Form	990	
Form	990	

EXTENDED TO MAY 15, 2018

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Information about Form 990 and its instructions is at www.irs.gov/form990. Internal Revenue Service A For the 2016 calendar year, or tax year beginning JUL 1, 2016 and ending JUN 30 C Name of organization D Employer identification number Address MISSOURI TECHNOLOGY CORPORATION Name change 43-1341372 Doing business as initial return Room/sulte Number and street (or P.O. box if mail is not delivered to street address) E Telephone number]Final return PO BOX 2137 (573)526-1558 termin-City or town, state or province, country, and ZIP or foreign postal code 12,511,194. G Gross receipts \$ Amende JEFFERSON CITY, MO H(a) is this a group return Applica-F Name and address of principal officer: JASON HALL for subordinates? Yes X No P.O. BOX 2137, JEFFERSON CITY, MO H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) () (Insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) ©J Website: ▶ WWW.MISSOURITECHNOLOGY.COM H(c) Group exemption number JK Form of organization; X Corporation Trust F L Year of formation: 1983 M State of legal domicile: MO Ranta Summary Briefly describe the organization's mission or most significant activities: MTC WAS FORMED TO CONTRIBUTE TO SCANNED THE DEVELOPMENT OF SCIENCE AND TECHNOLOGY, TO PROMOTE THE Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part Vi, line 1a) 14 Number of independent voting members of the governing body (Part VI, Ilne 1b) Total number of Individuals employed in calendar year 2016 (Part V, line 2a) 0 14 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 la RECEIVED b Net unrelated business taxable income from Form 990-T, line **Prior Year** Current Year 20,770,216. 14,285,399. Contributions and grants (Part VIII, line 1h) 0. Я Program service revenue (Part VIII, line 2g) 373,897. 249,826. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 118,225.> <2.024,031.> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1 19,025,888. 12,511,194. 12 Total revenue - add fines 8 through 11 (must equal Part VIII, column (A), line 12) 9,206,230 8,516,751. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 278,931 321 288. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraleing expenses (Part IX, column (D), line 25) 425,206. 384,712. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,910,367 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ,222,751. 9,115,521 3,288,443. 19 Revenue less expenses, Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 63,477,517. 60,656,611. 20 Total assets (Part X, line 16) 5,474,628. 5,941,989 Total liabilities (Part X, line 26) 54,714,622. 58,002,889. Net assets or fund balances. Subtract line 21 from line 20 Signature Block this feture, including dcompanying schedules and statements, and to the best of my knowledge and belief, it is Under penalties of perjury, I declare that I have examine true, correct, and complete. Obclaration of o eparer (on all information of which preparer has any knowledge officer Signature Sign CHAIRMAN OF THE BOARD JASON HALL, Here Type or prin name and title Print/Type preparer's name Preparer's signature ₽00048898 KATHLEEN A. GRAESSLE Paid Firm's name WILLIAMS-KEEPERS LLC 43-1126847 Firm's EIN Preparer 3220 WEST EDGEWOOD STE E Use Only Firm's address 🛌 Phone no. 573-635-6196 JEFFERSON CITY, MO 65109 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

EXTENDED TO MAY 15, 2018

Form **990**

Department of the Treasury Internal Revenue Service Return of Organization Exempt From Income Tax

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

lackbox Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2016
Open to Public Inspection

<u>A</u>	For the	= 2016 calendar year, or tax year beginning $$	ending 🕻	<u>JUN 30, 2017</u>									
В	Check if	C Name of organization		D Employer identifi	cation number								
	Addre	MISSOURI TECHNOLOGY CORPORATION											
	Name chang	Doing business as		 	341372								
	return Final return	PO BOX 2137	Room/suite	E Telephone number (573)526-1558									
	termir	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	12,511,194.								
2	Amen			H(a) Is this a group re	eturn								
L_	Application pendi	3a ' ' '		for subordinates	? Yes X No								
	-	P.O. BOX 2137, JEFFERSON CITY, MO 6510.	<u> 2</u> _	H(b) Are all subordinates in	ncluded? Yes No								
		empt status: X 501(c)(3) 501(c) () ((Insert no.) 4947(a)(1) o	or 527	If "No," attach a	list (see instructions)								
	Website: ► WWW.MISSOURITECHNOLOGY.COM H(c) Group exemption number ►												
		organization: X Corporation Trust Association Other	L Year	of formation: 1983 N	State of legal domicile: MO								
P	art∤l∥	Summary											
a	1	Briefly describe the organization's mission or most significant activities MTC W			TRIBUTE TO								
Governance		THE DEVELOPMENT OF SCIENCE AND TECHNOLOGY	<u>, TO 1</u>	PROMOTE THE									
r	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass									
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3_	15								
ى ق		Number of independent voting members of the governing body (Part VI, line 1b)		4	14								
es	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)		5	0								
Activities	6	Total number of volunteers (estimate if necessary)		6	14								
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.								
_	b	Net unrelated business taxable income from Form 990-T, line 34			0.								
ø			<u> </u>	Prior Year	Current Year								
	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	20,770,216.	14,285,399.								
nua	9	Program service revenue (Part VIII, line 2g)	<u> </u>	0.	0.								
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	373,897.	249,826.								
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	<2,118,225.>	<2,024,031.>								
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		19,025,888.	12,511,194.								
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	9,206,230.	8,516,751.								
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.								
V.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		278,931.	321,288.								
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		<u> </u>	0.								
KDe	b	Total fundraising expenses (Part IX, column (D), line 25)	0.										
ú	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	425,206.	384,712.								
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		9,910,367.	9,222,751.								
	19	Revenue less expenses. Subtract line 18 from line 12		9,115,521.	3,288,443.								
Net Assets or	4		_ <u>B</u> (eginning of Current Year	End of Year								
Set	20	Total assets (Part X, line 16)	-	60,656,611.	63,477,517.								
t As	21	Total liabilities (Part X, line 26)	-	5,941,989.	5,474,628.								
جّ	22	Net assets or fund balances Subtract line 21 from line 20		54,714,622.	58,002,889.								
		Signature Block											
		alties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is								
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparei	r has any knowledge.									
		Signature of officer		Date									
Sig	ın	Signature of officer		Date									
He	re	JASON HALL, CHAIRMAN OF THE BOARD											
		Type or print name and title		Date Check	PTIN								
_		Print/Type preparer's name Preparer's signature		- 2 10 1									
Pai		KATHLEEN A. GRAESSLE LAND / Kaenle	e	5-3-19 If self-employ									
	parer	Firm's name WILLIAMS-KEEPERS LLC	Firm's EIN 🛌	43-1126847									
Use	Only	Firm's address 3220 WEST EDGEWOOD STE E			2 625 6106								
		JEFFERSON CITY, MO 65109		Phone no. 5 7	3-635-6196								
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No								

