#### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COUNTIES OF WARREN AND WASHINGTON CIVIC DEVELOPMENT CORPORATION
Organizations Maintaining Donor Advised Funds

Employer identification number \*\*-\*\*\*3734

| -                                | Total number at a 1 c  | (a) Donor advised funds  | (b) Fo   | unds and other accounts  |
|----------------------------------|--|--|--|--|
| 2                                | Total number at end of year  |  |  |  |
| 3                                | Aggregate value of contributions to (during year)  |  | -  |  |
| 4                                | Aggregate value of grants from (during year)   |  |  |  |
| 5                                | Aggregate value at end of year   |  |  |  |
| ,                                | Did the organization inform all donors and donor advisors  | in writing that the assets held in donor ad  | vised funds  |  |
| 6                                | are the organization's property, subject to the organization   | n's exclusive legal control?   |  | Yes  |
| U                                | and grantees, donors, and dono   | or advisors in writing that grant funds can be   | and anh  |  |
|                                  | ion chantable purposes and not for the benefit of the dono   | or or donor advisor, or for any other purpos   | se conferring  |  |
| Pa                               | impermissible private benefit?  rt II Conservation Easements Complete if the   |  |  | Yes 🔲  |
| 1                                | To the distriction Laserner S. Complete if the d   | organization answered "Yes" on Form oor  | , Part IV, line  | 7.   |
| •                                | dipose(s) of conservation easements held by the organization   | ation (check all that apply)   |  |  |
|                                  | Preservation of land for public use (for example, recr   | reation or education) Preservation (   | of a historicall   | y important land area  |
|                                  | Protection of natural habitat  | Preservation of  | of a certified h   | nistoric structure   |
| 2                                | Preservation of open space   |  |  |  |
| 2                                | Complete lines 2a through 2d if the organization held a quaday of the tax year.  | alified conservation contribution in the forr  | n of a consen  | ation easement on the last   |
| _                                |  |  |  | Held at the End of the Tax Ye  |
| a                                | Total number of conservation easements   |  | 2a   |  |
| b                                | rotal acreage restricted by conservation easements   |  |  |  |
| C                                | Number of conservation easements on a certified historic s   | structure included on line 2a  | 100  |  |
| ď                                | Number of conservation easements included on line 2c acc   | Tuired after July 25, 2006, and not  | 60 G 400   |  |
|                                  | on a historic structure listed in the National Register  |  | 2d   |  |
| 3                                | Number of conservation easements modified, transferred, r  |  | <u>u</u>   |  |
|                                  |  |  | ne organizatio   | n during the tax   |
| 4                                |  |  | ne organizatio   | n during the tax   |
| 4<br>5                           | Number of states where property subject to conservation e  | asement is located   |  | n during the tax   |
| _                                | Number of states where property subject to conservation exposes the organization have a written policy regarding the per-  | easement is locatederiodic monitoring, inspection, handling of   |  |  |
| 5                                | Number of states where property subject to conservation endoes the organization have a written policy regarding the perviolations, and enforcement of the conservation easements   | easement is locatederiodic monitoring, inspection, handling of   |  |  |
|                                  | Number of states where property subject to conservation exposes the organization have a written policy regarding the per-  | easement is locatederiodic monitoring, inspection, handling of   |  |  |
| 5                                | Number of states where property subject to conservation endoes the organization have a written policy regarding the perviolations, and enforcement of the conservation easements. Staff and volunteer hours devoted to monitoring, inspecting  | easement is located eriodic monitoring, inspection, handling of it holds? g, handling of violations, and enforcing con   | nservation eas   | Yes N  |
| 5                                | Number of states where property subject to conservation endoes the organization have a written policy regarding the perviolations, and enforcement of the conservation easements   | easement is located eriodic monitoring, inspection, handling of it holds? g, handling of violations, and enforcing con   | nservation eas   | Yes N  |
