

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

**2005**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2005 calendar year, or tax year beginning **OCT 1, 2005** and ending **SEP 30, 2006**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> Name of organization <b>GROWTH PARTNERSHIP FOR ASHTABULA CO.</b>		<b>D</b> Employer identification number <b>34-1454129</b>
		Number and street (or P.O. box if mail is not delivered to street address)		Room/suite
		<b>36 W. WALNUT ST.</b>		<b>E</b> Telephone number <b>440-576-9126</b>
		City or town, state or country, and ZIP + 4 <b>JEFFERSON, OH 44047</b>		<b>F</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates?  Yes  No

H(b) If "Yes," enter number of affiliates **N/A**

H(c) Are all affiliates included? **N/A**  Yes  No (If "No," attach a list.)

H(d) Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**G** Website: **WWW.ASHTABULAGROWTH.COM**

**J** Organization type (check only one)  501(c) ( **3** ) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

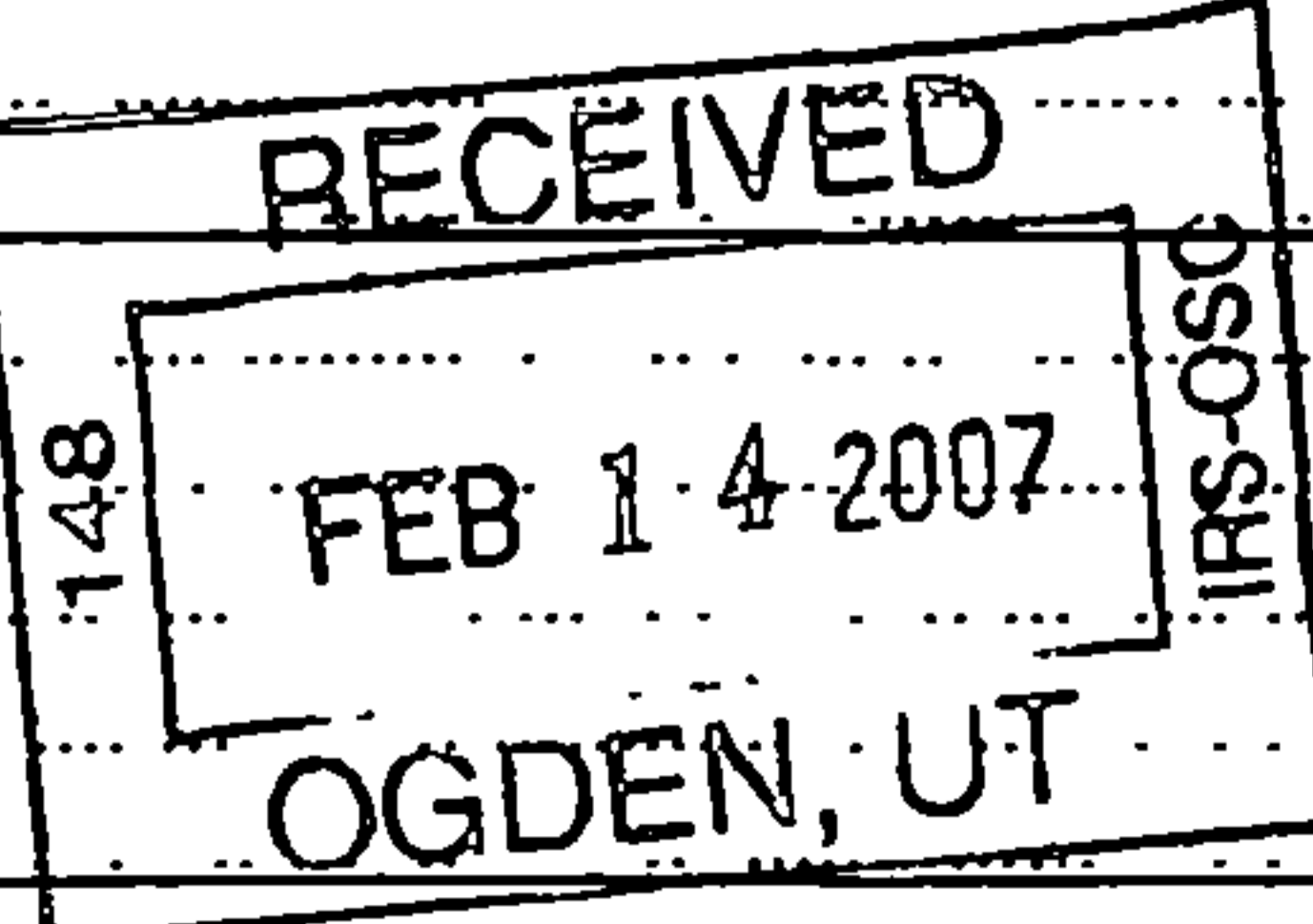
**I** Group Exemption Number **N/A**

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **533,171.**

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:			
	<b>a</b> Direct public support	1a	374,864.	
	<b>b</b> Indirect public support	1b	62,819.	
	<b>c</b> Government contributions (grants)	1c		
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>437,683.</b> noncash \$ )	1d		437,683.
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		
	<b>3</b> Membership dues and assessments	3		
	<b>4</b> Interest on savings and temporary cash investments	4		120.
	<b>5</b> Dividends and interest from securities	5		
	<b>6 a</b> Gross rents <b>SEE STATEMENT 1</b>	6a	6,525.	
	<b>b</b> Less: rental expenses	6b		
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c		6,525.
<b>7</b> Other investment income (describe )	7			
	<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	<b>b</b> Less: cost or other basis and sales expenses	8a		
	<b>c</b> Gain or (loss) (attach schedule)	8b		
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		8d
	<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	<b>a</b> Gross revenue (not including \$ <b>0.</b> of contributions reported on line 1a)	9a	41,830.	
