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## Form **990-EZ**

## Short Form Return of Organization Exempt From Income Tax

2009

OMB No. 1545-1150

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2009 calendar year, or tax year beginning , 2009							, 2009, a	and end	nd ending , 20							
	<b>B</b> c	Check if applicable Address change		Please							D Employer identification nu					
				use IRS label or	Missouri A	Association of	Prosecuting Atto	rneys					43-1623856			
	=	lame cha	-	print or	Number and	d street (or P O. b	ox, if mail is not deliv	ered to street	address)	Room/s	m/suite E Tele		lephone number			
	=	nıtıal retu: Terminate		type. See	c/o 1010 B	Boonville Aven	ue			201	17		4	17-868	8-4061	
	=	vmended		Specific Instruc-	City or town	n, state or country	, and ZIP + 4		t			F Grou	F Group Exemption			
	=		n pending	tions.	Springfield	d, MO USA 65	802-3804						ımber ▶			
	=	• Sect	ion 501(c)(3)	organiz	ations and	4947(a)(1) non	exempt charitable	e trusts mu	st attach	G	Accou	nting M	Method: 🗸 Cash 🗌 Accrual			
				-			990 or 990-EZ).					(specify				
										ıf the	the organization is not					
											attach Schedule B (Form 990,					
	J Tax-exempt status (check only one) —											,				
		Check ▶ ☐ If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally										not m	ore th	an \$25.000. A		
		Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return											, , , , , , , , , , , , , , , , , ,			
														175,239		
	_	art I					in Net Assets						ction	s for	Part I.)	
		1					nounts received						1		45,595	
		2		_	-		ment fees and o						2		129,458	
		3	•										3		0	
9		4	Investment	•									4		186	
2010		5a	Gross amo	unt fro	n sale of a	assets other th	nan inventory		5a			0		-		
எ		b	Less: cost	or othe	r basis and	d sales expen	ses		5b			0				
<b>€</b>		С					an inventory (Sub		b from lir	ne 5a)			5c	1	0	
	ne	6										· 🗆				
É	Revenue	а														
	è		reported on line 1)								o					
	_	b									0					
岩		С									[	6c		0		
氢		7a		Gross sales of inventory, less returns and allowances							o					
8		b	Less: cost		-			K			<u> </u>	\ 0				
SCANNED JUN		С		_		ales of invento	ry (Subtract line	7b from line	e 7a)' .		. 10	<u>ة أ</u> وّ	7c		0	
-		8	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)'								_ "	8		0		
		9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8									<b>7</b> ►	9		175,239	
•		10							-	>====×		<b>≨</b> 1.	10		0	
		11	Grants and similar amounts paid (attach schedule)									11	-	0		
	တ္ဆ	12	Salaries, other compensation, and employee benefits							12		0				
	Expenses	13	Professional fees and other payments to independent contractors								1	13		11,093		
	be	14	Occupancy	upancy, rent, utilities, and maintenance								1	14		0	
	ũ	15	Printing, publications, postage, and shipping								[	15		0		
		16	Other expenses (describe conferences/meetings (excl line 13);NDAA contribution (2,000)								) [	16		96,655		
		17	Total expenses. Add lines 10 through 16									17		107,748		
	S	18	Excess or (	deficit)	for the yea	ar (Subtract lir	ne 17 from line 9	)				[	18		67,491	
	Net Assets	19		Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with												
			end-of-yea	r figure	reported of	on prior year's	return)					[	19		22,854	
		20	Other chan	iges in i	net assets	or fund balan	ces (attach expl	anation) .				[	20	_	0	
	z	21					r. Combine lines						21		90,345	
	Pá	art II	Balance	Shee	ts. If Total	assets on line	e 25, column (B)	are \$1,250	,000 or m	nore, fil	le Forr	n 990 i	nstea	ad of I	Form 990-EZ.	
			(See the instructions for Part II.)  (A) Beginn						nning of	year	B) End of year					
	22	Ca	sh, savings,	d and buildings						22	2,854	22	90,345			
	23	Lar	nd and build										23	0		
	24	Oth	Other assets (describe ►)    Total assets							0	24	0				
	25	To								22	2,854		90,345			
	26	To	tal liabilitie:	s (desci	ıbe ►					_) [_			0	26	0	
_	27	Ne	t assets or	fund b	alances (li	ne 27 of colur	nn (B) <b>must</b> agr	ee with line	21) .			22	2,854	27	90,345	
Ī	For	Privacy	Act and Pa	perwork	Reduction	n Act Notice. se	ee the separate in	structions.		Cat.	No 106	421		Form	990-EZ (2009)	

