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
				=

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.

	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	ction A. Governing Body and Management			
	and the second s		Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year			
	b Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
_	Did the organization become aware during the year of a significant diversion of the organization sassets:	6	Х	21
6 7	a 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?	7 a	Λ	Х
	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8 a	X	
	<b>b</b> Each committee with authority to act on behalf of the governing body?	8 b	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	ction B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		)
			Yes	No
10	a Did the organization have local chapters, branches, or affiliates?	10 a		Х
	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?	10 b		
11	<b>a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · · · · · · · · · · · · ·	12 a	Х	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	124	21	
	to conflicts?	12 b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
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?			
	a The organization's CEO, Executive Director, or top management official	15 a	Х	
	b Other officers or key employees of the organization	15 b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16 a		Х
	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?	16 b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►			
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) a for public inspection. Indicate how you made these available. Check all that apply.	availab	le	
	Own website			
19	the public during the tax year.	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	CAWACO RC&D COUNCIL 2112 11TH AVE SOUTH, STE 541 BIRMINGHAM AL 35205 (20	) F \ /	- 22 /	0457

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

			(C)							
(A) Name and Title		than	one b both a dire	ox, u an of ctor/t	ınless		e n	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) KELLIE JOHNSTON EXECUTIVE DIRECTOR	40.00				Х			41,818.	0.	0.
(2) PAUL MCCALEB PRESIDENT	_4.00	Х		Х				11,010.	•	<u> </u>
(3) JOE LOVE VICE PRESIDENT	_4.00	Х		Х						
_(4)_CHRIS_GREEN MEMBER	<u>1.00</u>	X								
(5) DORIS HAMBY MEMBER	1.00	Х								
	_1.00	Х								
(7) GERALD ARRINGTON MEMBER	_1.00	X								
	_1.00	X								
_(9) FRED_CRAWFORD MEMBER	_1.00	Х								
(10) SHEILA BAKER MEMBER	_1.00	Х								
(11) JIM PHILLIPS  MEMBER	_1.00	X								
(12) GARY CROWSON  MEMBER	_1.00	Х								
(13) CORLEY ELLIS	_1.00	Х								
(14) DOUG SMITH MEMBER	_1.00	Х								

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
	(B)			(C	,						
(A) Name and title	Average hours per week	off	, unles icer an	ss pei	rson i directo	than o s both or/truste	an ee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	amou	(F) stimated int of other pensation
	(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	-ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	fr orga and	om the anization d related anizations
(15) JON HARRISON MEMBER	1.00_	Х									
(16) BILLY LUSTER MEMBER	1.00_	X									
(17) PAUL KENNEDY MEMBER	1.00_	Х									
(18) KEITH PIKE MEMBER	1.00_	Х									
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)									_		
1 b Sub-total							<b>&gt;</b>	41,818.	0.		0.
d Total (add lines 1b and 1c)							ive	41,818. d more than \$100,0	0. 000 of reportable cor	npensa	0.
											Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	ndividual									. 3	X
4 For any individual listed on line 1a, is the sum of repetithe organization and related organizations greater to such individual	han \$150,	000?	If 'Ye	es' d	com	plete	Sch	nedule J for		. 4	X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or										. 5	Х
1 Complete this table for your five highest compensation from the organization. Report compe	ed indepe nsation fo	nden r the	t con caler	itrac	ctors	that ar end	rece	eived more than \$1 with or within the	100,000 of organization's tax ye	ar.	
(A) Name and business address						(B) Description o	f services	Compe	C) ensation		
2 Total number of independent contractors (including	but not lin	nited	to the	ose	liste	ed ab	ove	l ) who received mo	re than		
\$100,000 of compensation from the organization	-										

	Check if Schedule O contains a response or note to any I	ine 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	1 a Federated campaigns				
<u>පු</u>	h Total. Add lines 1a-1f	488,803.			
Program Service Revenue	Business Code	46,700.	46,700.	0.	0.
gram Servi	d e f All other program service revenue				
ď	g Total. Add lines 2a-2f	46,700.			
	<ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds</li> </ul>	10/3/0:	16,376.	0.	0.
	5 Royalties	_			
	7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses c Gain or (loss)				
Other Revenue	8 a Gross income from fundraising events (not including . \$ of contributions reported on line 1c).  See Part IV, line 18				
¥	b Less: direct expenses b  c Net income or (loss) from fundraising events	-			
J	9 a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities	•			
	10 a Gross sales of inventory, less returns and allowances       7,500.         b Less: cost of goods sold       5,000.				
	c Net income or (loss) from sales of inventory	2,500.	2,500.	0.	0.
	Miscellaneous Revenue Business Code	2.55	0.555	_	_
	11a MISCELLANEOUS 900099 b c	2,657.	2,657.	0.	0.
	d All other revenue				
	e Total. Add lines 11a-11d	2,657.			
	12 Total revenue. See instructions	2,037.	68.233.	0 -	0.