	<b>b</b> Less: direct expenses other than fundraising expenses	9b	44,228.	
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a) <b>SEE STATEMENT 2.</b>	9c		-2,398.
	<b>10 a</b> Gross sales of inventory, less returns and allowances	10a		
	<b>b</b> Less: cost of goods sold	10b		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
Expenses	<b>11</b> Other revenue (from Part VII, line 103)	11		47,013.
	<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		488,943.
	<b>13</b> Program services (from line 44, column (B))	13		552,349.
	<b>14</b> Management and general (from line 44, column (C))	14		
	<b>15</b> Fundraising (from line 44, column (D))	15		
	<b>16</b> Payments to affiliates (attach schedule)	16		
	<b>17</b> Total expenses (add lines 16 and 44, column (A))	17		552,349.
	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18		-63,406.
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19		305,791.
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20		0.
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		242,385.



SCANNED FEB 23 2007

13 6/15

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>8,800.</u> noncash \$ <u>0.</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	22 8,800.	8,800.	STATEMENT 4	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 152,207.	152,207.	0.	0.
26 Other salaries and wages	26 104,306.	104,306.		
27 Pension plan contributions	27			
28 Other employee benefits	28 1,172.	1,172.		
29 Payroll taxes	29 16,225.	16,225.		
30 Professional fundraising fees	30			
31 Accounting fees	31 9,600.	9,600.		
32 Legal fees	32 3,945.	3,945.		
33 Supplies	33 8,141.	8,141.		
34 Telephone	34 11,041.	11,041.		
35 Postage and shipping	35 4,578.	4,578.		
36 Occupancy	36 3,300.	3,300.		
37 Equipment rental and maintenance	37 11,361.	11,361.		
38 Printing and publications	38 6,988.	6,988.		
39 Travel	39 7,248.	7,248.		
40 Conferences, conventions, and meetings	40			
41 Interest	41 28,327.	28,327.		
42 Depreciation, depletion, etc. (attach schedule)	42 29,530.	29,530.		
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g <b>SEE STATEMENT 3</b>	43g 145,580.	145,580.		
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 552,349.	552,349.	0.	0.