Form	990-EZ (2009)					Page 2			
Par	III Statement of Program Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses			
Wha	t is the organization's primary exempt purpose?	Education/training of prosecuting attorneys				uired for section			
	cribe what was achieved in carrying out the org	janization's exempt purpo	ses. In a clear a	nd concise	e 501(c)(3) and 501(c)(4)				
man	ner, describe the services provided, the number of	of persons benefited, and	other relevant info	rmation for		nizations and section (a)(1) trusts; optional			
each	program title.					thers)			
28	Fall Statewide Training, September2-4, 2009. Educat	1							
	(e.g., caselaw update, US Supreme Court cases, elec	}							
	expertise, and meet CLE requirements. 598 prosecut	-							
		includes foreign grants, ch		. ▶ □	28a	51,056			
29	Spring Statewide Training, April 8-10, 2009. Education				1200				
25	(e.g., caselaw update, dealing with difficult witnesse								
	and expertise, and meet CLE requirements. 522 pros								
		20-	44.006						
		includes foreign grants, ch			29a	41,086			
30	Elected Prosecutor Meeting, October 15-16, 2009. Ed								
		subjects (e.g., developing effective responses for domestic and sexual violence, no refusal policies in DWI							
	cases) to enhance prosecutor competence, expertis								
		includes foreign grants, ch	eck here	. ▶ ⊔	30a	6,162			
31	Other program services (attach schedule)								
	<del></del>	includes foreign grants, ch		. ▶ 🗓	31a	N/A			
32	Total program service expenses (add lines 28a t			<u> ▶</u>	32	98,304			
Par	List of Officers, Directors, Trustees, and Key		ven if not compensa			ctions for Part IV.)			
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribution employee benefit		(e) Expense account and			
	(a) Name and address	devoted to position	enter -0)	deferred compe		other allowances			
Dwig	jht K. Scroggins, 411 Jules, Room 132,	Burnishana & Birnatan E							
	St. Joseph, MO 64501	President & Director, 5	0		0	0			
Dear	Dankelson, 601 Pearl Street, Suite 100								
	Joplin, MO 64801	President Elect/Director, 5	o		0	0			
Davi	d A. Baird, 118 East Third Street,								
	Maryville, MO 64468	Secretary/Director, 3	o		0	0			
Darr	ell L. Moore, 1010 Boonville Avenue	Treasurer/Director, 5							
	Springfield, MO 65802		0	i	0	a			
lonr	ifer M. Joyce, 1114 Market, Room 401				<u>_</u>	<del>_</del>			
36111		lm. Past Pres./Director, 5	o	0					
Dab.	St. Louis, MO 63101					+			
Kobe	ert McCulloch, 100 S. Central Avenue, 2nd Floor	Director, 5			0				
	Clayton, MO 63105		U	1	U				
Kob	ert George, 1 Courthouse Sq., Suite 203	Director, 2							
	Mt. Vernon, MO 65712		0		. 0	0			
Mike	Fusselman, 200 E. Rollins	Director, 2			_	_			
	Moberly, MO 65270	·	0		- 0	0			
Stev	e Sokoloff, P.O. Box 864	Director, 5							
	Kennett, MO 63857		0		0	0			
Johr	T. Kay, 405 N. High Street	Director, 4							
	California, MO 65018		0		0	0			
Mich	ael S. Wright, 104 West Main, Suite E	Director, 5							
	Warrenton, MO 63383	Director, 5	0		0	0			
Mike	Hazel, 800 Ward Avenue	Dimentar 2							
	Caruthersville, MO 63830	Director, 2	0		0	0			
				-					
_									
				<del></del> -					
		_							

Part	Other Information (Note the statement requirements in the instructions for Part V.)						
			Yes	No			
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	į	<b>\</b>			
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓			
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.						
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		-			
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36					
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0						
b	Did the organization file Form 1120-POL for this year?	37b		✓			
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		<b>√</b>			
b	If "Yes," complete Schedule L, Part II and enter the total amount involved						
39	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on line 9						
b	Gross receipts, included on line 9, for public use of club facilities						
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶						
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified		-,	<del>-</del>			
	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	40b					
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958						
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization						
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		✓			
41	List the states with which a copy of this return is filed. ▶ none (not required in Missouri)						
42a	The organization's books are in care of ▶ Darrell L. Moore Telephone no. ▶ 4	17-86	B-4061				
	Located at ► 1010 Boonville Avenue, Springfield, MO ZIP + 4 ►						
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, secunties account, or other financial		Yes	No			
	account)?	42b		✓_			
	If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank						
	and Financial Accounts.						
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		✓			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. •	<b></b>			
	and enter the amount of tax-exempt interest received or accrued during the tax year						
		[	Yes	No			
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of						
	Form 990-EZ	44		1			
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If						
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		✓			
	<del>a</del>	-nnn	E7				

Form **990-EZ** (2009)

Part VI

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	section 4947(a)(1) i 17(a)(1) nonexempt ad 51.	nonexempt charit charitable trusts m	able trusts only. A nust answer question	II secti ons 46-	ion -49b	)
47	Did the organization engage in direct or indirect candidates for public office? If "Yes," complete so Did the organization engage in lobbying activities is the organization a school as described in section.	Schedule C, Part I . s? If "Yes," complete	Schedule C, Part II		46 47 48	es/	No
ь 50	Did the organization make any transfers to an ex If "Yes," was the related organization a section 5 Complete this table for the organization's five his employees) who each received more than \$100,000 completes than \$100,000 complexes.	27 organization? ghest compensated e					d key
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	<u>-</u>	(e) Expense		nd
					-		
						-	
	Total number of other employees paid over \$100	,000 ▶					
	Complete this table for the organization's five h \$100,000 of compensation from the organization			actors who each rece	eived m	nore	than
	(a) Name and address of each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Comp	ensat	tion
d	Total number of other independent contractors e	ach receiving over \$1	100,000 ▶				_
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration						
Sign Here	Signature of officer  Darrell L. Moore, Treasurer  Type or over some and tyle	** <u> </u>		Date 13	<i>,</i> 24	סוכ	<u>)                                    </u>
Paid Prepare	Type or print name and title  Preparer's signature  r's	Dat	te Check if self- employed ▶	Preparer's identifying num	ber (See in	nstructi	ons)
Use Onl	Firm Shame (Oi	above? See instructi	ions	Phone no. ►	Yes	□ N	