## Part IX | Statement of Functional Expenses

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	231,028.	231,028.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	41,184.	35,007.	6,177.	0.
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	34,800.	29,580.	5,220.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	31,303.	22,0001	3,1137	<u>.</u>
9	Other employee benefits				
10	Payroll taxes	5,813.	4,941.	872.	0.
11	Fees for services (non-employees):		•	-	
а	Management				
b	Legal				
С	Accounting	5,000.	0.	5,000.	0.
d	Lobbying	- ,		-,	
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
Ū	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	141,987.	141,987.	0.	0.
13	Office expenses	1,560.	773.	787.	0.
14	Information technology	1,500.	775.	707.	· · ·
15	Royalties				
16	Occupancy	10,557.	8,330.	2,227.	0.
17	Travel	10,337.	0,330.	2,227.	· ·
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,678.	261.	2,417.	0.
20	Interest	152.	0.	152.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,770.	2,355.	415.	0.
23 24	Insurance 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.)	1,175.	0.	1,175.	0.
а	PROJECT EXPENSES	38,822.	38.822.	0.	0.
	MISCELLANEOUS	240.	0.	240.	0.
С		3,295.	3,295.	0.	0.
d	TELEPHONE AND INTERNET	3,640.	3.094.	546.	0.
	All other expenses	895.	0.	895.	0.
	Total functional expenses. Add lines 1 through 24e	525,596.	499,473.	26,123.	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  if following	,	,	,	

Part X **Balance Sheet** 

(A) (B) Beginning of year End of year 1 112,047 75,850. 2 2 3 3 45,526 47,046. 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Assets 8 122,500 Prepaid expenses and deferred charges . . . . . . . 9 Land, buildings, and equipment: cost or other basis. 10 a 15,487 10 b 10 c 10,417 7,840 5,070 11 481,019 11 415,017 Investments - other securities. See Part IV, line 11 . . . . . . 12 12 Investments – program-related. See Part IV, line 11 . . . . . . . 13 13 14 14 15 15 744 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . . . . 16 646,432 16 668,227 17 3,500 17 15,329 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D . . . . . . . . 21 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. 22 23 23 24 24 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 2,891 25 2,553 Total liabilities. Add lines 17 through 25......... 391 26 17,882 6 Organizations that follow SFAS 117 (ASC 958), check here ▶ x and complete Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . . . . . . . . 27 27 640,041 650,345. 28 28 or Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34. Capital stock or trust principal, or current funds . . . . . . . . . 30 30 Net Assets Paid-in or capital surplus, or land, building, or equipment fund . . . . . . . . . . . . 31 31 32 Retained earnings, endowment, accumulated income, or other funds . . . . . . . . 32 33 640,041 33 650,345 34 646.432 34 668,227

BAA Form 990 (2014)

Form 990 (2014	<ol><li>CAWACO</li></ol>	RESOURCE	CONSERVATION	£	DEVELOPMENT	COUNCIL.	INC.

63-1027283	Page <b>12</b>

Pai	art XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	1 Total revenue (must equal Part VIII, column (A), line 12)		1		55	7,0	36.	
2	2 Total expenses (must equal Part IX, column (A), line 25)		2		52	25,5	96.	
3	Revenue less expenses. Subtract line 2 from line 1		3		7.	31,4	40.	
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4		64	10,0	41.	
5	Net unrealized gains (losses) on investments		5		-2	21,1	36.	
6	6 Donated services and use of facilities		6					
7	7 Investment expenses		7					
8	B Prior period adjustments		8					
9 Other changes in net assets or fund balances (explain in Schedule O)								
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))		10		65	0,3	45.	
Pa	art XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII						. [	
						Yes	No	
1	1 Accounting method used to prepare the Form 990: Cash X Accrual Other							
				_				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.								
2 8	2 a Were the organization's financial statements compiled or reviewed by an independent accountant?			[	2 a		Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	ved on a						
	separate basis, consolidated basis, or both:	vou on u						
	Separate basis Consolidated basis Both consolidated and separate basis							
ı	<b>b</b> Were the organization's financial statements audited by an independent accountant?				2 b	Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	rate						
	basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of							
	review, or compilation of its financial statements and selection of an independent accountant?			• •	2 c	Χ		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
3 8	3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th	e Single					37	
	Audit Act and OMB Circular A-133?			• •	3 a	-	Х	
ı	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re	•	udit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.				3 h			