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|----------------|--|--|--|--|--------------|--------------------------|--------------|-----------------|----------|------|
| 3 U            | Organizations Maintaining Using the organization's acquisition, access   | sion, and other reco   | rds shock are of                       | reasures,  | or Othe      | r Simil                  | ar Accot     | <b>S</b> (conti | nued     | )    |
| C              | ollection items (check all that apply).  | sion, and other reco   | rus, check any of t                    | ne following th  | at make si   | gnificant                | use of its   |                 |          |      |
| а [            | Public exhibition  |  | d Loan or e                            |  |              |                          |              |                 |          |      |
| b [            | Scholarly research   |  |  | exchange progr   | ram          |                          |              |                 |          |      |
| c [            | Preservation for future generations  |  | e Other_                               |  |              |                          |              |                 |          |      |
| 4 P            |  | colloctions and and  |  |  |              |                          |              |                 |          |      |
| 5 D            | rovide a description of the organization's   | collections and expla  | an how they furthe                     | r the organizat  | ion's exem   | pt purpo                 | se in Part   | XIII.           |          |      |
|                | and garlization solicit  | or receive donations   | of art, historical tr                  | easures or oth   | er similar   | eccete                   |              |                 |          |      |
| Part I         | be sold to raise funds rather than to be n   | naintained as part of  | the organization's                     | collection?  |              |                          |              | Yes             |          | □No  |
|                | Lociow and Custodial Affai   | igements Comple  | ete if the organizat                   | ion answered "   | 'Yes" on Fo  | orm 990,                 | Part IV, lir | ne 9, or        |          |      |
| 1a ls          |  | are A, mile Z 1.   |  |  |              |                          |              |                 |          |      |
| 10 15          | the organization an agent, trustee, custon   | dian, or other interme   | ediary for contribut                   | ions or other a  | ssets not i  | ncluded                  |              |                 |          |      |
| b If           | n Form 990, Part X?  | ······   |  | ·····  | •••••        |                          |              | Yes             |          | □No  |
| D II           | "Yes," explain the arrangement in Part XII   | and complete the fo  | ollowing table:                        |  |              |                          |              |                 | 46.      |      |
| -              |  |  |  |  |              |                          |              | Amount          |          |      |
| C Be           | eginning balance   |  |  | •••  |              | 1c                       |              |                 |          |      |
| - / 10         | adition o during the year  |  |  |  |              | 1d                       |              |                 |          |      |
|                | and the defining the year  |  |  |  |              | 1e                       |              |                 |          |      |
|                | 3  |  |  |  |              | 4.5                      |              |                 |          |      |
|                | a the organization include an amount on F  | orm 990. Part X. line  | 21 for escrow or                       | custodial acco   | unt linbilt  | ,                        |              | Yes             | T        | No   |
| D II           | res, explain the arrangement in Part XIII  | . Check here if the ex   | volanation has bee                     | n provided in I  | 7-4 VIII     | •                        |              | 165             | F        |      |
| Part V         | Endowment Funds Complete it  | the organization ans   | swered "Yes" on F                      | orm 990. Part  | V line 10    |                          |              |                 | <u> </u> |      |
|                |  | (a) Current year   | (b) Prior year                         | (c) Two year   | s back (d)   | Three ve                 | ars back   / | (e) Four        | Veare    | hack |
| 1a Be          | ginning of year balance  |  |  | 100  | (4)          | 7 00 y 0.                | NO DOOK (    | e) i oui        | years    | Dack |