Joint Costs. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;  
 (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 5</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
<b>a</b> <u>COMMUNITY PROMOTION AND MARKETING - COORDINATE AND DIRECT PUBLIC AND PRIVATE EFFORTS TO ACHIEVE ECONOMIC PROSPERITY AND IMPROVE THE QUALITY OF LIFE FOR ALL ASHTABULA COUNTY RESIDENTS.</u>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	<b>494,218.</b>
<b>b</b> <u>RIVER PARTNERSHIP - OVERSEE &amp; IMPLEMENT ALL ACTIVITY RELATING TO CLEAN-UP OF TOXIC SEDIMENT FROM THE ASHTABULA RIVER.</u>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	<b>58,131.</b>
<b>c</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f</b> <u>Total of Program Service Expenses (should equal line 44, column (B), Program services) ►</u>	<b>552,349.</b>

Form 990 (2005)

**Part IV Balance Sheets** (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	45	Cash - non-interest-bearing .....	237,193.	45	26,670.
	46	Savings and temporary cash investments .....	16,806.	46	18,910.
	47 a	Accounts receivable .....	1,249.		
		47a			
	b	Less: allowance for doubtful accounts .....			
		47b			
			12,595.	47c	1,249.
	48 a	Pledges receivable .....			
		48a			
	b	Less: allowance for doubtful accounts .....			
		48b		48c	
	49	Grants receivable .....		49	
	50	Receivables from officers, directors, trustees, and key employees .....		50	
	51 a	Other notes and loans receivable .....			
		51a			
b	Less: allowance for doubtful accounts .....				
	51b		51c		
52	Inventories for sale or use .....		52		
53	Prepaid expenses and deferred charges .....	4,441.	53	15,265.	
54	Investments - securities .....		54		
	<input type="checkbox"/> Cost <input type="checkbox"/> FMV				
55 a	Investments - land, buildings, and equipment: basis .....				
	55a				
b	Less: accumulated depreciation .....				
	55b		55c		
56	Investments - other .....		56		
57 a	Land, buildings, and equipment: basis .....	700,591.			
	57a				
b	Less: accumulated depreciation <b>STMT 6</b> .....	69,611.			
	57b				
		645,268.	57c	630,980.	
58	Other assets (describe <b>▶ DEPOSIT</b> ) .....	118.	58	118.	
59	<b>Total assets</b> (must equal line 74). Add lines 45 through 58 .....	916,421.	59	693,192.	
<b>Liabilities</b>	60	Accounts payable and accrued expenses .....	50,000.	60	21,956.
	61	Grants payable .....		61	9,102.
	62	Deferred revenue .....		62	
	63	Loans from officers, directors, trustees, and key employees .....		63	
	64 a	Tax-exempt bond liabilities .....		64a	
	b	Mortgages and other notes payable .....	560,630.	64b	419,749.
		<b>STMT 7</b>			
65	Other liabilities (describe <b>▶</b> ) .....		65		
66	<b>Total liabilities.</b> Add lines 60 through 65 .....	610,630.	66	450,807.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted .....	296,866.	67	233,395.
	68	Temporarily restricted .....	8,925.	68	8,990.
	69	Permanently restricted .....		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds .....		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund .....		71	
	72	Retained earnings, endowment, accumulated income, or other funds .....		72	
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) .....	305,791.	73	242,385.	
74	<b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 .....	916,421.	74	693,192.	





Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b		N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		N/A
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed <u>OH</u>		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	5
91 a	The books are in care of <u>S.R. SNODGRASS, A.C.</u> Telephone no. <u>440-993-2142</u> Located at <u>4134 PARK AVENUE, ASHTABULA, OH</u> ZIP + 4 <u>44004</u>		
b	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)? If "Yes," enter the name of the foreign country <u>N/A</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country <u>N/A</u>	91c	X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>93</b> Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments .....					
g Fees and contracts from government agencies ..					
<b>94</b> Membership dues and assessments .....					
<b>95</b> Interest on savings and temporary cash investments ...			14	120.	
<b>96</b> Dividends and interest from securities .....					
<b>97</b> Net rental income or (loss) from real estate:					
a debt-financed property .....					
b not debt-financed property .....			16	6,525.	
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income .....					
<b>100</b> Gain or (loss) from sales of assets other than inventory .....					
<b>101</b> Net income or (loss) from special events .....			01	-2,398.	
<b>102</b> Gross profit or (loss) from sales of inventory .....					
<b>103</b> Other revenue:					
a <b>MISCELLANEOUS</b> .....			01	3,188.	
b <b>CONSULTING</b> .....			01	43,825.	
c _____					
d _____					
e _____					
<b>104</b> Subtotal (add columns (B), (D), and (E)) .....		0.		51,260.	0.
<b>105</b> Total (add line 104, columns (B), (D), and (E)) .....					51,260.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	NONE

