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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

		enue Service	1	► The organization may have to use a copy of this return to satisfy state reporting	ng requireme	nts	Open t	o Public Ins	pection
	For th	ne 2009 calendar	r year,	or tax year beginning 10/01 , 2009, and ending	9/3	0	, 2	2010	
		f applicable		C		D Employ	er Identifica	tion Number	
_		Pie	ease use RS label	MARKET LUBBOCK ECONOMIC		75-2	262135	.3	
	\vdash	ا آ	or print	DEVELOPMENT CORPORATION	ļ ī	E Telepho			
	\vdash	•	or type. See	1500 BROADWAY, SUITE 600		(80	5) 7/10	-4500	
	\vdash	1	specific Instruc-	LUBBOCK, TX 79401	-	(00)	3) 143	4300	
	∐™	ermination	tions			_		C C11	7.00
	L Ar	mended return				G Gross re		6,611,	
	L_ Ap	oplication pending F	Name a	COLLIN CODOTATION	l(a) Is this a			≓'''	X No
		,			I(b) Are all a If 'No.' a		uaea? (see instruc	tions) Yes	∐ No
I	Tax	-exempt status_	X 501	(c) (4) ◀ (insert no) 4947(a)(1) or 527			•	,	
J	We	bsite: ► N/A			H(c) Group ex	emption nu	mber ►		
$\overline{\mathbf{K}}$	Form	n of organization	Corpora	ition Trust Association Other L Year of Formatio	on	Ms	tate of lega	I domicile TX	
	ırt I	Summary		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
تنا				ganization's mission or most significant activities THE MISSI	ON OF	MARKE	T LUBE	BOCK	
	'			OPMENT CORPORATION IS TO ENHANCE THE AREA					OTNG
Activities & Governance	İ	TOOMONIC I	JUBE Sere	UNEMPLOYED AND GENERAL SOCIAL AND ECONOMI	IC WELL	FARE A	MD WE	I.I. RETNO	OF
ja L		CITIZENS 1			FC DET	- AMENIA A		777 274	2
ě	2			if the organization discontinued its operations or disposed of mor	e than 25	% of its	assets		
ő				bers of the governing body (Part VI, line 1a)	0 111011 20	10 01 110	3		8
প্				t voting members of the governing body (Part VI, line 1b)			4		8
ţ	•			yees (Part V, line 2a)			5		22
	ł		•	eers (estimate if necessary)			6	-	8
¥				ousiness revenue from Part VIII, column (C), line 12			7 a		0.
				taxable income from Form 990-T, line 34			7 b		0.
					Pri	ior Year		Current Y	ear
	8	Contributions ar	nd arar	ts (Part VIII, line 1h)		703,7	31.	6,514	
e	9		_	ue (Part VIII, line 2g)	, , , , , , , , , , , , , , , , , , ,	,,,,,,			,
Revenue	10			art VIII, column (A), lines 3, 4, and 7d)		33,9	05	18	,604.
Be	11			II, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	87,5			,265.
	12			nes 8 through 11 (must equal Part VIII, column (A), line 12)	6	825,1		6,611	
				punts paid (Part IX, column (A), lines 1-3)		464,1	$\overline{}$	3,742	
	13				 	, 404, 1	10.	3,712	, 100.
= 7	14			members (Part IX, column (A), line 4)	1	004 1	E 0	025	120
⊃, δ	15		-	nsation, employee benefits (Part IX, column (A), lines 5-10)	1,	,084,1	36.	923	<u>, 438.</u>
ூ (தை∪்து Expenses	16 a	Professional fur	ndraisir	g fees (Part IX, column (A), line 11e)					
∌ ဋိ	b	Total fundraisin	g expe	nses (Part IX, column (D) line 2					
ூயி				X, column (A), lines 12 nd, 117 241)	2.	, 191, 5	64.	1,638	,886.
T 0	1			nes 13-17 (must equal Part IX, column (A), (6) 25)		,739,8		6,306	
J I	10	Povonuo loss o	vnanca	s Subtract line less tromplies 12 5 7111	· · · · · · · · ·	85,3			, 277.
-	13	Revenue less e.	xpense	S Subtract line to forthing 12 (20).	 				
Net Assets or Fund Balances						ning of Y		End of Ye	
300	20	Total assets (Pa				<u>, 876, 1</u>		6,677	
# E	21	Total liabilities ((Part X	, line 26)		,220,9		3,716	·
	22	Net assets or fu	and bal	ances Subtract line 21 from line 20	2,	<u>, 655, 1</u>	.31.	2,960	<u>, 411 .</u>
Pa	art II	Signatur	e Blo	:k					
		Under penalties o	of perjury,	I declare that I have examined this return, including accompanying schedules and state Declaration of prepayer (other than officer) is based on all information of which prepar	ments, and t	o the best o	f my knowle	edge and belief,	ıt ış
		true, correct, and	complete	Beclaration of preparer (other than officer) is based on all information of which prepar	er nas any ki	nowleage	1		
Sig	an	Xan	کھیا	Solveton	1	7/8	37//)		
He		Sygnature of	officer (Date	9	•		
		دول کا	na i	Schueton CFO					
		Type or print	name an	d title	-	-			
				Date	Chr	eck if	Prepa	arer's identifying instructions)	number
Pa	id	1			self	f-	(See	instructions)	
Pr		Preparer's signature	רדם ►	K MARTIN WILL Waster 7/27/1	r lem	ployed		911352	
	rer's	 -			 		Įr U(1711334	
Üs		Firm's name (or yours if self-		INSON BURDETTE MARTIN & SERIGHT, LLP			- 040	0000	
Or		employed), address, and		6 SLIDE ROAD SUITE 301	EIN		5-248		
		ZIP + 4		BOCK, TX 79424	Pho	one no	(000)		33
Ма	y the	IRS discuss this	return	with the preparer shown above? (see instructions)				X Yes	No
0.4		. Duting and A skipper	d Dan-	muculs Deduction Act Notice, see the congrete instructions		TEE A0113	12/20/00	Form 90	n (2000)