• > :

		-	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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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_		<u>X</u>
4	Section 501(c)(3) organizations. 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	4_		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		<u> </u>
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_		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
_	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40		х
11	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		^
' '	as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	\vdash		—–
а	Part VI	11a	x	
h	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	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ī	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Х	
d	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	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			₩
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	4.		X
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		х
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	- ''0 -		
17		17		х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	'		 -
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ <u>~</u>		
.3	complete Schedule G. Part III	19		Х
		Form	990	

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Form 990 (2016) MISSOURI TECHNOLOGY CORPORATION
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	163	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		├
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	}
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		-^ -
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	·	24a		х
.	Schedule K. If "No", go to line 25a Did the examplation investigate any proceeds of tax example beyond a temporary paried examples.	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	045		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ļ ,		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or]		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			v
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)	<u> </u>		_
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30_		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			17
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		
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	_	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			4.5
	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 11b and 19?		٠,	
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2016)

Form 990 (2016) MISSOURI TECHNOLOGY CORPORATION
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable]						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c	X					
2a	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 . 2a 0							
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х				
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b						
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, secunties account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country:							
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			х				
	any contributions that were not tax deductible as charitable contributions?	6a		Α.				
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	00						
	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?	7a	\neg	X				
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
Ů	to file Form 8282?							
d	If "Yes," indicate the number of Forms 8282 filed duning the year		`					
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>						
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a 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	ł						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ł						
11	Section 501(c)(12) organizations. Enter. Gross income from members or shareholders							
	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	1						
D	amounts due or received from them.)							
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1						
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
•	Note. See the instructions for additional information the organization must report on Schedule O							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
-	organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand	L						
14a		14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						

MISSOURI TECHNOLOGY CORPORATION 43-1341372 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 X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 15 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 14 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a a The organization's CEO, Executive Director, or top management official X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a X taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶MO 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) ____ Another's website X Upon request ___ Own website 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records.

65102

AMY STEINMAN - (573)522-2293

301 W. HIGH STREET, JEFFERSON CITY

Form	OOA	(2016)	

MISSOURI TECHNOLOGY CORPORATION

43-1341372

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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, if any. See instructions for definition of "key employee"
- 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 neither the organization (A)	(B)	I	1112.01	(C		iperi	Jan	(D)	(E)	(F)
Name and Title		J Average J Pos						Reportable	Reportable	Estimated
rame and mo	hours per	(do not check box, unless p			more son I	than c s both	ne an	compensation	compensation	amount of
	week					r/trus		from	from related	other
	(list any	çţo						the	organizations	compensation
	hours for	9				ted		organization	(W-2/1099-MISC)	from the
	related	stee (ruste			bensa		(W-2/1099-MISC)		organization
	organizations	al tru:	onal t		ployer	comi				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) WILLIAM ANDERSON	40.00									
EXECUTIVE DIRECTOR/PRESIDENT		X		X		L		91,021.	0.	36,095.
(2) JIM BAKER	1.50									
VICE CHAIR		Х		X		igsquare		0.	0.	0.
(3) TJ BERRY	2.75								_	_
DIRECTOR		X						0.	0.	0.
(4) MICHAEL WETLE	2.75					1			_	_
DIRECTOR		Х			<u> </u>			0.	0.	0.
(5) GARY KEMP	1.50								_	_
SECRETARY/TREASURER		X	L_	Х		<u> </u>		0.	0.	0.
(6) DONN RUBIN	1.00								_	
DIRECTOR		X			ļ	<u> </u>	L	0.	0.	0.
(7) MICHAEL OCONNELL III	1.00						ŀ			•
DIRECTOR		X		Щ		<u> </u>		0.	0.	0.
(8) MIKE DOWNING	1.50									•
DIRECTOR		X			-	- -	ļ	0.	0.	0.
(9) RYAN SILVEY	1.00				1		ŀ		0	
DIRECTOR		X		Ш		-		0.	0.	0.
(10) DEDRIC CARTER	1.00	ļ.,			}				_	0
DIRECTOR		X	_	H	_		<u> </u>	0.	0.	0.
(11) JASON HALL	5.00	x		х				0.	0.	0.
CHAIR (12) JIM HEETER	1.00	^	\vdash	_	-	⊢-				
DIRECTOR	1.00	X						0.	0.	0.
(13) LISA NICHOLS	1.00	^	H					·		
DIRECTOR	1.00	x						0.	0.	0.
(14) ROBERT SCHWARTZ	1.00	<u> </u>	\vdash	\vdash	 	 -		† 		
DIRECTOR	7.00	x						0.	0.	0.
(15) ERWIN SWITZER	1.00	 ^	<u> </u>	H		<u> </u>		 		
DIRECTOR	1 200	x						0.	0.	0.
(16) WILLIAM WEBER	1.00	 -		\vdash	\vdash	 				
DIRECTOR		x						0.	_ 0.	0.
	- 								-	
		1								

Form 990 (2016)