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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

Signature of officer: *[Signature]* Date: 12-7-07 Type or print name and title: \_\_\_\_\_

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: 2-7-07 Check if self-employed:  Preparer's SSN or PTIN: \_\_\_\_\_

Firm's name (or yours if self-employed), address, and ZIP + 4: S. R. SNODGRASS, A.C.  
4134 PARK AVENUE  
ASHTABULA OH 44004

EIN: \_\_\_\_\_ Phone no.: (440) 993-2142

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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Name of the organization **GROWTH PARTNERSHIP FOR ASHTABULA CO.** Employer identification number **34 1454129**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	0	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	0	

**Part III Statements About Activities** (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property? .....		X
b Lending of money or other extension of credit? .....		X
c Furnishing of goods, services, or facilities? .....		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <b>SEE PART V-A, FORM 990</b>	X	
e Transfer of any part of its income or assets? .....		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) .....		X
b Do you have a section 403(b) annuity plan for your employees? .....		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? .....		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? .....		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? .....		X

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(ii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(v). (Also complete the Support Schedule in Part IV-A.)
- 12  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ▶  Type 1  Type 2  Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

**Part IV-A** Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.  
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	638,050.	432,610.	522,935.	541,220.	2,134,815.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	51,555.	42,845.	39,080.	46,145.	179,625.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	5,699.	5,843.	6,401.	7,362.	25,305.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	98,356.	-79,207.	SEE STATEMENT 8	-1,511.	17,638.
23 Total of lines 15 through 22	793,660.	402,091.	568,416.	593,216.	2,357,383.
24 Line 23 minus line 17	742,105.	359,246.	529,336.	547,071.	2,177,758.
25 Enter 1% of line 23	7,937.	4,021.	5,684.	5,932.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 43,555.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 2,177,758.
d Add: Amounts from column (e) for lines: 18 25,305. 19 _____ 22 17,638. 26b _____					26d 42,943.
e Public support (line 26c minus line 26d total)					26e 2,134,815.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 98.0281%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2004) _____ (2003) _____ (2002) _____ (2001) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....		
If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
<hr/>			
<hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
<hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....	33a	
b	Admissions policies? .....	33b	
c	Employment of faculty or administrative staff? .....	33c	
d	Scholarships or other financial assistance? .....	33d	
e	Educational policies? .....	33e	
f	Use of facilities? .....	33f	
g	Athletic programs? .....	33g	
h	Other extracurricular activities? .....	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
<hr/>			
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency? .....	34a	
b	Has the organization's right to such aid ever been revoked or suspended? .....	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.) **N/A**  
 (To be completed ONLY by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group. Check  **b** if you checked "a" and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		<b>N/A</b>	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	<b>36</b>		
37 Total lobbying expenditures to influence a legislative body (direct lobbying) .....	<b>37</b>		
38 Total lobbying expenditures (add lines 36 and 37) .....	<b>38</b>		
39 Other exempt purpose expenditures .....	<b>39</b>		
40 Total exempt purpose expenditures (add lines 38 and 39) .....	<b>40</b>		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000 .....	20% of the amount on line 40 .....		
Over \$500,000 but not over \$1,000,000 .....	\$100,000 plus 15% of the excess over \$500,000 .....		
Over \$1,000,000 but not over \$1,500,000 .....	\$175,000 plus 10% of the excess over \$1,000,000 .....	<b>41</b>	
Over \$1,500,000 but not over \$17,000,000 .....	\$225,000 plus 5% of the excess over \$1,500,000 .....		
Over \$17,000,000 .....	\$1,000,000 .....		
42 Grassroots nontaxable amount (enter 25% of line 41) .....	<b>42</b>		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	<b>43</b>		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	<b>44</b>		

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount .....					0.
46 Lobbying ceiling amount (150% of line 45(e)) .....					0.
47 Total lobbying expenditures .....					0.
48 Grassroots nontaxable amount .....					0.
49 Grassroots ceiling amount (150% of line 48(e)) .....					0.
50 Grassroots lobbying expenditures .....					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities** (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers .....			
b Paid staff or management (Include compensation in expenses reported on lines c through h.) .....			
c Media advertisements .....			
d Mailings to members, legislators, or the public .....			
e Publications, or published or broadcast statements .....			
f Grants to other organizations for lobbying purposes .....			
g Direct contact with legislators, their staffs, government officials, or a legislative body .....			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....			
i Total lobbying expenditures (Add lines c through h.) .....			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.