**BAA** Form **990** (2014)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

(C)

(D)

(E)

Total

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection

Name of the organization Employer identification number CAWACO RESOURCE CONSERVATION & DEVELOPMENT COUNCIL, 63-1027283 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (iv) Is the anization listed (v) Amount of monetary (vi) Amount of other organization in your governing (see instructions)) document? Yes No (A) (B)

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

Schedule A (Form 990 or 990-EZ) 2014

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support			1			
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activiti	es, etc (see instruc	ctions)			12	
13	First five years. If the Form 990 is organization, check this box and s	for the organization top here	on's first, second, t	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ 🔲
	tion C. Computation of Pul						
	Public support percentage for 2014						<u>%</u>
15	Public support percentage from 20	113 Schedule A, Pa	art II, line 14			15	%
16 a	33-1/3% support test — 2014. If and stop here. The organization of						
k	33-1/3% support test — 2013. If the and stop here. The organization of						
17 a	10%-facts-and-circumstances te or more, and if the organization me the organization meets the 'facts-a	eets the 'facts-and-	-circumstances' tes	st, check this box a	ind stop here. Exp	lain in Part VI how	
	o 10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	-circumstances' tes t. The organization	st, check this box a qualifies as a pub	ind <b>stop here.</b> Exp licly supported org	lain in Part VI how anization	the ▶
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	7b, check this box	and see instruction	ns ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	tion A. Public Support						
	ndar year (or fiscal yr beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	702,757.	332,070.	436,518.	479,036.	538,160	. 2,488,541.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	58,171.	63,412.	47,634.	51,860.	7,500	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	30,171.	03,112.	17,031.	31,000.	7,300	. 220,377.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	governmental unit to the organization without charge	150,000.	150,000.				300,000.
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons	910,928.	545,482.	484,152.	530,896.	545,660	. 3,017,118.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						3,017,118.
	tion B. Total Support		<del></del>				
	ndar year (or fiscal yr beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
	Amounts from line 6	910,928.	545,482.	484,152.	530,896.	545,660	3,017,118.
k	similar sources	2,912.	1,532.	758.	1,083.	16,376	. 22,661.
	taxes) from businesses acquired after June 30, 1975						
11 12	acquired after June 30, 1975	2,912.	1,532.	758.	1,083.	16,376	. 22,661.
11	acquired after June 30, 1975	2,912.	1,532.	758.	1,083. 5,833.	16,376	5,833.
11 12 13	acquired after June 30, 1975	913,840.	547,014.	484,910.	5,833. 537,812.	562,036	5,833.
11 12 13	acquired after June 30, 1975	913,840.	547,014.	484,910.	5,833. 537,812. tax year as a secti	562,036 on 501(c)(3)	5,833.
11 12 13 14 Sec	acquired after June 30, 1975	913,840. s for the organizatiotop here	547,014. on's first, second, the second of t	484,910. hird, fourth, or fifth	5,833. 537,812. tax year as a secti	562,036 on 501(c)(3)	5,833.
11 12 13 14 Sec	acquired after June 30, 1975	913,840. s for the organizatiotop here	547,014. on's first, second, the second of t	484,910. hird, fourth, or fifth	5,833. 537,812. tax year as a secti	562,036 on 501(c)(3)	5,833. . 3,045,612.
11 12 13 14 Sec 15 16	acquired after June 30, 1975	913,840. s for the organization here blic Support P4 (line 8, column (f) 113 Schedule A, Pa	547,014.  on's first, second, the second of	484,910. hird, fourth, or fifth	5 , 833 . 537 , 812 . tax year as a secti	562,036 on 501(c)(3) 	5,833. . 3,045,612. ▶ □
11 12 13 14 Sec 15 16	acquired after June 30, 1975	913,840. s for the organization here blic Support P 4 (line 8, column (f) 13 Schedule A, Parestment Incor	547,014.  on's first, second, the contage of divided by line 13, art III, line 15  ne Percentage	484,910. hird, fourth, or fifth	5,833. 537,812. tax year as a secti	562,036 on 501(c)(3) 	5,833. . 3,045,612. 
11 12 13 14 Sec 15 16	acquired after June 30, 1975	913,840. s for the organization here blic Support P 4 (line 8, column (f) 13 Schedule A, Pa estment Incor 2014 (line 10c, column 10c, column 10c)	547,014.  on's first, second, the contage of divided by line 13, art III, line 15  ne Percentage of lumn (f) divided by	484,910.  hird, fourth, or fifth  column (f))  column (f) (f)	5,833. 537,812. tax year as a secti	562,036 on 501(c)(3) 	5,833. . 3,045,612. □ 99.06 % 99.47 %
11 12 13 14 Sec 15 16 Sec 17 18	acquired after June 30, 1975	913,840. s for the organization here	547,014.  on's first, second, the second of	484,910.  nird, fourth, or fifth	5,833. 537,812. tax year as a secti	562,036 on 501(c)(3)  15 16	5,833. . 3,045,612. 
11 12 13 14 Sec 15 16 Sec 17 18 19 a	acquired after June 30, 1975	913,840. s for the organization top here blic Support P 4 (line 8, column (f) 13 Schedule A, Pa estment Incor 2014 (line 10c, column to 10c) m 2013 Schedule A the organization dinis box and stop here	547,014.  on's first, second, the second of	484,910.  nird, fourth, or fifth  column (f))  column (f)  column (f)  column (f)  column (f)  column (f)	5,833.  537,812.  tax year as a section of the sect	562,036 on 501(c)(3)	5,833. . 3,045,612. 