L ai	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	<u>l Hig</u>	<u>ghes</u>	t C	compensated Employee	s (continued)		Γ		
	(A)	(B) Average	(C) Position						(D)	(E)		_	(F)	
	Name and title	hours per		not c	heck ı	more	than d s both		Reportable compensation	Reportable compensatio			stimate nount	
		week					r/trus		from	from related		l a	other	
		(list any	ig Scio						the	organization		com	pensa	
		hours for	or dare	, e			ated		organization	(W·2/1099-MIS	SC)	1	rom th	
		related organizations	ustee	truste		, n	Suad		(W-2/1099-MISC)			_	anızat	
		below	Individual trustee or director	institutional trustee		Key emptoyee	st con	.				i -	d relat anızatı	
_		line)	Indiv	Instite	Officer	Key er	Highest compensated employee	Former				•••		
							_							
				_			-							
		<u> </u>]					
				_			\vdash	_						
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				Ш										
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										· · · · · · · · · · · · · · · · · · ·				
				<u>.</u>			<u>L</u>							
1b	Sub-total								91,021.		0.	3	6,0	
	Total from continuation sheets to Part VI	l, Section A							0.		0.	0. 0. 0. 36,095.		
	Total (add lines 1b and 1c) Total number of individuals (including but n			l.ata	مام لہ		\b	•	91,021.	000 of resemble			0, 0	90.
2	compensation from the organization	ot ilmited to th	ose	uste	o ao	ove) WN	O FE	eceived more than \$100,	ooo oi reportable				0
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director, or tru	stee	e, ke	y en	nplo	yee,	or l	highest compensated en	nployee on				
	line 1a? If "Yes," complete Schedule J for si	uch individual										3		X
4	For any individual listed on line 1a, is the su	m of reportable	е со	mpe	nsa	tion	and	oth	ner compensation from th	ne organization				<u> </u>
	and related organizations greater than \$150			•								4		X
5	Did any person listed on line 1a receive or a	•				•			•					- -
Sec	rendered to the organization? If "Yes." com tion B. Independent Contractors	plete Schedule	e J fo	or su	ich r	ers	on .					5		_ <u>X</u>
1	Complete this table for your five highest con	mnensated ind	ene	nder	nt co	ntra	acto	's th	nat received more than \$	100 000 of comp	ensa	tion fr	om.	
•	the organization. Report compensation for	-												
	(A)								(B)			((
	Name and business	address						_	Description of s	ervices	C	ompe	nsatio	n
	MPSON COBURN		_	- 1	^ 1			Ì		į		~ ~		^ =
ONE	US BANK PLAZA, ST. LC	OUIS, MO	6	<u>31</u>	01			_	LEGAL			20	1,3	<u>97.</u>
								\dashv			_			
								寸				**,		
										İ				
														
2	Total number of independent contractors (in		ot lin	nited	l to t	hos	e lis	ted	above) who received mo	ore than				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts. 1 a Federated campaigns 1a 1b **b** Membership dues 10 Fundraising events d Related organizations 1d 14,285,399. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 14,285,399 h Total. Add lines 1a-1f Business Code Program Service 2 a f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 249,826, 249,826. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a 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) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less, direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue <2,024,031.> 11 a GAIN (LOSS) ON INVESTMENTS 541900 <2,024,031.> d All other revenue <2,024,031.> e Total. Add lines 11a-11d <1,774,205.> 12,511,194. 0. Total revenue See instructions.

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Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A), Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (B) Program service (A) Total expenses Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 8,516,751. 8,516,751. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 64,731. 129,461. 64,730. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 191,827. 133,890. 57,937. 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees). a Management 290,118. 5,116. 285,002. **b** Legal 23,342. 23,342. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, 3,859. 3,859. column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 13 Office expenses Information technology 14 Royalties 15 16 Occupancy 17,111. 17,111. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 1,655. 1,655. Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 184. 184. 22 Depreciation, depletion, and amortization 11.317.11.317. 23 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 18,412. 18,412. ADMINISTRATIVE SERVICES 5,000. 5,000. DUES AND SUBSCRIPTIONS c SPONSORSHIP 5,000. 5,000. 4,887. d TELECOMMUNICATIONS 4,887. 3,827. 3,827. e All other expenses 8,720,488. 502,263. 9,222,751. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 28,139,273. 1 26,529,335. Cash - non-interest-bearing 1,000,307. Savings and temporary cash investments 2 2 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 9,191,742. 11,348,275. 7 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment. cost or other 21,198. basis. Complete Part VI of Schedule D 10a 21,047. 335. $\overline{151.}$ 10c b Less. accumulated depreciation 10b 11 11 Investments - publicly traded securities Investments - other securities. See Part IV, line 11 12 12 24,599,449. 23,325,261. 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 60,656,611. 63,477,517. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, iabilities. key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 5,941,989. 25 5,474,628. Schedule D 5,941,989. 5,474,628. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 52,769,560. 1,063,838. 27 27 Unrestricted net assets 53,650,784. 28 5,233,329. 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 54,714,622. 58,002,889. 33 33 Total net assets or fund balances 60,656,611. 63,477,517. 34 Total liabilities and net assets/fund balances

Form	990 (2016) MISSOURI TECHNOLOGY CORPORATION	43-	1341.	372	<u>Pag</u>	₁₈ 12	
Pai	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,511</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2		,222			
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>, 288</u>			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>54</u>	<u>,714</u>			
5	Net unrealized gains (losses) on investments	5		<	:176	<u>5.></u>	
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	<u>58</u>	<u>,002</u>	, 88	<u> 39.</u>	
Pai	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
		_	,		Yes	No	
1	Accounting method used to prepare the Form 990. Cash Accrual X Other SEE SCH						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	- 1	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis		i				
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?			2c			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche						
За	3a 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?						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audi	t I	_			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b			

Form **990** (2016)

SCHEDULE A

(Fgrm 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number MISSOURI TECHNOLOGY CORPORATION 43-1341372