| <b>b</b> Co    | ontributions   |  |  |  |              |                          |              |                 |          |      |
| c Ne           | t investment earnings, gains, and losses   |  |  |  |              |                          |              |                 |          |      |
|                | ants or scholarships   |  |  |  |              |                          |              |                 |          |      |
| e Oth          | ner expenditures for facilities  |  |  |  |              |                          |              |                 |          |      |
|                | d programs   |  |  |  |              |                          |              |                 |          |      |
|                | ministrative expenses  |  |  |  |              |                          |              |                 |          |      |
| g End          | d of year balance  |  |  |  |              |                          |              |                 |          |      |
| 2 Pro          | ovide the estimated percentage of the curr   | ont was and balance  | - 0:                                   |  |              |                          |              |                 |          |      |
| a Boa          | ard designated or quasi-endowment  | ent year end balance   | e (line 1g, column (                   | (a)) held as:  |              |                          |              |                 |          |      |
| b Per          |  |  | _%                                     |  |              |                          |              |                 |          |      |
|                |  | %<br>6   |  |  |              |                          |              |                 |          |      |
|                |  | Two cases of the contract of t |  |  |              |                          |              |                 |          |      |
| 3a Are         | percentages on lines 2a, 2b, and 2c show   | ula equal 100%.  |  |  |              |                          |              |                 |          |      |
| oras           | there endowment funds not in the posses<br>anization by:   | ssion of the organiza  | tion that are held a                   | and administer   | ed for the   |                          |              |                 |          |      |
|                |  |  |  |  |              |                          |              | Y               | es       | No   |
| (1)            | Unrelated organizations? Related organizations?  |  | ······································ |  |              |                          |              | 3a(i)           |          |      |
|                |  |  |  |  |              |                          |              | Ba(ii)          |          |      |
|                | are the related organization   | ions iisted as reduire   | ed on Schedule R2                      |  |              |                          |              | 3b              |          |      |
|                | The second of th | DICIADIZATION'S ODGOV  | vment funds.                           |  |              |                          | L            | 55              |          |      |
| all VI         | Land, Buildings, and Equipme   | ent  |  |  |              |                          |              |                 | -11      |      |
|                | Complete if the organization answered  | "Yes" on Form 990,   | Part IV, line 11a. S                   | See Form 990, I  | Part X, line | 10.                      |              |                 |          |      |
|                | Description of property  | (a) Cost or oth  |  | AMPOUNDED BY ANY PROPERTY OF THE PARTY OF TH | (c) Accur    | Committee and the second | (4)          | Pooles          | -1       |      |
|                |  | basis (investme  |  |  | depreci      |                          | (u)          | Book v          | alue     |      |
| la Lanc        | 3  | - CO 7000 Y  |  |  | чэргоо       | audit                    |              |                 |          |      |
| <b>b</b> Build | dings  |  |  |  |              |                          |              |                 |          | _    |
| c Leas         | sehold improvements  |  |  |  |              |                          |              |                 |          |      |
| d Equip        | pment  |  |  |  |              |                          |              |                 |          |      |
| e Othe         | er   |  |  |  |              |                          |              |                 |          |      |
| tal Add        | lines 1a through 1e. (Column (d) must equ  | ial Form 000 Post V  | <u>" 10 </u>                           |  |              |                          |              |                 |          |      |