Га	Checkist of Required Schedules			
•	-		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		_
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX 			
•	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
,	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
13	Is the organization a school described in section $170(b)(1)(A)(ii)^2$ If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
١	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

Form.990 (2009) MARKET LUBBOCK ECONOMIC

Part IV Checklist of Required Schedules (continued)

		1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		X
t	b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28 a	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member)	20.		v
29	was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	_X_	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35	_X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38_	Х	

BAA

Form **990** (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance 1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns Enter -0- if not applicable	Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.	Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	х	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a 22		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4a 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)? 4a		Х
b 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		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	į	Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization		Х
solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not		
deductible? 6b		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?		
b Did the organization make any distribution to a donor, donor advisor, or related person? 9b		
10 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on Part VIII, line 12		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders.		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		1
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		<u> </u>

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec.	tion A.	Governin	g Boay	and I	nanag	Jemer	<u> </u>											—		
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		e number of v e number of v	•		_		-	-					1				8			
			•			· ·										11			ļ	
	officer, o	officer, directi Iirector, truste	ee or key	employ	ee?												<u> </u> -	2		Х
3	Did the o	organization d rs, directors o	elegate r trustee	control o s, or key	over ma y emplo	anagen oyees t	nent d to a m	duties d nanage	custon ment	narily p compa	erforme ny or o	ed by o ther pe	r unde rson?	er the d	irect s	upervisi	on	3		Х
4	Did the d	organization n	nake any	signific	ant cha	anges t	o its c	organız	zation	al docu	ments						<u> </u>	4		Χ
	since the	e prior Form 9	90 was	filed?																
5 6		organization b e organization			_			materia	al dive	ersion o	f the or	ganızat	lion's	assets?	•			5 6		X
		e organization						her pe	rsons	who m	ay elec	t one o	r mor	e mem	bers o	f the		-		
	governin	ig body? decisions of t															_	7a 7b		X X
	,		J	Ū				-						•				, D	\neg	
8	Did the o	organization o wing	ontempo	raneous	sly docu	ument i	the m	eetings	s held	l or writ	ten act	ions un	idertal	ken dur	ing the	e year b	У			
•	a The gov	erning body?															_	8a	X	
ı	b Each co	mmittee with	authority	to act o	on beha	alf of th	ne gov	erning	body	7								8ь	Х	
9	Is there organiza	any officer, d ition's mailing	rector or	trustee	, or key s, <i>prov</i>	y emplo ude the	oyee l	listed ii es and	n Part I addr	t VII, Se esses <i>ii</i>	ection A	A, who dule Q	canno	t be rea	ached	at the		9		Х
Sec		Policies	(This	Sectio	n B re	eques	ts ını	forma	ation	about	polic	ies no	t req	uıred	by th	e Inter	nal			
Rev	enue Code	e)				•														
																			Yes	No
10 a	a Does the	e organization	have lo	cal chap	ters, br	ranches	s, or a	affiliate	es?								1	0 a		Χ
ı	b If 'Yes,'	does the organiches to ensu	inization ire their (have wi	ritten pe	olicies consist	and p	rocedu	ures g se of	overnin	ig the a	ctivities	s of si	uch cha	pters,	affiliate	s, 1	0 ь		
		organization															1	1	Х	
		n Schedule															0			-
		e organization																2a	Х	
		ers, directors						_		_			its tha	it could	give r	ıse	1	2b	Х	
•	c Does the	e organization e O how this	regularl	y and co	onsister E SCI	ntly mo	nitor :	and er	nforce	compli	ance w	ith the	policy	r? If 'Y∈	s,' de	scribe ir	, 1	2 c	Х	
13		e organization															1	3	Х	
14		e organization							estruc	tion po	licv?						1	4	Х	
15	Did the	process for de	eterminin	ig comp	ensatio	n of the	e follo	owing t	persor	ns inclu	de a re				y ınde	penden	t			
	•	, comparabilit anization's CE	-								iberatic	ni ana i	accisi	OII			1	5 a	Х	
		ficers of key)							5 b	X	
,		to line 15a or			-												Ė	-		
16	a Did the	organization i	nvest in,									or simi	lar arr	angem	ent wi	th a taxa	able 1	6 a		Х
	-	uring the year has the organ		hatrohe	a writte	en nolic	cv or i	nroced	lure re	אמווורוחמ	the or	nanızatı	ion to	evalua	te its r	narticina	-	o a		
	in joint v	venture arrang with respect to	gements	under a	pplicab	le fede	eral ta	ix law,	and to	aken st	eps to	safegua	ard the	e organ	ization	i's exem	ipt	6ь		
Sec	ction C.	Disclosu	res																	
17	List the	states with w	nich a cc	py of th	ıs Form	1 990 is	s requ	ured to	be fil	led -	TX_									
18	Section	6104 requires	an orga	inization	to mal	ke its F iilable	orms Checl	1023 (k all th	(or 10	24 if ap ply	plicable	e), 990,	, and	990-T (501(c)	(3)s onl	y) avaı	lable	e for p	oublic
		website	Í	Anothe						reques	t									
19		e in Schedule nts available	O wheth	er (and	ıf so, h SEE	ow) the	e orga		on ma	ikes its	govern	ing dod	cumer	nts, con	flict of	ınterest	policy	, an	d fina	incial
20	State th	e name, phys	ical addr	ess, and	d teleph	none ni	umber	r of the	e pers	on who	posse	sses th	e boo	ks and						
	► <u>JANA</u>	JOHNSTON	<u>, _CPA</u>	<u> 1500</u>	BRO	<u>TDMY</u> A	<u>:, _ S</u> ī	UITE	_600	<u> LU</u>	RROCE	<u>TX</u>	/94(J1						

