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Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- Do not enter social security numbers on this form as it may be made public.
- Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning		July 1	, 2014, and ending	June 30	, 20	15
B Check if applicable		C Name of organization		D Employer identification number		
<input type="checkbox"/> Address change		MISSOURI ECONOMIC DEVELOPMENT COUNCIL		43-1158719		
<input type="checkbox"/> Name change		Number and street (or P O box, if mail is not delivered to street address)		E Telephone number		
<input type="checkbox"/> Initial return		PO BOX 105918		573-636-7383		
<input type="checkbox"/> Final return/terminated		City or town, state or province, country, and ZIP or foreign postal code		F Group Exemption Number ► N/A		
<input type="checkbox"/> Amended return		JEFFERSON CITY, MO 65110-5918				
<input type="checkbox"/> Application pending						
G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ►						
I Website: ► www.showme.org						
J Tax-exempt status (check only one) — <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) ▲ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527						
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other						
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ 194524						

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1 Contributions, gifts, grants, and similar amounts received	1 54898
	2 Program service revenue including government fees and contracts	2 139090
	3 Membership dues and assessments	3 0
	4 Investment income	4 52
	5a Gross amount from sale of assets other than inventory	5a
	b Less: cost or other basis and sales expenses	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c 0
	6 Gaming and fundraising events	6a
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6b
Expenses	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6c
	c Less: direct expenses from gaming and fundraising events	6d 0
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	7a
	7a Gross sales of inventory, less returns and allowances	7b
	b Less: cost of goods sold	7c 0
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8 485
	8 Other revenue (describe in Schedule O)	9 194525
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ►	
	10 Grants and similar amounts paid (list in Schedule O)	10 1200
Net Assets	11 Benefits paid to or for members	11 0
	12 Salaries, other compensation, and employee benefits	12 0
	13 Professional fees and other payments to independent contractors	13 69990
	14 Occupancy, rent, utilities, and maintenance	14 1897
	15 Printing, publications, postage, and shipping	15 5616
	16 Other expenses (describe in Schedule O)	16 107017
	17 Total expenses. Add lines 10 through 16 ►	17 185720
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 8805
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 64856
	20 Other changes in net assets or fund balances (explain in Schedule O)	20
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ►	21 73661

10

Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	64856	22 73661
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	0	24 0
25 Total assets	64856	25 73661
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	64856	27 73661

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? To be an authoritative voice in Missouri for economic dev.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others)

28 Conferences - 4 major events were held to inform members of industrial & economic development issues. Attendance varied by averaged 100+ per event		
(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	28a	
29 Website development and maintenance - An internet home page is maintained and provides the membership directory and periodic newsletters to update members on current happenings. Members have the opportunity to hotlink to the website. (Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	29a	
30 Scholarships and awards are given. Two individual scholarships of \$600 each were awarded to members for attendance at an economic development event and various awards were given to members (Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a) ► <input type="checkbox"/>	32	

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Pat Amick				
Executive Director	20 hrs/wk	43500	0	0
Donna Brown				
President	5 hrs/wk	0	0	0
Mark Stombaugh				
President-Elect	2 hrs/wk	0	0	0
Jessica Craig				
Treasurer	5 hrs/wk	0	0	0
Tim Arbeiter				
Secretary	2 hrs/wk	0	0	0
John Engelmann				
Immediate Past President	1 hr/wk	0	0	0
Josh McKim				
District 1 Director	1 hr/wk	0	0	0
Ralph Boots				
District 1 Director	1 hr/wk	0	0	0
George Walley				
District 2 Director	1 hr/wk	0	0	0
Ralph Martin				
District 2 Director	1 hr/wk	0	0	0
Shawna Searcy				
District 3 Director	1 hr/wk	0	0	0
Carolyn Yatsook				
District 3 Director	1 hr/wk	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
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	37b	✓
b	Did the organization file Form 1120-POL for this year?	38a	✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38b	
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	39a	
39	Section 501(c)(7) organizations. Enter:	39b	
a	Initiation fees and capital contributions included on line 9	40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►
b	Gross receipts, included on line 9, for public use of club facilities	b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ►	40b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	e	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
41	List the states with which a copy of this return is filed ► NONE REQUIRED IN MISSOURI	40e	✓
42a	The organization's books are in care of ► PAT AMICK, EXECUTIVE DIRECTOR Telephone no. ► 573-636-7383 Located at ► PO BOX 105918, JEFFERSON CITY, MO ZIP + 4 ► 65110-5918	42b	Yes
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: ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	42c	No
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ►	43	► <input type="checkbox"/>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43	44a	Yes
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c	Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI • Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	If "Yes," was the related organization a section 527 organization?	49b	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A. Yes No

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.