FORM 990	RENTAL INCOME	STATEMENT	1
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCOME
OFFICE RENTAL, JEFFERSON, OH		1	6,525.
TOTAL TO FORM 990, PART I, LINE 6A			6,525.

FORM 990	SPECIAL EVENTS AND ACTIVITIES				STATEMENT	2
DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME	
PARTNERSHIP AWARDS DAY	41,830.		41,830.	44,228.	-2,398.	
TOTAL TO FM 990, PART I, LINE 9	41,830.		41,830.	44,228.	-2,398.	

FORM 990	OTHER EXPENSES				STATEMENT	3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING		
CONTRACT SERVICES	99,389.	99,389.				
INSURANCE	6,333.	6,333.				
MARKETING EXPENSE	10,883.	10,883.				
DUES & SUBSCRIPTIONS	1,082.	1,082.				
COMPUTER & ACCOUNTING	1,287.	1,287.				
AUTO EXPENSE	5,205.	5,205.				
MISCELLANEOUS	403.	403.				
UTILITIES	10,155.	10,155.				
COPIER EXPENSE	3,397.	3,397.				
MENTORSHIP	7,215.	7,215.				
SECURITY	216.	216.				
BANK FEES	15.	15.				
TOTAL TO FM 990, LN 43	145,580.	145,580.				

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 4

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
DEVELOP/JOBS	BROWN SPRINKLER SERVICE, INC.		NONE	8,800.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				8,800.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III STATEMENT 5

EXPLANATION

TO ACHIEVE ECONOMIC PROSPERITY AND IMPROVE THE QUALITY OF LIFE FOR ALL OF ASHTABULA COUNTY

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 6

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING	606,395.	27,694.	578,701.
FURNITURE AND FIXTURES	28,249.	10,906.	17,343.
EQUIPMENT	40,786.	19,478.	21,308.
VEHICLE	25,161.	11,533.	13,628.
TOTAL TO FORM 990, PART IV, LN 57	700,591.	69,611.	630,980.

FORM 990

OTHER NOTES AND LOANS PAYABLE

STATEMENT 7

LENDER'S NAME

TERMS OF REPAYMENT

ANDOVER BANK

MONTHLY

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
06/20/04	06/20/08	0.	4.22%

SECURITY PROVIDED BY BORROWER

PURPOSE OF LOAN

VEHICLE

VEHICLE

RELATIONSHIP OF LENDER

DESCRIPTION OF CONSIDERATION

FMV OF CONSIDERATION

BALANCE DUE

0.

11,555.

LENDER'S NAME

TERMS OF REPAYMENT

ANDOVER BANK

MONTHLY

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
10/22/04	05/08/08	0.	3.25%

SECURITY PROVIDED BY BORROWER

PURPOSE OF LOAN

BUILDING

BUILDING

RELATIONSHIP OF LENDER

DESCRIPTION OF CONSIDERATION

FMV OF CONSIDERATION

BALANCE DUE

0.

408,194.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B

419,749.

SCHEDULE A	OTHER INCOME			STATEMENT	8
DESCRIPTION	2004 AMOUNT	2003 AMOUNT	2002 AMOUNT	2001 AMOUNT	
LOSS ON SALE	-9,189.	-79,207.	0.	-1,511.	
OTHER	107,545.	0.	0.	0.	
TOTAL TO SCHEDULE A, LINE 22	98,356.	-79,207.	0.	-1,511.	