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

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

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

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

Check this box if the organization did r	not comper	sate a	iny (curre	ent :	officer	, dır	ector, or trustee				
(A) (B) (c) (D) (E) (F) Name and Title Average Position (check all that apply) Reportable Reportable Estimated												
Name and Title	Average hours							Reportable compensation from	Reportable compensation from	Estimated amount of other		
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
WARREN WARNER												
	40	<u> </u>						102,309.	0.	0.		
KENNY MCKAY						ļ —						
	40		1			ŀ		0.	162,782.	8,649.		
MARC FARMER	40							0.	128,286.	0.		
DAVID PETR	40							0.	120,200.			
	40							0.	128,560.	0.		
GARY LAWRENCE												
	40	<u> </u>						0.	130,522.	0.		
MIKE MCDOUGAL						1						
DIRECTOR	2	X						0.	0.	0.		
VAN MAY-												
DIRECTOR	2	X					<u> </u>	0.	0.	<u> </u>		
DAVID SHARBUTT	_											
DIRECTOR	2	X					_	0.	0.	0.		
TONY WHITEHEAD	_									_		
VICE CHAIR	2	X					<u> </u>	0.	0.	0.		
CURTIS GRIFFITH	4	1						_	_	_		
CHAIRMAN OF BOA	2	X					_	0.	0.	0.		
SANDY HENRY		ļ			ļ	1	ļ			_		
DIRECTOR	2	X						0.	0.	0.		
DR. TAYLOR EIGHMY		١										
DIRECTOR	2	X					<u> </u>	0.	0.	0.		
ROB MEYER												
DIRECTOR	2	X			_		_	0.	0.	0.		
JOHN OSBORNE		ĺ			İ				145 045	•		
CEO	40			X	X		<u> </u>	0.	147,947.	0.		
JANA JOHNSTON, CPA				,,					104 110	-		
CFO	40	 		X			 	0.	124,118.	0.		
	4											
			-		-	-	\vdash					
	4											
		1		<u> </u>	L	l	Ц					

(A)		T.				,	aii			T	_
· (A)	(B) Average	Pos	tion (-	c)	lhat a	لايلمم	(D)	(E)	(F)	
Name and Tille				_	_	1		Reportable compensation from	Reportable compensation from	Estimated amount of other	
	per week	dire	Institutional trustee	Officer	Key e	Highest co	Former	the organization (W 2/1099-MISC)	related organizations (W-2/1099 MISC)	compensation from the	
		dual	tion.	-	employee	st cor	Œ.			organization and related	
		trust	al tro		yee	mpe				organizations	
		æ	stee			npensat					
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					1						
					ĺ						
					L			100			_
1b Total							>	102,309.	822,215.	8,649	
2 Total number of individuals (including but not limite	d to tho	se li	sted	abo	ove)) wh	o re	ceived more than	\$100,000 in report	able compensation	on
from the organization 1									<u>.</u>		_
										Yes N	10
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such i	or trust	ee, l	key	emp	oloy	ee,	or h	ghest compensate	ed employee	3 2	Χ
			mne	nsal	lion	and	l oth	er compensation	from	3 7	<u>~</u>
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	han \$15	0,00)0?	lf 'Y	es'	com	plet	e Schedule J for s	such	_	
ındıvıdual										4 X	
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc.	ompens	atio	n fro	om a	any	unre	elate	d organization for	services	_ ,	v
Section B. Independent Contractors	neaule J	TOF	Suc	пре	erso	n				5 2	<u>X</u>
1 Complete this table for your five highest compensal	ed inde	neno	dent	cor	itrac	ctors	tha	t received more th	nan \$100,000 of		
compensation from the organization											
(A)								(B)	,	(C)	
Name and business addres	s							Description of	f Services	Compensation	
							·				
											
			—								
2. Total number of independent contractors (in-light-	but cot	lım.	t c d	10.41		. 1 1		hous)ho	ad mars that		
2 Total number of independent contractors (including \$100,000 in compensation from the organization >		10111	ıeu	נט נו	1056	: 1151	eu a	above) who recelv	eu more man		