Pa	art I Reason for Public Charity Status (All organizations must complete this part) See instructions.											
Γhe	organ	zation is not a private found	ation because it is. (f	For lines 1 through 12, c	heck only	one box)						
1		A church, convention of chi		=	-	-	D(A)(i).					
2		A school described in secti					70 707					
3	一	A hospital or a cooperative		·			a)					
4	\equiv	A medical research organiza					•	the hospital's name				
7	لــــا	city, and state	ation operated in cor	ijunction with a nospital	described	III Sectio	ii iro(b)(i)(A)(iii). Einter	the nospital's name,				
_	$\overline{}$											
5	ш	An organization operated for		lege of university owned	or operate	ed by a go	vernmental unit describe	ea in				
_		section 170(b)(1)(A)(iv). (C										
6	뭐	A federal, state, or local gov										
7	X	An organization that normal	lly receives a substai	ntial part of its support fr	om a gove	ernmental	unit or from the general i	oublic described in				
	_	section 170(b)(1)(A)(vi). (C	•									
8		A community trust describe	d in section 170(b)((1)(A)(vi). (Complete Part	t II)							
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a land-grant	college				
		or university or a non-land-g	rant college of agrici	ulture (see instructions)	Enter the i	name, city,	, and state of the college	or				
		university:										
10		An organization that normal	lly receives: (1) more	than 33 1/3% of its supp	ort from o	contribution	ns, membership fees, an	d gross receipts from				
		<u> </u>	• • • • • • • • • • • • • • • • • • • •				•	•				
		activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975										
		See section 509(a)(2). (Cor		(1000 00011011 0 1 1 100) 110								
11		An organization organized a	•	vely to test for nublic sat	ety See	section 50	19(a)(4)					
12	Ħ	An organization organized a	•	•	•			nurnoses of one or				
12		more publicly supported org										
								SHECK THE BOX III				
	_	lines 12a through 12d that o	• •				_	~~~~~				
а	L	Type I. A supporting orga										
		the supported organization			majority o	or the direc	tors or trustees of the st	ipporting				
		organization. You must o	•									
b		Type II. A supporting org					= -					
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported				
	_	organization(s). You mus										
¢			grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	d with,				
		its supported organization	n(s) (see instructions)	You must complete F	Part IV, Se	ections A,	D, and E.					
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	ith its supported organiz	zation(s)				
		that is not functionally int	egrated The organiz	ation generally must sat	sfy a distr	ibution req	juirement and an attentiv	/eness				
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.					
е		Check this box if the orga	inization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III					
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.						
f	Ente	r the number of supported o	organizations									
g		ride the following information		d organization(s)								
	() Name of supported	(II) EIN	(III) Type of organization	(iv) Is the orga in your governi	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other				
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)				
						}						
_												
]						
						 -						
				 -								
Tota	ai	1				<u> </u>	<u> </u>					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total				
	Gifts, grants, contributions, and					, , , , , ,					
	membership fees received (Do not										
	include any "unusual grants ")	7150296.	9692114.	17809200.	20770216.	14285399.	69707225.				
2	Tax revenues levied for the organ-					-					
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3	7150296.	9692114.	17809200.	20770216.	14285399.	69707225.				
	The portion of total contributions										
Ī	by each person (other than a										
	governmental unit or publicly	}									
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,	-			,)				
	column (f)										
6	Public support. Subtract line 5 from line 4						69707225.				
Sec	ction B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total				
	Amounts from line 4	7150296.	9692114.		20770216.	14285399.	69707225.				
8	Gross income from interest,]						
	dividends, payments received on										
	securities loans, rents, royalties										
	and income from similar sources	134,835.	502,406.	351,322.	373,897.	249,826.	1612286.				
9	Net income from unrelated business		<u> </u>								
	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain					-					
	or loss from the sale of capital										
	assets (Explain in Part VI.)	283,340.	106,989.	<146,710.	<2118225.	<2024031.	<3898637.				
11	Total support. Add lines 7 through 10						67420874.				
12	Gross receipts from related activities,	etc (see instructio	ns)			12					
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ıx year as a sectior	1 501(c)(3)					
	organization, check this box and stop			 	<u> </u>						
Sec	ction C. Computation of Publi	c Support Per	centage								
14	Public support percentage for 2016 (li	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	100.00 %				
	Public support percentage from 2015		•			15	100.00 %				
16a	33 1/3% support test - 2016. If the c	rganization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo					
	stop here. The organization qualifies		_				ightharpoons X				
b	33 1/3% support test - 2015. If the o	rganization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box				
	and stop here. The organization quali		• •				▶∟				
17a	10% -facts-and-circumstances test										
	and if the organization meets the "fac-					rt VI how the orgai	nization				
	meets the "facts-and-circumstances"						▶∟_				
b	10% -facts-and-circumstances test										
	more, and if the organization meets th						•				
	organization meets the "facts-and-circ						▶ -				
18	Private foundation. If the organizatio	<u>n did not check a l</u>	oox on line 13, 16	<u>a, 16b, 17a, or 17b</u>	o, check this box a	nd see instructions	<u> </u>				

Schedule A.(Form 990 or 990 EZ) 2016 MISSOURI TECHNOLOGY CORPORATION Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to

qualify under the tests listed be Section A. Public Support	olow, please comp	olete Part II.)				
	(a) 2012	(h) 2012	(a) 2014	(4) 0015	(-) 0010	<u> </u>
Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
membership fees received (Do not						
include any "unusual grants.")			ļ			
, , , , , , , , , , , , , , , , , , ,					 	
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-		}				
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities			· · · · · · · · · · · · · · · · · · ·			
furnished by a governmental unit to						
the organization without charge		[
6 Total. Add lines 1 through 5				<u> </u>	<u> </u>	
7a Amounts included on lines 1, 2, and					 	
3 received from disqualified persons		·				
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)		<u> </u>		<u> </u>	<u> </u>	
Section B. Total Support		,				
Calendar year (or fiscal year beginning in) ➤ 🏻	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thire	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organiza	tion,
check this box and stop here	J		<u> </u>			_ ▶□
Section C. Computation of Public	Support Per	rcentage				
15 Public support percentage for 2016 (in			olumn (f))		15	%
16 Public support percentage from 2015	• •	-			16	%
Section D. Computation of Inves						
17 Investment income percentage for 20	16 (line 10c, colui	mn (f) divided by lin	ne 13, column (f))		17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2016. If the			on line 14, and line	15 is more than 3	33 1/3%, and line 17	'is not
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2015. If the						nd
line 18 is not more than 33 1/3%, chec						ightharpoons
20 Private foundation. If the organization						