GROWTH PARTNERSHIP OF ASHTABULA COUNTY  
SCH A - LIST OF TRUSTEES

TRUSTEE

BUSINESS ADDRESS

MARK WINCHELL	ACCVB - 1850 AUSTINBURG ROAD AUSTINBURG, OH 44010
DR. JEROME BROCKWAY	ACJVS - BOARD OF EDUCATION 1565 STATE RT 167 JEFFERSON OH 44047
MS. PAT WESTON-HALL	ACMC - 2420 LAKE AVENUE ASHTABULA OH 44004
MR. MARTIN R. COLE	ANDOVER BANK - PO BOX 1300 ANDOVER OH 44003
MR. JAMES KANICKI	ARTHUR LOUIS STEEL CO. - PO BOX 518 ASHTABULA OH 44005-0518
MR. JAMES TIMONERE	ASHTABULA AREA CHMBR OF COMMRC - 4536 MAIN AVE ASHTABULA OH 44004-6925
MS. MICHELLE LAVECK	ASHTABULA COUNTY BUILDERS ASN - P.O. BOX 745 ASHTABULA OH 44005-0745
MR. JOE MOROSKI	ASHTABULA CNTY COMMISSIONER - 25 W JEFFERSON STREET JEFFERSON OH 44047
BROWN MEMORIAL HOSPITAL	BROWN MEMORIAL HOSPITAL - 158 WEST MAIN ROAD CONNEAUT OH 44030
MR. DAVID PUNKAR	C W OHIO, INC. - 1209 MAPLE AVENUE CONNEAUT OH 44030
MR. PHIL VARKETTE	CITY OF ASHTABULA - 4717 MAIN AVENUE ASHTABULA OH 44004
MR. DOUG LEWIS	CITY OF CONNEAUT - 294 MAIN STREET CONNEAUT, OH 44030
MS. BONNIE BROAD	CONNEAUT LEATHER, INC. - 494 EAST MAIN ROAD CONNEAUT OH 44030
MR. DAVID FRENCH	D & H LAND CO. - 204 EAST MAIN STREET ANDOVER OH 44003
MS. RHONDA APPLETON	DELTA RAILROAD CONSTRUCTION, INC. - 2648 W PROSPECT RD ASHTABULA OH 44004
MR. J. P. DUCRO	DUCRO FUNERAL SERVICES - 4524 ELM AVENUE ASHTABULA OH 44004
MR. ROBERT MAJIKAS	DOMINION EAST OHIO - 29555 CLAYTON AVENUE WICKLIFFE OH 44092
MS. CAROLYN ANGELOTTI	EMBARQ - 220 SOUTH PARK WARREN OH 44481
MS. SERENE FARMER	1094 TOTE ROAD AUSTINBURG OH 44010
MS. MARY BETH CARROLL	FIRST ENERGY FOUNDATION - 76 SOUTH MAIN STREET AKRON OH 44308
MR. ROBERT NIEMI	FIRST MERIT PEOPLES BANK - 4200 PARK AVENUE ASHTABULA OH 44004
MR. FRED LEITERT	GABRIEL PERFORMANCE PRODUCTS L.L.C. - PO BOX 488 ASHTABULA OH 44005-0488
MR. BOB VUCENOVICH	GENERAL ALUMINUM MFG. CO. - PO BOX 28 CONNEAUT OH 44030
MR. JIM PEARSON	CITY OF GENEVA - 44 NORTH FOREST STREET GENEVA OH 44041
MS. PAT WESTON-HALL	GLENBEIGH HOSPITAL - PO BOX 298 ROCK CREEK OH 44084
MR. RICHARD SELIP	GRAND RIVER RUBBER & PLASTICS CO. - P O BOX 477 ASHTABULA OH 44005-0477
MR. GEORGE CSEPEGI	HAVE, INC. - PO BOX 912 ASHTABULA OH 44005-0912
MR. LEWIS H. SHILEY	INFINITY RESOURES, INC. - 225 BROAD STREET CONNEAUT OH 44030
MR. ROB SCHIMMELPFENNIG	INTERMESSAGE.COM - 38721 MENTOR AVENUE WILLOUGHBY OH 44094
MR. PETER HUGGINS	ITEN INDUSTRIES, INC. - P O BOX 2150 ASHTABULA OH 44005-2150
MR. HARRY WARD	K & H TRUCKING, INC. - PO BOX 1764 ASHTABULA OH 44005-1764
MR. RUSS TUCHOLSKI	KENNAMETAL, INC. - 180 PENNIMAN ROAD ORWELL OH 44076