T al	(Viii Statement of Nevenue		(D)	(2)	(5)
•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
<u>"</u>	1a Federated campaigns 1a		Tevende		312, 313, 3, 314
N S I	b Membership dues 1b				1
S S	c Fundraising events 1c				
Z &	d Related organizations 1d				
5,₹	e Government grants (contributions) 10 10 10 10 10 10 10 10 10 1				
SIS					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above				
ΕŞ	g Noncash contribns included in lns 1a-1f \$				
	h Total. Add lines 1a-1f	6,514,900.	l 		
ᆱ	Business Code				
Ę.	2a				
- E	b				
VICE	с				
SER	d				
Σ	e				
PROGRAM SERVICE REVENUE	f All other program service revenue				
8	g Total. Add lines 2a-2f				
	3 Investment income (including dividends, interest and				
	other similar amounts)	18,604.			18,604.
	4 Income from investment of tax-exempt bond proceeds ►		<u> </u>		
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross Rents				
	b Less rental expenses				
Í	c Rental income or (loss)				İ
	d Net rental income or (loss)				
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory b Less cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
UE	8a Gross income from fundraising events (not including \$				
Ę	of contributions reported on line 1c)				
OTHER REVEN	See Part IV, line 18 a				
王	b Less direct expenses b				
o	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns			******	
Ì	and allowances.				
	b Less cost of goods sold b			}	1
}	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
ŀ		70 265			70 265
	11a OTHER	78,265.			78,265.
l	b	·			
	C			 	
	d All other revenue	70.065			
}	e Total. Add lines 11a-11d	78,265.			06.060
	12 Total revenue. See instructions.	6,611,769.	0.	0.	96,869.

Form 990 (2009) MARKET LUBBOCK ECONO	OMIC	••	75-2621353
Part IX Statement of Functional Exper	1ses		
Section 501(c)	(3) and 501(c)(4) orga	nizations must complete	all columns.
All other organizations must con	nplete column (A) but	are not required to comp	plete columns (B), (C), and (D).
	T	(5)	

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	3,742,168.	3,742,168.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	37.1272001	57.157100.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	102,309.	76,732.	25,577.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	739,421.	554,566.	184,855.	<u>-</u>
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	30,744.	23,058.	7,686.	
9	Other employee benefits				
10	Payroll taxes	52,964.	39,723.	13,241.	
11	Fees for services (non-employees)				
ä	a Management		·		
ŀ	Legal				
	Accounting		<u> </u>		
	Lobbying				
	e Prof fundraising svcs See Part IV, In 17 Investment management fees				
	g Other				
	Advertising and promotion				
13	Office expenses	21,693.	16,270.	5,423.	
14	Information technology				
15	Royalties				·
16	Occupancy	95,094.	71,321.	23,773.	
17	Travel	14,135.	10,601.	3,534.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	61,310.	61,310.	01 460	
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	85,867.	64,400.	21,467.	
a	PRINTING AND PUBLICATIONS	421,008.	315,756.	105,252.	
	SPONSORSHIP	402,399.	402,399.		
	PROFESSIONAL SERV	148,926.	111,695.	37,231.	
(OUT OF TOWN SALES	81,184.	81,184.		
(PROMOTION	68,159.	51,119.	17,040.	
1	All other expenses	239,111.	199,622.	39,489.	<u> </u>
	Total functional expenses Add lines 1 through 24f	6,306,492.	5,821,924.	484,568.	0.
26	Joint costs. Check here ► If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2009)

Balance Sheet

Part X

(A) Beginning of year **(B)** End of year 1,704,996 1 1,114,453. Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 70,551. 4 Accounts receivable, net 59,559 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 48,416 8 52,951. 9 Prepaid expenses and deferred charges 9 10 a 10a Land, buildings, and equipment cost or other basis 2,131,667. Complete Part VI of Schedule D 199,757 1,031,535 **b** Less accumulated depreciation 10b 10 c 1,931,910. 11 Investments - publicly-traded securities 25,008. 11 502,788. 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 4,006,613. 3,004,694. 15 Other assets See Part IV, line 11 15 Total assets Add lines 1 through 15 (must equal line 34) 6,876,127. 16 6,677,347. 16 49,619. 26,083. 17 Accounts payable and accrued expenses 17 332,098. 136,221. 18 18 Grants payable 4,000,000. 3,000,000. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 330,000. 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 35,156. 25 28,755. 3,716,936. 26 Total liabilities. Add lines 17 through 25 4,220,996. 26 Organizations that follow SFAS 117, check here and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Q R Organizations that do not follow SFAS 117, check here X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund 2,655,131 32 2,960,411. 32 Retained earnings, endowment, accumulated income, or other funds 2,655,131. 33 2,960,411. 33 Total net assets or fund balances

_[§] 34

Total liabilities and net assets/fund balances.

6,677,347. Form **990** (2009)

6,876,127.