### COUNTIES OF WARREN AND WASHINGTON CIVIC

Schedule D (Form 990) 2023

| * | * | _ | * | * | * | 3 | 7 | 34 | Ļ | Page 3 |   |
|---|---|---|---|---|---|---|---|----|---|--------|---|
|   |   |   |   |   |   | - | • | -  |   | raue u | , |

| Part VII Investments - Other Securities  | CORPORATION                               |  | **-***3734 Pag   |
|--|---|--|--|
| Complete if the organization answered "Voc"  | on Form 000 D-+ N/ II                     | 44.0   |  |
| Complete if the organization answered "Yes" (a) Description of security or category (including name of security) | on Form 990, Part IV, line                |  |  |
| (4) Financial day (  | (b) Book value                            | (c) Method of valuation: Cost of   | or end-of-year market value  |
| (1) Financial derivatives (2) Closely held equity interests  |   |  |  |
| (3) Other  |   |  |  |
| (A)  |   |  |  |
| (B)  |   |  |  |
| (C)  |   |  |  |
| (D)  |   |  |  |
| (E)  |   |  |  |
| (F)  |   |  |  |
| (G)  |   |  |  |
| (H)  |   |  |  |
| Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))   |   |  |  |
| Part VIII Investments - Program Related.   |   |  |  |
| Complete if the organization answered "Yes" o  | n Form 990. Part IV line                  | 11c See Form 000 Post V line 10  |  |
| (a) Description of investment  | (b) Book value                            | (c) Method of valuation: Cost of   |  |
| (1)  | (a) - a a a a a a a a a a a a a a a a a a | (c) Method of valuation: Cost of   | end-of-year market value   |
| (2)  |   |  |  |
| (3)  |   |  |  |
| (4)  |   |  |  |
| (5)  |   |  |  |
| (6)  |   |  |  |
| (7)  |   |  |  |
| (8)  |   |  |  |
| (9)  |   |  |  |
| otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))  |   |  | And the second s |
| Part IX Other Assets   |   |  |  |
| Complete if the organization answered "Yes" or   | Form 990, Part IV, line                   | 11d See Form 990 Part V line 15  |  |
| (a) De   | escription                                | 10. The second s | (b) Book value   |
| (1)  |   |  | (b) Dook value   |
| (2)  |   |  |  |
| (3)  |   |  |  |
| (4)  |   |  |  |
| (5)  |   |  |  |
| (6)  |   |  |  |
| (7)  |   |  |  |
| (8)  |   |  |  |
| (9)  |   |  |  |
| otal. (Column (b) must equal Form 990, Part X, line 15, col. (E  | 3))                                       |  |  |
| art X Other Liabilities  |   |  | ·  |
| Complete if the organization answered "Yes" on   | Form 990, Part IV, line 1                 | 1e or 11f. See Form 990. Part X line   | 25   |
| (a) Description of liability   |   |  | (b) Book value   |
| (1) Federal income taxes   |   |  | (b) Dook value   |
| (2) DUE TO OTHER GOVERNMENTS   |   |  | 22,400.  |
| (3)  |   |  | 22,400.  |
| (4)  |   |  |  |
| (5)  |   |  |  |
| (6)  |   |  |  |
| (7)  |   |  |  |
| (8)  |   |  |  |
| (9)  |   |  |  |
| tal. (Column (b) must equal Form 990, Part X, line 25, col. (B)  | ))  |  | 20 400   |
| Liability for uncertain tax positions. In Part VIII provide the  |   |  | 22,400.  |

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X Schedule D (Form 990) 2023

COUNTIES OF WARREN AND WASHINGTON CIVIC Schedule D (Form 990) 2023 DEVELOPMENT CORPORATION \*\*-\*\*\*3734 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 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 2b c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 3 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 Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 a Donated services and use of facilities b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART X, LINE 2: AND HAS NOT RECORDED ANY UNRECOGNIZED TAX BENEFITS OR LIABILITY OR PENALTIES

| THE | AGENCY | DOES | NOT | BELIEVE | THAT | IT | HAS | ANY | UNCERTAIN | TAX | POSITIONS |
|-----|--------|------|-----|---------|------|----|-----|-----|-----------|-----|-----------|
|     |        |      |     |         |      |    |     |     |           |     |           |

OR INTEREST.

### SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

2023 Open to Public Inspection

OMB No. 1545-0047

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

| e the amount of the gran nonitoring the use of gran ganizations and Domes can be duplicated if add  (c) IRC section (if applicable)  IRC SEC 115 | nt funds in the Unite   | ed States.   |  | ······                                   | t IV, line 21, for any  (h) Purpose of grant |
|--|---|--|--|--|--|
| ganizations and Domes<br>can be duplicated if add<br>(c) IRC section<br>(if applicable)  | tic Governments. (<br>litional space is need<br>(d) Amount of<br>cash grant | Complete if the orga<br>ded.  (e) Amount of<br>noncash<br>assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal, | (g) Description of                       | (h) Purpose of grant                         |
| (c) IRC section<br>(if applicable)   | (d) Amount of<br>cash grant   | (e) Amount of noncash assistance                                     | valuation (book,<br>FMV, appraisal,                  |  |  |
| IRC SEC 115  | 750,000.  |  |  |  |  |
|  | 1000  |  |  |  |  |
|  |   |  |  |  | CONSTRUCTION EXPENSES                        |
|  |   |  |  |  |  |
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|  |   |  |  |  |  |
|  |   |  |  |  |  |
|  | organizations listed in the   | organizations listed in the line 1 table                             | organizations listed in the line 1 table             | organizations listed in the line 1 table | organizations listed in the line 1 table     |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2023