63-1027283

Part IV Supporting Organizations
(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A	. All	<b>Supporting Organizations</b>
-----------	-------	---------------------------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)			
	and (c) below	3a		
k	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that	4.5		
	all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by			
	amendment to the organizing document)	5a		
k	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,'	•		
Ü	complete Part I of Schedule L (Form 990)	8		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b>	9a		
t	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b>	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b>	9с		
10 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below	10a		
L	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine	iva		
	whether the organization had excess business holdings.) · · · · · · · · · · · · · · · · · · ·	10b		

Pa	rt IV	Supporting Organizations (continued)			
11	Hac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		rson who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		rning body of a supported organization?	11a		
ı	<b>b</b> A fan	nily member of a person described in (a) above?	11b		
(	A 359	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in <b>Part VI</b>	11c		
Sec	tion	B. Type I Supporting Organizations			
				Yes	No
1	or ele <b>Part</b> If the direc	the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ext at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. To organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, ed to such powers during the tax year.	1		
2	Did the that of the bene	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec		C. Type II Supporting Organizations			<u>I</u>
000		o. Type if dupporting organizations		Yes	No
1	11/0 =	a majority of the expeniention's diventors or tructure during the toy year also a majority of the diventors or tructure		100	110
•	of ea	e a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the	1		
500		orting organization was vested in the same persons that controlled or managed the supported organization(s)	'		
Sec	lion	D. All Type III Supporting Organizations		Yes	No
				162	NO
1	orgar	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	orgar	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By re voice all tim	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard	3		
Sec	tion l	E. Type III Functionally-Integrated Supporting Organizations			
1	Chec	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
		The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	$\equiv$	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	=	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction)	nns)		
	<u> </u>		,.		
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
í	suppo orga	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
	subsi	tantially all of its activities	2a		
ı	the o	he activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in <b>Part VI</b> the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
	orgar	nization's involvement	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
á	Did th	he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI</i>	2.0		
			3a		
'	וו טוע <b>נ</b> SUDDI	he organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b		

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. <b>See instructions.</b> All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sec	tion A — Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)				
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3	4					
5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6					
7	Other expenses (see instructions)	7					
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):						
a	Average monthly value of securities	1 a					
k	Average monthly cash balances	1 b					
	Fair market value of other non-exempt-use assets	1 c					
c	I Total (add lines 1a, 1b, and 1c)	1 d					
•	Discount claimed for blockage or other factors (explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d	3					
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by .035	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sec	tion C — Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2	Enter 85% of line 1	2					
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4	Enter greater of line 2 or line 3	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6					
7	Check here if the current year is the organization's first as a non-functionally-integrated (see instructions).	d Type	e III supporting organizat	ion			