34

	1 manda statements and neporting			_
			Yes	No
1	Accounting method used to prepare the Form 990 🔲 Cash X Accrual 🔲 Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			•
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
ı	b Were the organization's financial statements audited by an independent accountant?	2b	X	
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
(d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		

BAA

Form 990 (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name	of the organization			Employer Identification number
	RKET LUBBOCK ECONOMIC VELOPMENT CORPORATION		:	75-2621353
Par		Advised Funds or Other Similar F	unds or Acco	ounts Complete If
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) F	unds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor funds are the organization's property, subject	to the organization's exclusive legal control	?	Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	he benefit of the donor or donor advisor or	funds may be for any other	Yes No
Par	t II Conservation Easements Comple	ete if the organization answered 'Ye	es' to Form 99	00, Part IV, line 7.
1	Purpose(s) of conservation easements held by	the organization (check all that apply)		
	Preservation of land for public use (e.g., re	ecreation or pleasure) Preservation	on of an historica	ally important land area
	Protection of natural habitat	Preservation	on of certified his	storic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution	n in the form of a	
_	Talal averbas of appearation appearate		2-	Held at the End of the Year
	 Total number of conservation easements Total acreage restricted by conservation easer 	nonte	2 a 2 b	
	: Number of conservation easements on a certif		2c	
	Number of conservation easements included in		2 d	
3	Number of conservation easements modified, year •	• • •		ganization during the tax
4	Number of states where property subject to co	nservation easement is located >		
5	Does the organization have a written policy reand enforcement of the conservation easemen	nt it holds?		ations, Yes No
6	Staff and volunteer hours devoted to monitoring the year >	ng, inspecting, and enforcing conservation ϵ	easements	
7	Amount of expenses incurred in monitoring, in during the year ▶	specting, and enforcing conservation easer	ments \$	
8	Does each conservation easement reported or $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	n line 2(d) above satisfy the requirements o	f section	Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements	conservation easements in its revenue and exo the organization's financial statements th	opense statement, at describes the	and balance sheet, and organization's accounting for
Par	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Treasures, wered 'Yes' to Form 990, Part IV, III	or Other Sim	nilar Assets
1a	If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial stateme	ic exhibition, education, or research in furth	tement and balar nerance of public	nce sheet works of art, historical service, provide, in Part XIV,
t	If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items	ic exhibition, education, or research in furth	ent and balance nerance of public	service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1		►\$ ►\$
	(ii) Assets included in Form 990, Part X			► \$
	If the organization received or held works of a amounts required to be reported under SFAS	116 relating to these items	ets for financial g	ain, provide the following
	Revenues included in Form 990, Part VIII, line	1		►\$ ►\$
t	Assets included in Form 990, Part X			►\$

Schedule D (Form 990) 2009 MARKE						75-262			Page 2
Part III Organizations Mainta	ining Collec	ctions	of Art, Histo	orica	l Treasures, or	Other Similar Ass	ets (co	<u>ntınu</u>	<u>ed)</u>
`3 Using the organization's acquisiti items (check all that apply)	on accession a	and oth	ner records, che	ck an	y of the following	that are a significant us	e of its co	ollectio	วท
a Public exhibition			d Loan	or ex	change programs				
b Scholarly research			e 🗌 Other						
c Preservation for future gener	ations								
4 Provide a description of the orga Part XIV	nızatıon's colle	ections	and explain how	w they	y further the organ	ization's exempt purpo	se in		
5 During the year, did the organiza assets to be sold to raise funds r	ather than to b	oe maii	ntained as part i	of the	organization's co	llection?	Yes		No
Part IV Escrow and Custodia 9, or reported an amo					nization answer	ed 'Yes' to Form 9	90, Part 	. IV, I 	ine
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian	, or otl	her intermediary	for c	ontributions or oth	ner assets not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV ar	nd com	plete the follow	ıng ta	ble				
							Amount		
c Beginning balance						1 c			
d Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance						1f			
2a Did the organization include an a	mount on Forr	n 990,	Part X, line 217	,			Yes		No
b If 'Yes,' explain the arrangement	ın Part XIV								
Part V Endowment Funds Co	mplete if or	ganız	ation answer	ed 'Y	es' to Form 99	0, Part IV, line 10			
	(a) Current y	ear	(b) Prior year	r	(c) Two years back	(d) Three years back	(e) Fo	ur years	back
1 a Beginning of year balance									
b Contributions									
c Net Investment earnings, gains, and losses									
d Grants or scholarships									
e Other expenditures for facilities and programs									
f Administrative expenses							į		
g End of year balance									
2 Provide the estimated percentage	e of the year e	nd bal	ance held as						
a Board designated or quasi-endov	vment >		8						
b Permanent endowment ►									
c Term endowment ►	8								
3a Are there endowment funds not a	 In the possess	on of t	the organization	that	are held and admi	nistered for the	_		
organization by	россос		9					Yes	_ No
(i) unrelated organizations							3a(i)		
(ii) related organizations							3a(ii)		
b If 'Yes' to 3a(II), are the related of	organizations li	isted a	s required on So	chedu	le R?		3b		
4 Describe in Part XIV the intended	d uses of the c	rganiz	ation's endowme	ent fu	nds				
Part VI Investments-Land, B	uildings, ar	ıd Eq	uipment. See	e For	m 990, Part X	line 10			
Description of investment	(t or other basis ivestment)	(b	Cost or other basis (other)	(c) Accumulated Depreciation	(d) Bo	ok Va	lue
1a Land		1	,829,065.				1,	829,	065.
b Buildings									
c Leasehold improvements	F								
d Equipment									
e Other			302,602.			199,757.		102,	845.
Total Add been 1- through 1- (Calum	a (d) must say	al For		سيام	n (P) line 10(c)	-		031	