MS. SUE STOCKER	KSU ASHTABULA CAMPUS - 3325 W 13th STREET ASHTABULA OH 44004
MR. DAVID P. BOGARDUS	KEY FOUNDATION - 4717 MAIN AVENUE ASHTABULA OH 44004
MR. LEE DEEMERS	KINDER MORGAN/PINNEY DOCK - P O BOX 41 ASHTABULA OH 44005-0041
MR. RONALD KISTER	KISTER CONSTRUCTION - P O BOX 768 ASHTABULA OH 44005-0768
MR. DONALD KOSKI	KOSKI CONSTRUCTION COMPANY - P O BOX 1038 ASHTABULA OH 44005-1038
MS. JEANETTE PETROLIA	LODGE & CONFERENCE CTR GENEVA STATE PARK - 4888 SR 534 GOTL OH 44041
MR. G. RICHARD COBLITZ	A. LOUIS SUPPLY COMPANY - 5610 MAIN AVENUE ASHTABULA OH 44004
DAVID ROZNOWSKI	LYONDELL CHEMICAL CO. - 2900 MIDDLE ROAD ASHTABULA OH 44004
MR. TIM EIPPERT	MC SIGN CO., INC. - 1713 EAST 51 STREET ASHTABULA OH 44004
MR. RICH GANSHEIMER	MANAGEMENT & TRAINING CORPORATION - PO BOX 8000 CONNEAUT OH 44030
MR. RICHARD MORRISON	MFG FOUNDATION - P O BOX 675 ASHTABULA OH 44005-0675
MRS. ANNMARIE MIHOCI	MOHAWK FINE PAPERS, INC. - 6800 CENTER ROAD ASHTBULA, OH 44004
MR. THOMAS H. NELSON	NELSON SAND & GRAVEL, INC. - PO BOX 466 KINGSVILLE OH 44048-0466
NE OHIO UNISERV COUNCIL	NORTHEAST OHIO UNISERV COUNCIL - 5804 HEISLEY ROAD MENTOR OH 44060
MS. NANCY KISTER	O&P OIL & GAS, INC. - PO BOX 1298 ANDOVER OH 44003
MR. WILLIAM DINGLEDINE	OHIO AMERICAN WATER COMPANY - 2905 NORTH BEND ROAD ASHTABULA OH 44004
MR. TOM PICKEN	PICKEN'S PLASTICS - PO BOX 127 JEFFERSON OH 44047
MS. TAMMY MATLOCK	PLASTICOLORS, INC. - P O BOX 816 ASHTABULA OH 44005-0816
MR. JAMES SONG	PLASTPRO INC - 4737 KISTER COURT ASHTABULA OH 44004
MR. GEORGE PRIMBAS	PRAXAIR INC. - 3102 LAKE ROAD EAST ASHTABULA OH 44004
MR. KEN LAZO	PREMIX, INC. - P O BOX 281 N. KINGSVILLE OH 44068
MRS. LOUISE RAFFA	ROBT. S. MORRISON FOUNDATION - PO BOX 580 ASHTABULA OH 44004-0580
MR. EDWARD DUNLAP	SAYBROOK INVEST. CORP. - ONE VICTORIA SQUARE, STE 300 PAINESVILLE OH 44077
MS. PATTY SHELLS	SKY BANK - 4366 MAIN AVENUE ASHTABULA OH 44004
MR. JOHN SMOLEN	SMOLEN ENGINEERING LTD - 1876 SR 46 N JEFFERSON OH 44047
MR. ED LOOMAN	THE STAR BEACON - PO BOX 2100 ASHTABULA OH 44005-2100
MR. LOUIS DEJESUS	THIRD DIMENSION, INC. - PO BOX 309 GENEVA OH 44041-0309
MR. ROB SCHIMMELPFENNIG	TRUE NORTH CHRYSLER JEEP DODGE - PO BOX 38 KINGSVILLE OH 44048
MR. JAMES STROUD, JR.	US BANK - 4717 PARK AVENUE ASHTABULA OH 44004
MR LARRY BOTTOMS	VILL. OF ORWELL - PO BOX 56 ORWELL, OH 44076
MS. CHERYL SMITH VINROE	VILLAGE OF ANDOVER - PO BOX 1267 ANDOVER OH 44003-1267
STUART W. CORDELL, ESQ.	WARREN & YOUNG PLL - P O BOX 2300 ASHTABULA OH 44005-2300
MR. TONY MARTINO	WEK INDUSTRIES, INC. - PO BOX 167 JEFFERSON OH 44047
MARK JARRELL	WORTHINGTON CYLINDERS - 863 SR 307 JEFFERSON OH 44047