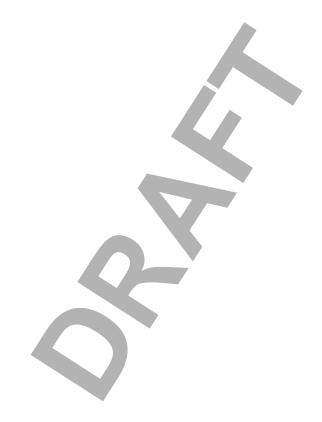
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Schedule **A** (Form 990 or 990-EZ) 2014

Par	: V   Type III Non-Functionally Integrated 509(a)(3) Sup	porting Organiza	ations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpose			
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of support			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
	Carryover from 2009 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any.  Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
е	Excess from 2014			
BAA			Schedule <b>A</b> (For	m 990 or 990-EZ) 2014
	_			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Pt II Ln 10 Other Income Part III, Line 12 Description: MISCELLANEOUS 2013: 5833.



### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	CAWACO RESOURCE CONSERVATION	N & DEVELOPMENT CO	OUNCIL, INC.	63-	1027283	
Par	Organizations Maintaining Donor Complete if the organization answe	Advised Funds or Ot red 'Yes' to Form 990, I	<b>her Similar Fun</b> Part IV, line 6.	ds or Accoun	ts.	
		(a) Donor advised	funds	(b) Funds	and other acco	unts
1	Total number at end of year	(a) Bollot daviood	Turido	(b) I dildo	<u> </u>	unio .
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 a are the organization's property, subject to the organization's property, subject to the organization's property.				Tyes	No
6	Did the organization inform all grantees, donors, a for charitable purposes and not for the benefit of thimpermissible private benefit?	nd donor advisors in writing the donor or donor advisor, or	hat grant funds can for any other purpos	be used only se conferring	<u> </u>	No
Par	Conservation Easements. Complete if the organization answer	red 'Yes' to Form 990, I	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the	e organization (check all that	apply).			
	Preservation of land for public use (e.g., recre	ation or education)	Preservation of	a historically impo	rtant 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 h	eld a qualified conservation of	ontribution in the for	m of a conservation	n easement on	the
	last day of the tax year.					
					t the End of th	e Tax Year
	Total number of conservation easements					
	Total acreage restricted by conservation easemen			<b>—————</b>		
C	Number of conservation easements on a certified	historic structure included in	(a)	. 2c		
c	Number of conservation easements included in (c) structure listed in the National Register			. 2 d		
3	Number of conservation easements modified, trantax year ►	sferred, released, extinguishe	ed, or terminated by	the organization d	uring the	
4	Number of states where property subject to conse	rvation easement is located	·	_		
5	Does the organization have a written policy regard and enforcement of the conservation easements it				Yes	No
6	Staff and volunteer hours devoted to monitoring, ir	nspecting, and enforcing cons	servation easements	during the year	<u> </u>	_
7	Amount of expenses incurred in monitoring, inspect ►\$	cting, and enforcing conserva	ition easements duri	ng the year		
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to the	conservation easements in it organization's financial state	s revenue and expe ements that describe	nse statement, and es the organization	d balance shee 's accounting fo	t, and or
_	conservation easements.	tions of Aut Histories	I Tueseumes em	Other Cimiler	A t -	
Par	Organizations Maintaining Collec Complete if the organization answer	red 'Yes' to Form 990, I	Part IV, line 8.	Other Similar	Assets.	
1 a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets helin Part XIII, the text of the footnote to its financial state.	d for public exhibition, educat	tion, or research in fo			
t	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for following amounts relating to these items:	r public exhibition, education,	or research in furth	erance of public se	ervice, provide t	art, :he
	(i) Revenue included in Form 990, Part VIII, line					
	(ii) Assets included in Form 990, Part X				<b>►</b> \$	
	If the organization received or held works of art, hi amounts required to be reported under SFAS 116	(ASC 958) relating to these i	tems:		the following	
	Revenue included in Form 990, Part VIII, line 1				<b>►</b> \$	
L	Accets included in Form 000 Part V				٠ ٠	