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		-
3b		
<u> </u>		
3c		_
4a		
		\vdash \lnot
4b_		
Ĭ		
1		
4c		
1,0		
<u> </u>		oxdot
<u>5a</u>		
5b		
5c		
6	<u> </u>	
7		
-	_	
8		
9a		
9b_		
9c		
30		
10a		
<u> </u>		
10b		

	nedule A.(Form 990 or 990-EZ) 2016 MISSOURI TECHNOLOGY CORPORATION 43-13	4137	2 P	age 5
P	art IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	İ		
i	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<u></u>	└ ─	igsquare
	below, the governing body of a supported organization?	11a	Ļ	
	A family member of a person described in (a) above?	11b	<u> </u>	<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c	<u> </u>	<u> </u>
<u>Se</u>	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	J		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	i		
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		<u> </u>	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	1		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	l	ł	
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	i	
Se	ction D. All Type III Supporting Organizations	<u> </u>		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	[
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	<u> </u>	
2				
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3		<u> </u>	 	
	significant voice in the organization's investment policies and in directing the use of the organization's	1		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	╁~──	
Se	ction E. Type III Functionally Integrated Supporting Organizations	1 -		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	-		
	The organization satisfied the Activities Test. Complete line 2 below.			
	The organization is the parent of each of its supported organizations. Complete line 3 below.			
		n intional		
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ucuons)	Yes	No
2	Activities Test Answer (a) and (b) below Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		162	1,40
		1		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	00	 	
	that these activities constituted substantially all of its activities	2a	 	
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u></u>	\vdash	
	activities but for the organization's involvement	2b	ļ	-
3	Parent of Supported Organizations Answer (a) and (b) below			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			\vdash
	trustees of each of the supported organizations? Provide details in Part VI.	3a_	-	
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u> </u>	├	
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	<u></u>	

	dule A (Form 990 or 990-EZ) 2016 MISSOURT TECHNOLOGY COR			43-1341372 Page 6
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgar	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5	•	
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year).			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI).			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3	·	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1_	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	<u></u>	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrat	ed Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions)

<u>Par</u>	dule A.(Form 990 or 990-EZ) 2016 MISSOURI TECHI			3-1341372 Page 7
	Type in their renewally integrated cool	a)(3) Supporting Orga	nizations (continued)	
	on D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purpose Amounts paid to acquire exempt-use assets	s of supported organizations	<u> </u>	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI) See instructions	is organization is responsive		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			<u> </u>
	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reason-			1
	able cause required explain in Part VI). See instructions Excess distributions carryover, if any, to 2016			
3	Excess distributions carryover, if any, to 2010			
<u>a</u> b				
	From 2013			
	From 2014			· · · · · · · · · · · · · · · · · · ·
	From 2015			
	Total of lines 3a through e	· · · · · · · · · · · · · · · · · · ·		
	Applied to underdistributions of prior years			
	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D,			
	line 7: \$			<u> </u>
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c			
8	Breakdown of line 7:			
a			· · · · · · · · · · · · · · · · · · ·	
	Excess from 2013	<u> </u>		
	Excess from 2014			
<u>d</u>	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Schedule A (Form 990 or 990-EZ) 2016 MISSOURI TECHNOLOGY CORPORATION	43-1341372 Pag
Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any a (See instructions)	17a or 17b, Part III, line 12, lines 1 and 2, Part IV, Section C, Part V, Section B, line 1e, Part V.
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOM	Œ:
MISCELLANEOUS	
REALIZED GAIN ON EQUITY INVESTMENTS	
	
_ 	
•	
	

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047 Open to Public Inspection

Name of the organization

MISSOURI TECHNOLOGY CORPORATION

Employer identification number

43-1341372 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (dunng year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. a Total number of conservation easements 2a 2h **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of __ No Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

	t III Organizations Maintaining C	ollections of Ar				r Other	r Simil		3413/2		ge Z
								_			
3	Using the organization's acquisition, accession	on, and other record	s, cneck	any or the	iollowing that	are a si	gnificant	use of its	collection i	tems	
_	(check all that apply):		. —								
a	Public exhibition	C			hange progra	ams					
b	Scholarly research	•	• 🗀	Other							
C	Preservation for future generations							_			
4	Provide a description of the organization's co			-	-			ose in Par	t XIII.		
5	During the year, did the organization solicit or					er sımılar	assets	_	٦.,		1
Dai	to be sold to raise funds rather than to be ma								Yes_	Ш	No
Fai	TIV Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the	organizatio	on answered	'Yes" on	Form 99	90, Part IV	, line 9, or		
1a	Is the organization an agent, trustee, custodia	an or other intermed	lary for o	contribution	s or other ass	sets not	ıncluded	_			
	on Form 990, Part X?		·						Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing to	able [.]							
	•	•	_						Amount	•	
С	Beginning balance						10				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for e	scrow or cu	ustodial acco	unt liabil	ıty?		Yes		No
	If "Yes," explain the arrangement in Part XIII								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Par	t V Endowment Funds. Complete i	f the organization ar	swered	"Yes" on Fo	rm 990, Part	IV, line 1	10.				
		(a) Current year		rior year	(c) Two year			years back	(e) Four	years t	ack
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships								T -		
e	Other expenditures for facilities							· ,	<u> </u>		
	and programs					1					
f	Administrative expenses								<u> </u>		
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balance	e (line 1d	ı. column (a)) held as:	•					
a	Board designated or quasi-endowment		%	,, (,,						
b	Permanent endowment	%									
c	Temporarily restricted endowment	<u></u> %									
-	The percentages on lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses		ation tha	t are held ar	nd administer	ed for th	e organı	zation			
_	by.	•					·		[-	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
ь	if "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the	=								•	
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990), Part IV	, line 11a S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o			t or other		ccumula	ted	(d) Book	value	
	E	basis (investr			(other)		preciatio				
1a	Land					_					
b											
	Leasehold improvements										
	Equipment			2	1,198.		21,0)47.		15	51.
	Other										
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. colum	n (B), line 1	Oc.)			🕨		15	1.