LHA 332101 11-01-23

| ule I (Form 990) 2023 DEVELOPMENT III Grants and Other Assistance to Domestic India                   | diducte OI-1 15 11         | overningtion                |                                       |   | **-***3734 F                        |
|---|----------------------------|-----------------------------|---------------------------------------|---|-------------------------------------|
| Grants and Other Assistance to Domestic Indiv<br>Part III can be duplicated if additional space is ne | eded.                      | organization answ           | vered "Yes" on Form 9                 | 990, Part IV, line 22.                                |                                     |
| (a) Type of grant or assistance   |                            |                             |                                       |   |                                     |
| (-) Jp grant or addictance  | (b) Number of recipients   | (c) Amount of<br>cash grant | (d) Amount of non-<br>cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistan |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
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|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
| Supplemental Information. Provide the information   | n required in Part I, line | 2; Part III, column         | (b); and any other add                | ditional information                                  |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
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|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |
|   |                            |                             |                                       |   |                                     |

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

LHA

332211 11-14-23

### 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

COUNTIES OF WARREN AND WASHINGTON CIVIC DEVELOPMENT CORPORATION

Employer identification number \*\*-\*\*\*3734

Schedule O (Form 990) 2023

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE COUNTIES OF WARREN AND WASHINGTON CDC IS A NOT-FOR-PROFIT CORPORATION CREATED TO PROMOTE, DEVELOP, ENCOURAGE AND ASSIST IN THE CONSTRUCTION, EXPANSION, AND EQUIPPING OF 501(C)(3) ORGANIZATIONS' FACILITIES IN ORDER TO ADVANCE THE JOB OPPORTUNITIES, GENERAL PROSPERITY, AND ECONOMIC WELFARE OF THE CITIZENS OF WARREN COUNTY AND WASHINGTON COUNTY. THE CORPORATION'S PRIMARY ROLE IS TO PROVIDE FINANCIAL ASSISTANCE AND INCENTIVE TO THE 501(C)(3), NOT-FOR-PROFIT SECTOR IN ORDER TO MAXIMIZE CAPITAL INVESTMENT IN THE ECONOMY OF WARREN COUNTY AND WASHINGTON COUNTY AND TO DEVELOP OPPORTUNITIES FOR EDUCATIONAL AND SERVICE-SECTOR JOB CREATION AND JOB RETENTION WITHIN THE COUNTIES THROUGH THE USE OF ITS OWN ASSETS, ISSUANCE OF QUALIFIED 501(C)(3) BONDS, TAX ABATEMENT AND PRIVATE INVESTMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE COUNTIES OF WARREN AND WASHINGTON CDC IS A NOT-FOR-PROFIT CORPORATION CREATED TO PROMOTE, DEVELOP, ENCOURAGE AND ASSIST IN THE CONSTRUCTION, EXPANSION, AND EQUIPPING OF 501(C)(3) ORGANIZATIONS' FACILITIES IN ORDER TO ADVANCE THE JOB OPPORTUNITIES, GENERAL PROSPERITY, AND ECONOMIC WELFARE OF THE CITIZENS OF WARREN COUNTY AND WASHINGTON COUNTY. THE CORPORATION'S PRIMARY ROLE IS TO PROVIDE FINANCIAL ASSISTANCE AND INCENTIVE TO THE 501(C)(3), NOT-FOR-PROFIT SECTOR IN ORDER TO MAXIMIZE CAPITAL INVESTMENT IN THE ECONOMY OF WARREN COUNTY AND WASHINGTON COUNTY AND TO DEVELOP OPPORTUNITIES FOR EDUCATIONAL AND SERVICE-SECTOR JOB CREATION AND JOB RETENTION WITHIN THE COUNTIES THROUGH THE USE OF ITS OWN ASSETS, ISSUANCE OF QUALIFIED For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

