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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

2009
Open to Public Inspection

Name of the organization	Employer identification number	
Central Missouri Area Agency on Aging	43	1015163
Part VI, Section A, Line 11a:		
A gain of the late of the Change of the Change of Change	4	
A copy of the form is reviewed by the governing committee of the Board of Direc	tors.	
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Part VI, Section B, Line 12c:		
An annual form must be completed by all board members.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Part VI, Section B, Lines 15b and c:		
Part VI, Section B, Lines 150 and C:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Outside consultant proposed wage and salary plan for Board review and approve	ıl.	
Part VI, Section B, Line 19:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
All of the information is available on the organization's website.		
All of the illigituation is available of the eigenfactor a warperer		
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