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1, 931, 910. Schedule **D** (Form 990) 2009

Part VII Investments—Other Securities See (a) Description of security or category	(b) Book value	(c) Method of valuat	ion
(including name of security)		Cost or end-of-year mark	et value
Financial derivatives			
Closely-held equity interests			
Other			
	· - 		
	-		
	-		-
Total (Column (b) must equal Form 990 Part X, col (B) line 12)	-	- · · · · · · · · · · · · · · · · · · ·	·
Part VIII Investments—Program Related (Sec	e Form 990 Part X line	e 13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuat	
(a) December of investment type	(2) Doon tales	Cost or end-of-year mark	et value
			· <u> · · · · · · · · · · · · · · · ·</u>
		· · · · · · · · · · · · · · · · · · ·	
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)			
Part IX Other Assets (See Form 990, Part >		·· · · · · · · · · · · · · · · · · · ·	41.5
	Description		(b) Book value
INCENTIVE ADVANCES PREPAID EXP			3,000,000 4,694
FREFAID EXP			4,094
	.		
	·		
	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col (B)	line 15)	P	3,004,694
Part X Other Liabilities (See Form 990, Pa			2,001,001
(a) Description of Liability	(b) Amount		
Federal Income Taxes	(4)	-	~
ACCRUED LIABILITIES	28,755.		•
		-	
		-	
		1	
		1	
	-	1	
		r	
Total (Column (b) must equal Form 990, Part X, col. (B) line 25)	28,755.		

Schedule D (Form 990) 2009 MARKET LUBBOCK ECONOMIC

75-2621353

Page 3

Sche	dule D (Form 990) 2009 MARKET LUBBOCK ECONOMIC	75-2621353	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)	E	6,611,769.
2	Total expenses (Form 990, Part IX, column (A), line 25)		3,306,492.
3	Excess or (deficit) for the year Subtract line 2 from line 1		305,277.
4	Net unrealized gains (losses) on investments		· ·
5	Donated services and use of facilities.		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8	 _	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		305,277.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	303,277.
1	Total revenue, gains, and other support per audited financial statements		,611,769.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12	-	7,011,705.
	Net unrealized gains on investments 2a		
			
	Recoveries of prior year grants 2c		
	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3 6	,611,769.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investments expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5 6	,611,769.
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1	Total expenses and losses per audited financial statements	1 6	,306,492.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
	Other losses 2c		
d	Other (Describe in Part XIV)		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1		,306,492.
-	Amounts included on Form 990, Part IX, line 25, but not on line 1:		70007132.
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV) 4b		
	Add lines 4a and 4b		
_	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	4c 5 6	,306,492.
	t XIV Supplemental Information	3 0	, 300, 492.
га	t Aiv Supplemental information		
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part I, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this mation		eny additional
		·	 _
BAA	TEEA3304L 02/02/10	Schedule D (F	orm 990) 2009

Schedule D	(Form 990) 2009	MARKET_LUBBOCK_ECONOMIC	75-2621353	Page 5
Part XIV	Supplemental	MARKET LUBBOCK ECONOMIC Information (continued)		
,				
				-
			- -	
	-			

(h) Purpose of grant or assistance Open to Public Inspection OMB No 1545 0047 2009 DEVELOPMENT DEVELOPMENT Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form PROMOTING PROMOTING ECONOMIC ECONOMIC Employer identification number X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 75-2621353 (g) Description of non cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) CASH VALUE CASH VALUE SEE PART IV Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. Attatch to Form 990. Governments and Individuals in the United States Grants and Other Assistance to Organizations, 0 (e) Amount of non cash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 50,000 25,000 (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable Part I General Information on Grants and Assistance 75-6002622 75-6002622 (b) EIN TIU OFFICE OF TECHNOLOGY COMMERC WEST TEXAS COALITION FOR INNOVAT 2579 SOUTH LOOP 289 SUITE 114 MARKET LUBBOCK ECONOMIC 1 (a) Name and address of organization LUBBOCK, TX 79409 LUBBOCK, TX 79423 Department of the Treasury Internal Revenue Service Vame of the organization SCHEDULE 1 (Form 990) 1111 BOX_42007 1 Part II ŧ

2 |

A

Schedule I (Form 990) 2009

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

2 Enter total number of section 501(c)(3) and government organizations

1

Enter total number of other organizations

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. Department of the Treasury Internal Revenue Service ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