| Schedule O (Form 990) 2023  | Page 6                                    |
|---|---|
| Name of the organization COUNTIES OF WARREN AND WASHINGTON CIVIC DEVELOPMENT CORPORATION                                  | Employer identification number  **-**3734 |
| 501(C)(3) BONDS, TAX ABATEMENT AND PRIVATE INVESTMENT.  |   |
| FORM 990, PART VI, SECTION B, LINE 11B:   |   |
| REVIEWED AND APPROVED BY BOARD PRIOR TO FILING.   |   |
| FORM 990, PART VI, SECTION B, LINE 12C:   |   |
| THE CIVIC DEVELOPMENT CORPORATION COMPLIES WITH THE POLICE WASHINGTON COUNTIES IDA.                                       | CIES OF WARREN &                          |
| FORM 990, PART VI, SECTION C, LINE 19:  |   |
| THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINACIAL INFORMATION AVAILABLE ON THE ORGANIZATION'S WEBSITE AND UPON REQUEST. |   |
| FORM 990, PART XII, LINE 2C:  |   |
| NO CHANGE IN AUDIT PROCESS DURING THE CURRENT YEAR.   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

SCHEDULE R (Form 990)

#### **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

COUNTIES OF WARREN AND WASHINGTON CIVIC

Employer identification number \*\*-\*\*\*3734

DEVELOPMENT CORPORATION

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)
Name, address, and EIN (if applicable) of disregarded entity

(b)
Primary activity

Legal domicile (state or foreign country)

Legal domicile (state or foreign country)

(d)
Total income End-of-year assets
Direct controlling entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. (a) (b) (c) (d) (e) (g) Section 512(b)(13) Name, address, and EIN Primary activity Legal domicile (state or **Exempt Code** Public charity Direct controlling of related organization foreign country) section status (if section entity entity? 501(c)(3)) COUNTIES OF WARREN & WASHINGTON IDA Yes No 5 WARREN STREET GELNS FALLS, NY 12801 INDUSTRIAL DEVELOPMENT NEW YORK 501(C)(1) X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2023

332161 09-28-23 LHA

### COUNTIES OF WARREN AND WASHINGTON CIVIC

332162 09-28-23

| (a) Name, address, and EIN of related organization   | (b)<br>Primary activity                            | (c) Legal domicile (state or foreign | (d) Direct controllingentity | (relate                                       | (related, unrelated, xcluded from tax under |        | (f)<br>re of total<br>acome      | enc             | (g)<br>hare of<br>d-of-year  | Disprop  | h)<br>ortionate<br>tions? | ortionale Code V-L                      |          | (j)<br>General o<br>managin<br>partner? | Perce                            | (k)<br>entage                 |
|--|--|--------------------------------------|------------------------------|---|---|--------|----------------------------------|-----------------|------------------------------|----------|---------------------------|---|----------|---|----------------------------------|-------------------------------|
|  |  | country)                             |                              | section                                       | ns 512-514)                                 |        |                                  | а               | ssets                        | Yes      | _                         | K-1 (Form                               | 1065)    | Yes No                                  | _                                | 7000                          |
|  |  |                                      |                              |   |   |        |                                  |                 |                              |          |                           |   |          |   |                                  |                               |
|  |  |                                      |                              |   |   |        |                                  |                 |                              |          |                           |   |          |   |                                  |                               |
|  |  |                                      |                              |   |   |        |                                  |                 |                              |          |                           |   |          |   |                                  |                               |
|  |  |                                      |                              |   |   |        |                                  |                 |                              |          |                           |   |          |   |                                  |                               |
|  |  |                                      |                              |   |   |        |                                  |                 |                              | 1        |                           |   |          |   |                                  |                               |
| organizations treated as a co  | ganizations Taxable a<br>prporation or trust durin | as a Corpo<br>ig the tax y           | ration or Trust. (<br>ear.   | Complete if                                   | the organization                            | on ans | wered "Yes                       | s" on Fo        | orm 990, F                   | Part IV, | line 34                   | I, because i                            | it had o | one or m                                | ore re                           | lated                         |
| ldentification of Related Organizations treated as a co (a) Name, address, and E of related organization | EIN  |                                      | (b)                          | (c) Legal domicile (state or foreign country) | (d) Direct contro                           |        | (e) Type of e (C corp, S or trus | entity<br>corp, | orm 990, F<br>(f)<br>Share o | f total  |                           | (g)<br>Share of<br>nd-of-year<br>assets | Perc     | (h)<br>entage                           | Gij<br>Sect<br>512(b<br>contro   | lion<br>()(13)                |
| (a)<br>Name, address, and E  | EIN  |                                      | (b)                          | (c) Legal domicile (state or foreign          | (d)<br>Direct contro                        |        | (e)<br>Type of e<br>(C corp, S   | entity<br>corp, | (f)<br>Share o               | f total  |                           | (g)<br>Share of<br>nd-of-year           | Perc     | (h)<br>entage                           | (i)<br>Sect<br>512(b)<br>control | lion<br>o(13)<br>olled<br>ty? |
| (a)<br>Name, address, and E  | EIN  |                                      | (b)                          | (c) Legal domicile (state or foreign          | (d)<br>Direct contro                        |        | (e)<br>Type of e<br>(C corp, S   | entity<br>corp, | (f)<br>Share o               | f total  |                           | (g)<br>Share of<br>nd-of-year           | Perc     | (h)<br>entage                           | Sect<br>512(b<br>contro<br>entit | lion<br>o(13)<br>olled<br>ty? |
| (a)<br>Name, address, and E  | EIN  |                                      | (b)                          | (c) Legal domicile (state or foreign          | (d)<br>Direct contro                        |        | (e)<br>Type of e<br>(C corp, S   | entity<br>corp, | (f)<br>Share o               | f total  |                           | (g)<br>Share of<br>nd-of-year           | Perc     | (h)<br>entage                           | Sect<br>512(b<br>contro<br>entit | ion<br>(13)<br>olled<br>ty?   |