Sign Here	<input style="width: 200px; height: 20px; border: 1px solid black; border-radius: 10px; font-size: 14px; margin-bottom: 5px;" type="text" value="John Smith"/> <input style="width: 200px; height: 20px; border: 1px solid black; border-radius: 10px; font-size: 14px; margin-bottom: 5px;" type="text" value="John Smith, Executive Director"/>	<input style="width: 50px; height: 20px; border: 1px solid black; border-radius: 10px; font-size: 14px; margin-bottom: 5px;" type="text" value="2/12/16"/> <input style="width: 50px; height: 20px; border: 1px solid black; border-radius: 10px; font-size: 14px; margin-bottom: 5px;" type="text" value="2/12/16"/>
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Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	KAYE K KREMER		2/12/16		P01251144
	Firm's name ► KAYE K KREMER, CPA		Firm's EIN ►	N/A	
Firm's address ► 2215 RIVERCREST COURT, JEFFERSON CITY, MO 65101		Phone no	573-635-2077		

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE C
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Political Campaign and Lobbying Activities**

OMB No 1545-0047

2014Open to Public
Inspection**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization Employer identification numberMISSOURI ECONOMIC DEVELOPMENT COUNCIL 43-1158719**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. ► \$ 24928
2 Political expenditures ► \$ 0
3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
4a Was a correction made? Yes No
b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ 0
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ 0
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ 0
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ► if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ► if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <tr> <td>If the amount on line 1e, column (a) or (b) is:</td> <td>The lobbying nontaxable amount is:</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	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	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		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
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														
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														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
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 similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	✓
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	✓
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	✓

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	51965
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	24928
b Carryover from last year	2b	6093
c Total	2c	31021
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	28581
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	2440
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

A Legislative Consultant is held on retainer to track legislation being introduced at the state level that impacts the interest of the

economic development community. A small event is held to discuss pending and upcoming current legislation with the board. The

Legislative Consultant reports to the board at each scheduled meeting.

Part IV Supplemental Information (continued)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public
Inspection

Name of the organization

MISSOURI ECONOMIC DEVELOPMENT COUNCIL

Employer identification number

43-1158719

PART I LINE 8 OTHER REVENUE:

\$ 385 Shirts

\$ 100 Job Postings

\$ 485 TOTAL OTHER REVENUE

PART I LINE 16 OTHER EXPENSES:

\$ 130 Travel

\$ 76 Office Supplies

\$ 94574 Meetings and Conferences

\$ 946 Awards

\$ 400 HEDC Reception Sponsorship

\$ 200 IEDC Certification

\$ 1090 Insurance

\$ 2223 Internet Home Page

\$ 6163 Website Development

\$ 287 Shirts

\$ 928 Legislative consultant expenses

\$107017 TOTAL OTHER EXPENSES

PART I LINE 10 GRANTS AND SIMILAR AMOUNTS PAID:

\$600 Jackson Tough, Eldorado Springs Chamber of Commerce, MEDC Heartland Scholarship

\$600 Shawna Searcy, Kearney Area Development Council, MEDC Heartland Scholarship

All awards were to defray the cost of the recipient to attend educational conferences in the field of economic development.

Name of the organization

MISSOURI ECONOMIC DEVELOPMENT COUNCIL

Employer identification number

43-1158719

PART IV LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES:Lori Hoelscher, District 4 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationLuke Holtschneider, District 4 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationLibbey Tucker, District 5 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationRebecca Zoll, District 5 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationJohn Adams, District 6 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationTrace Slagle, District 6 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationSteve Halter, District 7 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationScott Sattler, District 7 Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationCarolyn Chrisman, At-Large Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationMichael Kearney, At-Large Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationRon Reed, At-Large Director - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationSharon Gulick, Counselor - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationBen Jones, Counselor - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationJohn Mehner, Counselor - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationJasen Jones, Counselor - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other CompensationLori Becklenberg, Counselor - 1 hr/wk - \$0 Reportable Compensation - \$0 Benefits - \$0 Other Compensation