2009

Name of the organization

MARKET LUBBOCK ECONOMIC

Employer identification number 75-2621353

Par	t I Questions Regarding Compensation				
				Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the VII, Section A, line 1a $$ Complete Part III to provide any relevant	following to or for a person listed in Form 990, Part information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
t	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described abo	follow a written policy regarding payment or ive? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing of trustees, and the CEO/Executive Director, regarding the items ch	or allowing expenses incurred by all officers, directors, necked in line 1a?	2	Х	
3	Indicate which, if any, of the following the organization uses to e CEO/Executive Director Check all that apply	establish the compensation of the organization's			
	$[\overline{X}]$ Compensation committee $[\overline{X}]$	Written employment contract			
	X Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee	. !		
4	During the year, did any person listed in Form 990, Part VII, Sec or a related organization	ction A, line 1a with respect to the filing organization			
ā	Receive a severance payment or change-of-control payment?		4a		Х
t	Participate in, or receive payment from, a supplemental nonqual	lified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based comper	nsation arrangement?	4c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the app	licable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must comple	ete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did to contingent on the revenues of	the organization pay or accrue any compensation			
á	The organization?		5 a		X
t	Any related organization?		5b		X
	If 'Yes' to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did contingent on the net earnings of	the organization pay or accrue any compensation		:	
a	The organization?		6a		X
ł	Any related organization?		6b		Х
	If 'Yes' to line 6a or 6b, describe in Part III				
7	For person listed in Form 990, Part VII, Section A, line 1a, did the described in lines 5 and 6? If 'Yes,' describe in Part III	ne organization provide any non-fixed payments not	7		Х
٥		ed pursuant to a contract that was subject to the initial			
0	Were any amounts reported in Form 990, Part VII, paid or accrucontract exception described in Regs section 53 4958-4(a)(3)? I	f 'Yes,' describe in Part III	8	-	Х
9	If 'Yes' to line 8, did the organization also follow the rebuttable psection 53 4958-6(c)?	presumption procedure described in Regulations	9		X

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Schedule J (Form 990) 2009

Page 2

MARKET LUBBOCK ECONOMIC

Schedule J (Form 990) 2009 MARKET LUBBOCK ECONOMIC

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	-		CIM COOL - TE - CIMIT					
		(b) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(ı) Base compensation	(II) Bonus and incentive compensation	(iii) Other reportable compensation	otner deterred compensation	Denents	(a)-(i)(a)	Form 990 or Form 990-EZ
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	(ii)	162,782	0			8,649.	171, 431	
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	(E)							
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Name of the organization MARKET LUBBOCK ECONOMIC	Employer identification number 75-2621353
DEVELOPMENT CORPORATION FORM 990, PART VI. LINE 11 - FORM 990 REVIEW PROCESS	73-2021333
PRESENTED TO FACH BOARD MEMBER FOR THEIR REVIEW BEFORE FILE	ING WITH THE IRS. THE
REVIEW OF THE FORM 990 BY THE FULL BOARD WAS CONDUCTED ON J	
PRESENTATION OF THE FORM 990 REVIEW WAS MADE BY CFO JANA JO	
WAS EXTENSIVE.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFOR	CEMENT OF CONFLICTS
THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO THE BOARD	O OF DIRECTORS AT THE
FIRST MEETING OF THE YEAR. IT HAS A SIGNATURE LINE ON THE E	BOTTOM OF THE FORM FOR THE
DIRECTOR TO SIGN AND DATE INDICATING THAT THEY HAVE READ AN	ND AGREE TO THE POLICY. AS
_ A PART OF THE PROCEDURE THERE IS AN ACCOMPANYING CONFLICT O	DF INTEREST QUESTIONNAIRE
ON WHICH THE BOARD MEMBERS LISTS ANY POTENTIAL CONFLICTS. E	BOTH DOCUMENTS ARE
COLLECTED AND MAINTAINED BY THE CFO OF MARKET LUBBOCK AND A	ARE UPDATED EACH YEAR.
ALSO, THE POLICY PROVIDES THAT A BOARD MEMBER MAY NOTIFY TH	HE CHAIRMAN OF THE BOARD
WHEN HE/SHE BECOMES AWARE OF A POTENTAIL CONFLICT DURING TH	HE COURSE OF THE YEAR.
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PRO	CESS FOR OFFICERS & KEY EMPLOYEES
OFFICER AND KEY EMPLOYEE SALARIES ARE REVIEWED ANNUALLY AND	RECOMMENDATIONS ARE MADE
TO THE BOARD TO ADJUST COMPENSATION LEVELS BASED ON COMPENS	SATION SURVEYS, INFLATION
AND MERIT. THE COMPENSATION SURVEY USED IN DETERMINING RECO	OMMENDED_SALARY
ADJUSTMENTS IS BASED ON INDUSTRY DATA REFLECTED IN THE ANNU	JAL DMAI SALARY SURVEY OF
DESTINATION MARKETING PROFESSIONALS WHICH IS PUBLISHED BY T	THE DESTINATION MARKETING
ASSOCIATION INTERNATIONAL (DMAI). THIS STUDY PROVIDES SALAR	RIES FOR THE VARIOUS
POSIITONS WITHIN THIS INDUSTRY AND IS SORTED ACCORDING TO C	DRGANIZATIONAL SIZE AND
GEOGRAPHIC REGION.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICE	LY AVAILABLE
THE FINANCIAL STATEMENTS ARE SUBJECT TO THE TEXAS PUBLIC IN	FORMATION ACT AND WILL
PROVIDE TO ANYONE, UPON RECEIPT OF THEIR REQUEST, A COPY OF	THE FINANCIAL STATEMENTS