Schedule R (Form 990) 2023

### COUNTIES OF WARREN AND WASHINGTON CIVIC Schedule R (Form 990) 2023 DEVELOPMENT CORPORATION

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\*\*-\*\*\*3734 Page 3 Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Yes No 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity 1a b Gift, grant, or capital contribution to related organization(s) 1b c Gift, grant, or capital contribution from related organization(s) X d Loans or loan guarantees to or for related organization(s) X 1d e Loans or loan guarantees by related organization(s) f Dividends from related organization(s) X 1f g Sale of assets to related organization(s) X 1g h Purchase of assets from related organization(s) 1h i Exchange of assets with related organization(s) X 1i j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) X I Performance of services or membership or fundraising solicitations for related organization(s) X 11 m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) X 1n Sharing of paid employees with related organization(s)
.... X 10 p Reimbursement paid to related organization(s) for expenses 1p q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s) X 1r s Other transfer of cash or property from related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (a) Name of related organization (b) Transaction (d) Method of determining amount involved Amount involved type (a-s) (1) COUNTIES OF WARREN & WASHINGTON IDA 0.BOOK (2)

Schedule R (Form 990) 2023

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) Name, address, and EIN of entity | (b)<br>Primary activity | (c)<br>Legal domicile<br>(state or foreign | (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e)<br>Are all<br>partners se<br>501(c)(3)<br>orgs.? | (f)<br>Share of<br>total | (g)<br>Share of<br>end-of-year | (h) Disproportionate | (i)<br>Code V-UBI<br>amount in box 20<br>of Schedule K-1<br>(Form 1065) | (j)<br>General or<br>managing | (k)<br>Percentage |
|--------------------------------------|-------------------------|--|---|--|--------------------------|--------------------------------|----------------------|---|-------------------------------|-------------------|
|                                      |                         | country)                                   | sections 512-514)   | Yes No   | income                   | assets                         | Yes No               | (Form 1065)   | Yes No                        |                   |
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Schedule R (Form 990) 2023

| Schedule R | (Form 990) 2023          | DEVELOPMENT                 | CORPORATION                              | **-***3734 Page |
|------------|--------------------------|-----------------------------|--|-----------------|
| Fart VII   | Supplemental Info        | ormation                    |  | 1 age :         |
|            | Provide additional infor | nation for responses to que | estions on Schedule R. See instructions. |                 |
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