1	(a) Description in	ibility		(D) DOOK VE	-
(1)	Federal income taxes				
(2)	CONTRACTUAL COMMITT	ED FUNDS		5,474	628.
(3)					
(4)					
(5)					
(6)					
(7)				<u></u>	
(8)		 			
(9)					
Total.	Column (b) must equal Form 990, Part >	. col. (B) line 25.)	_	5,474	628.
2. Liab	ulity for uncertain tax positions. In Part	XIII, provide the text of	the footnote	to the organiz	ation's fi

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2016

Part XIII | Supplemental Information (continued)

Part VIII Investments - Program Related. See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
INVESTMENT IN ANTEGRIN THERAPEUTICS (MOTIF)	174,999.	COST
INVESTMENT IN ANTEGRIN THERAPEUTICS (SSBCI)	234,301.	COST
INVESTMENT IN APPISTRY LLC	250,000.	COST
INVESTMENT IN APSE INC (SSBCI)	527,650.	COST
INVESTMENT IN APSE INC. (LCDI)	183,590.	COST
INVESTMENT IN ARVEGENIX INC (SSBCI)	329,512.	COST
INVESTMENT IN ARVEGENIX INC (MOTIF)	199,996.	COST
INVESTMENT IN BACTERIOSCAN INC.	500,000.	COST
INVESTMENT IN BENSON HILL BIOSYSTEMS	2,180,332.	COST
INVESTMENT IN BODITRAK SPORTS LLC	200,000.	COST
INVESTMENT IN BONFYRE INC.	300,473.	COST
INVESTMENT IN CARDIALEN INC.	357,143.	COST
INVESTMENT IN CELLARIDE, LLC	30,338.	COST
INVESTMENT IN CERTIFIED ENERGY LABS LLC	182,079.	COST
INVESTMENT IN CONFLUENCE LIFE (MOTIF) INVESTMENT IN CONFLUENCE LIFE SCIENCE SERIES	676,849.	COST
A INVESTMENT IN CONFLUENCE LIFE SCIENCES	250,000.	COST
(SSBCI) INVESTMENT IN CONFLUENCE LIFE SCIENCES	751,889.	COST
(LCDI)	164,014.	COST
INVESTMENT IN DATANALYTICS INC	300,000.	COST
INVESTMENT IN DERMELLE, LLC	<665,656.>	COST
INVESTMENT IN DIGITAL LEGACY (MOTIF)	150,000.	COST
INVESTMENT IN DIGITAL LEGACY (SSBCI)	148,056.	COST
INVESTMENT IN EDIS SOLUTIONS LLC	50,000.	COST
INVESTMENT IN EDISON AGROSCIENCE INC	225,000.	COST
INVESTMENT IN ELECTROCHAEA LLC	268,980.	COST
INVESTMENT IN EUCLISES PHARMACEUTICALS	300,000.	COST

Schedule D.(Form 990) MISSOURI TECHNOLOGY CORPORATION

Part XIII | Supplemental Information (continued)

(a) Description of investment type INVESTMENT IN EUCLISES PHARMACEUTICALS (MOTIF)	(b) Book value 200,000.	(c) Method of valuation Cost or end-of-year market value
	200 000	
(MOTIF)	200 000 1	
	200,000.	COST
INVESTMENT IN FEWDM, LLC	220,008.	COST
INVESTMENT IN FINLOCKER LLC	249,888.	COST
INVESTMENT IN FREIEZO INC	18,859.	COST
INVESTMENT IN GENERICO LLC	463,584.	COST
INVESTMENT IN GIRLS ASK GUYS	310,873.	COST
INVESTMENT IN GLOBAL VELOCITY	922,655.	COST
INVESTMENT IN GREETING QUBE LLC	387,166.	COST
INVESTMENT IN GREMLN LLC	170,126.	COST
INVESTMENT IN HATCHBUCK	173,767.	COST
INVESTMENT IN IMMUNOPHOTONICS INC	274,810.	COST
INVESTMENT IN IMMUNOPHOTONICS INC (SERIES A)	399,994.	COST
INVESTMENT IN INOVOTEC ANIMAL CARE	154,567.	COST
INVESTMENT IN KATALYST SURGICAL LLC	224,009.	COST
INVESTMENT IN KEREOS, INC	250,000.	COST
INVESTMENT IN KIOSITE LLC	234,072.	COST
INVESTMENT IN KOGENT SURGICAL LLC	231,962.	COST
INVESTMENT IN KULTEVAT INC.	500,000.	COST
INVESTMENT IN MEDAWARE SOLUTIONS INC	250,000.	COST
INVESTMENT IN MEDIBEACON (SSBCI)	923,486.	COST
INVESTMENT IN MEDSOCKET INVESTMENT IN MISSOURI PLANT SCIENCE CENTER	250,000.	COST
LLC	1,500,000.	COST
INVESTMENT IN MOBLICO SOLUTIONS LLC (MOTIF)	70,118.	COST
INVESTMENT IN MOBLICO SOLUTIONS LLC (SSBCI)	449,094.	COST
INVESTMENT IN MOVING OFF CAMPUS LLC	914.	COST
INVESTMENT IN NANOPORE DIAGNOSTICS LLC	105,356.	COST

(b) Book value	(c) Method of valuation Cost or end-of-year market value
50,000.	COST
<51,979.>	COST
156,394.	COST
69,805.	COST
250,000.	COST
144,477.	COST
1,197,075.	COST
250,000.	COST
250.	COST
16,312.	COST
194,929.	COST
14,816.	COST
93,436.	COST
100,000.	COST
25,475.	COST
250,000.	COST
1,605,604.	COST
203,154.	COST
572,345.	COST
385,035.	COST
150,000.	COST
167,996.	COST
1,812.	COST
11,037.	COST
	50,000. <51,979.> 156,394. 69,805. 250,000. 144,477. 1,197,075. 250,000. 16,312. 194,929. 14,816. 93,436. 100,000. 25,475. 250,000. 1,605,604. 572,345. 385,035. 150,000. 1,812.

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.cov/form990.