Part III Organizations M	laintain	ing Collectio	ns of Art, Hist	orical	Treasures, or	r Othe	r Similar Ass	ets (c	ontinu	ed)
3 Using the organization's ac items (check all that apply):	quisition, a	accession, and of	her records, check	k any of	the following that a	are a si	gnificant use of its	s collect	ion	
a Public exhibition			<b>d</b> Loan	or exch	nange programs					
<b>b</b> Scholarly research			<b>e</b> Othe	r						
c Preservation for future	0									
4 Provide a description of the Part XIII.	organiza	tion's collections	and explain how th	ey furth	er the organizatior	n's exen	npt purpose in			
5 During the year, did the org to be sold to raise funds rat	her than t	o be maintained	as part of the orgar	nization	's collection?			Yes		No
Part IV Escrow and Cus	todial <i>i</i> d an am	Arrangement ount on Form	<b>s.</b> Complete if t 990, Part X, lin	the ore	ganization ansv	wered	'Yes' to Form	990, F	Part IV	,
1 a Is the organization an agen on Form 990, Part X?								Yes		No
<b>b</b> If 'Yes,' explain the arrange	ment in P	art XIII and comp	lete the following to	able:				Λ m o u n	•	
<b>c</b> Beginning balance						1	С	Amoun	ι	
<b>d</b> Additions during the year							d			
e Distributions during the year										
f Ending balance										
2 a Did the organization include								Yes		No
<b>b</b> If 'Yes,' explain the arrange									<u> </u>	
Part V Endowment Fur	nds. Cor	mplete if the o	rganization ans	swere	d 'Yes' to Form	990.	Part IV. line 10	0.		
		(a) Current year	(b) Prior yea		(c) Two years back		) Three years back		our years	back
1 a Beginning of year balance	🗀		,,,,		.,,	,	,			
<b>b</b> Contributions	🗀									
c Net investment earnings, ga										
<b>d</b> Grants or scholarships	<b>-</b>									
Other expenditures for facil and programs	ities									
f Administrative expenses .										
<b>g</b> End of year balance										
2 Provide the estimated percentage	entage of	the current year	end balance (line 1	g, colur	nn (a)) held as:	•		•		
<b>a</b> Board designated or quasi-	_		%	J,	· //					
<b>b</b> Permanent endowment		%								
c Temporarily restricted endo	wment •		%							
The percentages in lines 2a										
3 a Are there endowment funds	not in the	e possession of th	ne organization tha	at are he	eld and administere	ed for th	ıe.			
organization by:	71100 111 1110	o poddoddion on a	io organization tha	at aro ric		Ja 101 til	.0		Yes	No
(i) unrelated organizations	· · · · ·							. 3a(i)		
(ii) related organizations.	<b>4.</b>	/						. 3a(ii)		
<b>b</b> If 'Yes' to 3a(ii), are the rela	ted organ	izations listed as	required on Sched	dule R?				. 3b		
4 Describe in Part XIII the inte	ended use	es of the organiza	tion's endowment	funds.						
Part VI Land, Buildings	, and E	quipment.								
Complete if the o	rganizat	tion answered	'Yes' to Form	990, F	Part IV, line 11a	ı. See	Form 990, Pa	ırt X, li	ne 10.	
Description of pro	perty		ost or other basis (investment)	(b)	Cost or other pasis (other)	(c) A	Accumulated epreciation	(d)	Book va	lue
<b>1 a</b> Land										
<b>b</b> Buildings										
c Leasehold improvements.						_				
d Equipment					15,487.		10,417.		5 .	,070.
<b>e</b> Other							., = . ,		-	
Total. Add lines 1a through 1e. (	Column (a	l) must equal For	т <u>990,</u> Part X, colu	ımn (B)	, line 10c.)	<u></u> .			5	,070.

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63-

Part VII Investments — Other Securities.	Wasi ta Farm 000	Dort IV line 44h Coo Form 000 D	lant V. lina 40
Complete if the organization answered  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	
(1) Financial derivatives	` '	(C) Wethou of Valuation. Cost of end-of	-year market value
(2) Closely-held equity interests			
(2) Other			
(A)	-		
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments – Program Related. Complete if the organization answered	Ves' to Form 990	Part IV line 11c See Form 990 P	art X line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-o	
(1)	(b) Book value	(c) monea or variation. Cook or one of	or your market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.).			
Part IX Other Assets. Complete if the organization answered	Yes' to Form 990	Part IV line 11d See Form 990 P	art X line 15
	escription		(b) Book value
(1) PAYROLL TAXES RECEIVABLE			2,744.
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B),	line 15.)		2,744.
Part X Other Liabilities.	form 000 Dort IV line 1	10 or 11f Coo Form 000 Dort V line 2F	
Complete if the organization answered 'Yes' to F  (a) Description of liability	(b) Book value		
(1) Federal income taxes	(b) Book value		
(2) PAYROLL TAXES	2,5	53.	
(3)			
(4)			
(5)			
(6)			
<u>(7)</u> (8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	<b>▶</b> 2,5	53.	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo			ility for uncertain
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote	has been provided in Part XI	II	