Schedule O (Form 990) 2009	Page 2
Name of the organization MARKET LUBBOCK ECONOMIC DEVELOPMENT CORPORATION	Employer identification number 75–2621353
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	
OF THE ORGANIZATION. ADDITIONALLY, THE FINANCIAL STATEMENTS ARE	MADE AVAILABLE TO
THE PUBLIC AT EACH MONTHLY BOARD MEETING. FINALLY, A COMBINED A	ANNUAL REPORT AND
FINANCIAL STATEMENT ARE PUBLISHED ANNUALLY AND ARE AVAILABLE UP	PON REQUEST AT OUR
OFFICE AND ARE POSTED ON OUR WEBSITE.	· • • • • • • • • • • • • • • • • • • •
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Schedule O (Form	990) 2009	Page 2
Name of the organization	MARKET LUBBOCK ECONOMIC	Employer identification number
•	DEVELOPMENT CORPORATION	75-2621353
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

Open to Public Inspection

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. * See separate instructions.

(F)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Emptoyer identification number 75-2621353 (E) End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (**D)** Total income (C) Legal domicile (state or foreign country) (B) Primary activity MARKET LUBBOCK ECONOMIC DEVELOPMENT CORPORATION (A) Name, address, and EIN of disregarded entity Name of the organization Part II

(F)
Direct controlling
entity N/A (E)
Public charity status (if section 501(c)(3)) (D) Exempt Code section 501C(4) (C)
Legal domicile (state or foreign country) X DEVELOPMENT Primary activity PROMOTING ECONOMIC LUBBOCK ECONOMIC DEVELOPMENT ALLIANCE 1500 BROADWAY, SUITE 600 (A) (A) Name, address, and EIN of related organization LUBBOCK, TX 79401 90-0183669 Schedule R (Form 990) (2009)

TEEA5001L 02/05/10

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

Page 2

75-2621353

Schedule R (Form 990) 2009 MARKET LUBBOCK ECONOMIC DEVELOPMENT CORPORATION Part III

(J) General or managing partner? å Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related organizations treated as a partnership during the tax year.) Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (H)
Disproportionate
allocations? ž Yes Share of total income Share of end-of-year assets (E)
Predominant
income (related,
unrelated, excluded
from tax under
sections 512-514) (**b)**Direct
controlling entity (C)
Legal
domicile
(state or
foreign (B) Primary Activity (A)
Name, address, and EIN of related organization

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, Inc. 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	Faxable as a Co	rporation or Trust (Com treated as a corporation	plete if the organi	zation answered 'Ye	ss' to Form 990, Pa	art IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(B) (C) (D) Type of entity (C) corp, S corp, country) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	Type of entity (C corp, S corp or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
	-1					
	· · · · · · · · · · · · · · · · · · ·					_
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Schedule R (Form 990) (2009)

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75-2621353

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34,	line 34, 35, or 36.)			•
Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	2
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 Recent of (1) interest (ii) annuities (iii) royalities (iiii) royalities (iiii) royalities (iiii) royalities (iiii) royalities (iiii) royalities (iiii) royalities (iiiii) royalities (iiiiii) royalities (iiiiii) royalities (iiiiiii) royalities (iiiiiiiii) royalities (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	≥	19		\mid \times
		1 p	×	
c Giff. grant, or capital contribution from other organization(s)		٦		×
d Loans or loan quarantees to or for other organization(s)		٦ ٩		×
e Loans or loan guarantees by other organization(s)		1e	×	
f Sale of assets to other organization(s)		J.		×
g Purchase of assets from other organization(s)		1g	×	l
h Exchange of assets		1 1		×
i Lease of facilities, equipment, or other assets to other organization(s)		=		×
j Lease of facilities, equipment, or other assets from other organization(s)		ίΓ		×
k Performance of services or membership or fundraising solicitations for other organization(s)		곡		×
I Performance of services or membership or fundraising solicitations by other organization(s)		=		×
m Sharing of facilities, equipment, mailing lists, or other assets		E		×
n Sharing of paid employees			×	
o Reimbursement paid to other organization for expenses		10		×
p Reimbursement paid by other organization for expenses		1p	_	\times
q Other transfer of cash or property to other organization(s)		19	1	×
		-		\times
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	s and transaction three	sholds		- 1
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved	;) involve	
(1) LUBBOCK ECONOMIC DEVELOPMENT ALLIANCE	В	1,	1,000,000	00
(2) LUBBOCK ECONOMIC DEVELOPMENT ALLIANCE	ш		330,000	0.0
(3) LUBBOCK ECONOMIC DEVELOPMENT ALLIANCE	ຶ່ງ	2,	2,330,629	29
(4) LIBROCK ECONOMIC DEVELOPMENT ALLIANCE	z		830,864	64
1				
(9)				1
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Schedule R (Form 990) 2009 MARKET LUBBOCK ECONOMIC DEVELOPMENT CORPORATION

Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.)

(H) General or managing partner? ŝ 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 asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships Yes Code V-UBI amount in box 20 of Schedule K-1 Form (1065) (F)
Disproportionate
allocations? ŝ Yes (E) Share of end-of-year assets Are all partners section 501(c)(3) organizations? Ŷ Yes (C)
Legal domicile
(state or foreign country) (B)
Primary activity (A)
Name, address, and EIN of entity 1 1 1 I 1 1 1 I 1 1

Schedule R (Form 990) (2009)

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