Employer identification number Open to Public ' Inspection

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43-1341372 X 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 MISSOURI TECHNOLOGY CORPORATION General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete of the organization answered "Yes" on Form 990, Part IV, line 21, for any Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CURATORS OF THE UNIVERSITY OF							MTC GRANTED FUNDING FOR
MISSOURI - KANSAS CITY - 5100							CONTINUE
ROCKHILL ROAD - KANSAS CITY, MO			٠				WHITEBOARS 2BOARDROOM,
65110	43-6003859		700,000.	0.			INCREASE EDUCATION FOR &
							MTC GRANTED FUNDING FOR
CENTER FOR EMERGING TECHNOLOGIES		-					THE OPERATION OF AN
4041 FOREST PARK AVENUE							INNOVATION CENTER IN ST
ST. LOUIS, MO 63108	43-1329853	501(C)3	678,379.	0.			LOUIS, MO TO ASSIST SMALL
							MTC GRANTED FUNDING TO
MISSOURI ENTERPIRSE							PROVIDE PRODUCTIVITY &
1706 E TENTH ST							COMPETITIVENESS
ROLLA, MO 65401	43-1337021	501(C)3	1,013,178.	0.			ASSISTANCE TO SMALL &
							MTC GRANTED FUNDING FOR
MISSOURI INNOVATION CENTER							THE OPERATION OF AN
1601 S. PROVIDENCE RD							INNOVATION CENTER IN
COLUMBIA, MO 65211	43-1350262	501(c)3	440,566.	0.			COLUMBIA, MO.
							MTC GRANTED FUNDING FOR
TRUMAN STATE UNIVERSITY							THE OPERATION OF AN
100 EAST NORMAL VH1100							INNOVATION CENTER IN
KIRKSVILLE, MO 63501	26-1382458		91,211.	0.			KIRKSVILLE, MO TO PROVIDE
							MTC GRANTED FUNDING FOR
BRUSH CREEK ENTERPRISE CENTER	_						THE OPERATIONS OF AN
PO BOX 287							INNOVATION CENTER IN
SMITHVILLE, MO 64089	43-1899271 501(C)3	501(C)3	316,255.	0.			KANSAS CITY, MISSOURI TO
2 Enter total number of section 501(c)(3) and government organizations list	nd government org	anizations listed in the	ed in the line 1 table				20.
3 Enter total number of other organizations listed in the line 1 table	s listed in the line 1			•			28.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2016)

Page 1

Schedul	le I (Form 990)	MISSOURI	MISSOURI TECHNOLOGY C	MISSOURI TECHNOLOGY CORPORATION	
Part II	Continuation of	Grants and Other	Assistance to Gover	f Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 99	(Schedule I (Form 990), Part II)

(a) Name and address of (b) EIN (c) IRC seconganization or government if applicat	(b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	tion (d) Amount of (e) Amount of (f) Method of (cash grant non-cash assistance (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							MTC GRANTED FUNDING FOR
MISSOURI RESEARCH CORPORATION							THE OPERATIONS OF AN
ONE UNIVERSITY PLAZA							INNOVATION CENTER IN CAPE
CAPE GIRARDEUA, MO 63701	42-1612788	501(C)3	66,460.	0.			GIRARDEAU, MISSOURI TO
							MTC GRANTED FUNDING FOR
DONALD DANFORTH SCIENCE CENTER							THE AGRICULTURE
975 N WARSON RD				_			INNOVATION SHOWCASE
ST. LOUIS, MO 63132	31-1584621	501(C)3	195,000.	0.			SPONSORSHIP AND TO
							MTC GRANTED FUNDING FOR
JOPLIN AREA CHAMBER OF COMMERCE							THE OPERATIONS OF AN
320 EAST 4TH STREET	•						INNOVATION CENTER IN
JOPLIN, MO 64801	43-1569729	501(C)3	207,607.	0.			JOPLIN, MISSOURI.
							MTC GRANTED FUNDING FOR
KANSAS CITY AREA DEVELOPMENT							THE 2017 ANIMAL HEALTH
COUNCIL - 30 W PERSHING ROAD SUITE							INVESTMENT FORUM
20 - KANSAS CITY, MO 64108	43-1852671	501(C)6	7,500.	0.			SPONSORSHIP.
							MTC GRANTED FUNDING FOR
MISSOURI UNIVERSITY OF SCIENCES							LAUNCH PAD FOR YOUNG
AND TECHNOLOGY - 300 W 12TH STREET				_			ENTREPREURS FROM
- ROLLA, MO 65409	43-6003859		100,000.	0.			UNIVERSITY OF MO TO
							MTC GRANTED FUNDING TO
MISSOURI STATE UNIVERSITY							SUPPORT THE DEVELOPMENT
901 SOUTH NATIONAL AVE							OF THE EFACTORY BUSINESS
SPRINGFIELD, MO 65897	44-6000308		525,995.	0.			ACCELERATOR PROGRAM &
				_			MTC GRANTED FUNDING TO
TECHNOLOGY ENTREPRENEUR CENTER							ESTABLISH THE
INC 911 WASHINGTON SUITE 615 -							CYBERSECURITY CLUSTER AND
ST. LOUIS, MO 63101	14-1870269	501(C)3	100,000.	0.			CYBER SECURITY INNOVATION
							MTC GRANTED FUNDING FOR
ST. JOSEPH INNOVATION CENTER							THE OPERATIONS OF AN
4221 MITCHELL AVE							INNOVATION CENTER IN ST.
ST JOSEPH, MO 64507	20-1215246	501(C)3	145,729.	0.			JOSEPH, MISSOURI AND
			•				MTC GRANTED FUNDING FOR
NW MISSOURI STATE UNIVERSITY							THE OPERATIONS OF AN
800 UNIVERSITY DRIVE							INNOVATION CENTER IN
MARYVILLE, MO 64468	44-6000301		40,123.	0.			MARYVILLE, MISSOURI.
							Schedule I (Form 990)