525,596

Schedule D (Form 990) 2014 CAWACO RESOURCE CONSERVATION & DEVELOPMENT COUNCIL, INC.	3-1027283	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	535,900.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	. 2 e	-21,136.
3 Subtract line 2e from line 1	. 3	557,036.
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.)		
c Add lines 4a and 4b	. 4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	557,036.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	. 1	525,596.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		•
a Donated services and use of facilities		
b Prior year adjustments	-	
c Other losses	-	
d Other (Describe in Part XIII.)	-	
e Add lines 2a through 2d	. 2 e	
3 Subtract line 2e from line 1		525,596.
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.)		

Part XIII Supplemental Information.

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

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.



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Schedule **D** (Form 990) 2014

### SCHEDULE I (Form 990)

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number 63-1027283 CAWACO RESOURCE CONSERVATION & DEVELOPMENT COUNCIL, INC. Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name and address of organization (c) IRC section (b) EIN (d) Amount of cash grant (e) Amount of non-cash (f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, other) (1) ALABAMA HISTORICAL IRONWO 12632 CONFEDERATE PARKWAY MCCALLA AL 35111 63-0587125 25,000 COMMUNITY SUPP (2) CITY OF GRAYSVILLE 246 SOUTH MAIN ST GRAYSVILLE AL 35073 63-6001280 10,000 COMMUNITY SUPP (3) HAY VALLEY VFD 3704 HAY VALLEY RD 72-1346614 PARRISH AL 35580 6,784 COMMUNITY SUPP (4) TOWN OF BLOUNTSVILLE PO BOX 186 BLOUNTSVILLE AL 35031 63-0515571 10,000 COMMUNITY DEVE (5) BLOUNT COUTY EDUCATIONAL PO BOX 603 ONEONTA AL 35121 63-1215348 10,000 EDUCATION (6) ALABAMA 4-H YOUTH DEVEWLO 892 FOUR H ROAD COLUMBIANA AL 35051 63-0792800 6,148 EDUCATION 

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.



### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

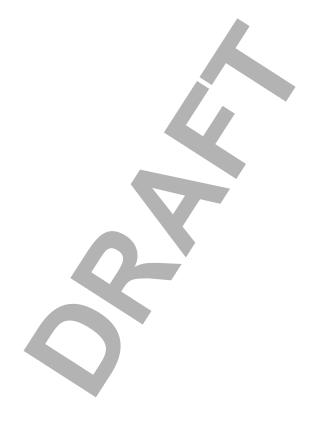
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

	at www.oigewiermeee.	
Name of the organization		Employer identification number
CAWACO RESOURCE	CONSERVATION & DEVELOPMENT COUNCIL, INC.	63-1027283
Pt VI, Line 6	THE FIVE COUNTY COMMISSIONS IN THE CAWACO OPERA OF THE COUNCIL.	TING REGION ARE MEMBERS
,	FORM 990 IS PRESENTED TO THE FINANCE COMMITTEE FO	OR REVIEW AND PROVIDES A
Pt VI, Line 11b	CONSENSUS RECOMMENDATION TO THE FULL BOARD FOR A	APPROVAL.
	COUNCIL MEMBERS ARE REQUIRED TO SIGN AN ANNUAL	CONFLICT OF INTEREST
Pt VI, Line 12d	STATEMENT.	
	COMPENSATION IS DETERMINED BY COUNCIL MEMBERS WE	O ARE COMMUNITY LEADERS
Pt VI, Line 15a	AND INVOLVED IN SIMILAR ACTIVITIES ELSEWHERE.	
	COMPENSATION IS DETERMINED BY COUNCIL MEMBERS WE	O ARE COMMUNITY LEADERS
Pt VI, Line 15b	AND INVOLVED IN SIMILAR ACTIVITIES ELSEWHERE.	



TEEA4901 08/18/14