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Schedule I (Form 990) MISSOURI TECHNOLOGY CORPOR Part II Continuation of Grants and Other Assistance to Governments and	TECHNOLOGY Assistance to Gove	Y CORPORATION rernments and Organiza	ATION Organizations in the United States	ted States (Sche	(Schedule I (Form 990), Part II.)		43-1341372 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIO STL							MTC GRANTED FUNDING FOR STL REGIONAL BIOSCIENCE
SAINT LOUIS, MO 63105	45-2137574	501(C)3	600,000.	0.			GRANT FUNDS TO PROVIDED
ONL AUGH TREOTE					!		MTC GRANTED FUNDING FOR
				,			THE GLOBALHACK VI HACKATHON & YOUTH HACKING
ST. LOUIS, MO 63101	46-3747215	501(C)3	10,000.	0			LEAGUE/HIGH TECH
KC SOCIAL INNOVATION CENTER							MTC GRANTED FUNDING TO CREAT A "LIVING LAB"
	1			•			
KANSAS CITY, MO 64108	81-1552437	501(C)3	200,000.	0			COLLABORATE WITH RC, MO
אייים פחסט שטאואו מחש							MTC GRANTED FUNDING FOR
4240 DUNCAN AVE SUITE 200				•			AFFRENTICESHIPS & JOB PLACEMENT IN TECHNOLOGY
1110	47-1718432	501(C)3	250,000.	0.			IN KANSAS CITY, MISSOURI.
	i						MTC GRANTED FUNDING FOR
ITEN - IT ENTREPRENEUR NETWORK							THE OPERATION OF THE ITEN
NGTC							PROGRAM TO CONTINUE
ST LOUIS, MO 63101	47-2041618	501(C)3	241,000.	0.			PROVIDING CONCEPT
							MTC GRANTED FUNDING FOR
N KC CIVIC							GLOBAL GRANTS COMPETITION
CH GRANT KC - 1000							DESIGNED TO ATTRACT
STE 200 - KANSAS CITY, MO 64106	43-1572192	501(C)3	0.	0.			ENTREPRENEURS TO APPLY &
MARQUETTE TECH DISTRICT FOUNDATION						_	MTC GRANTED FUNDS TO
1610 N KINGSHIGHWAY STE 301							PROVIDE CODING TRAINING
CAPE GIRARDEUA, MO 63701	81-2556748	501(C)3	122,748.	0.			IN CAPE GIRARDEAU.
							MTC GRANTED FUNDS TO
MERCY RESEARCH DEVELOPMENT			,				IMPLEMENT A TECHNOLOGY
524 N BOONVILLE AVE							ACCELERATOR PATHWAY TO
SPRINGFIELD, MO 65806	43-1423050 501(C)3	501(C)3	100,000.	0.			RAPIDLY MOVE NOVEL
							MTC GRANTED FUNDS FOR
MISSOURI SOYBEAN ASSOCIATION							SOYBEAN PRODUCTION
							RESEARCH &
JEFFERSON CITY, MO 65110	23-7032186	501(C)5	1,552,000.	0.			COMMERCIALIZATION OF
							Schedule I (Form 990)

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a)	TECHNOLOGY	CORPORATIO	NO			; i	43-1341372 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (e) Amount of (fine or fine	Assistance to Gov	(c) IRC section	(d) Amount of		(Schedule I (Form 990), Part II.) t of (f) Method of (c)	(g) Description of	(h) Purpose of grant
organization or government		ıf applıcable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
							MTC GRANTED FUNDING TO
PROSPER WOMEN ENTREPRENEURS							SUPPORT ASSISTANCE FOR
4240 DUNCAN AVE SUITE 200	46-4952134 501(0)3	501(0)3	000 000	C			WOMEN ENTREPENEURS IN MO, HOST NATIONAL SYMPOSIUM
orice original residence of the country of the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the country or the coun	PCT7CCE-05	2/2/100	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				MTC GRANTED FUNDING TO
SMALL BUSINESS SYNERGY CORP							CONTINUE SUPPORT OF
5988 MID RIVERS MALL DRI							PROGRAMMING &
ST CHARLES, MO 63304	43-1600603 501(C)3	501(C)3	238,000.	0.			ENTREPRENEURIAL COMMUNITY
CURATORS OF THE UNIVERSITY OF							MTC GRANTED FUNDING TO
MISSOURI - COLUMBIA - 227							ADDRESS THE SHORTAGE OF
UNIVERSITY HALL - COLUMBIA, MO			_				LOW-COST/NO COST LEGAL
65211	43-6003859		325,000.	0			SERVICES THROUGH THE
CURATORS OF THE UNIVERSITY OF							MTC GRANTED FUNDING FOR
MISSOURI - ST. LOUIS - 1							ENTREPRENEUR TRAINING &
UNIVERSITY BLVD - ST. LOUIS, MO							MENTORING FROM TWO NEW
63121	43-6003859		50,000.	0.			APPROACHES, FLIP MODEL &

Page 2 (f) Description of noncash assistance' 43-1341372 (book, FMV, appraisal, other) FUNDING. REPORTS ARE REVIEWED BY MISSOURI TECHNOLOGY CORPORATION STAFF FOR THE MISSOURI TECHNOLOGY CORPORATION REQUIRES ALL GRANTEES TO PERIODICALLY Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed PROVIDED WRITTEN NARRATIVE AND FINANCIAL REPORTS DESCRIBING USE OF GRANT (d) Amount of non-cash assistance CURATORS OF THE UNIVERSITY OF MISSOURI - KANSAS CITY (c) Amount of cash grant MISSOURI TECHNOLOGY CORPORATION (b) Number of recipients NAME OF ORGANIZATION OR GOVERNMENT: PART II, LINE 1, COLUMN (H): (a) Type of grant or assistance PART I, LINE 2: Schedule I (Form 990) (2016) COMPLIANCE Part IV Part Ⅲ

Schedule I (Form 990) (2016)

632102 11-01-16

NAME OF ORGANIZATION OR GOVERNMENT: BRUSH CREEK ENTERPRISE CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: MTC GRANTED FUNDING FOR THE

OPERATIONS OF AN INNOVATION CENTER IN KANSAS CITY, MISSOURI TO PROVIDE

DEVELOPMENT ASSISTANCE TO SMALL TECHNOLOGY COMPANIES.

NAME OF ORGANIZATION OR GOVERNMENT: MISSOURI RESEARCH CORPORATION

Schedule I (Form 990)

NAME OF ORGANIZATION OR GOVERNMENT: SMALL BUSINESS SYNERGY CORP

(H) PURPOSE OF GRANT OR ASSISTANCE: MTC GRANTED FUNDING TO CONTINUE

SUPPORT OF PROGRAMMING & ENTREPRENEURIAL COMMUNITY DEVELOPMENT AT OPO

STARTUPS IN ST. CHARLES MO; AND FUNDING FOR THE EQUIPMENT AND BUILD-OUT

OF MAKER SPACE IN THE INCUBATOR IN ST. PETERS, MO.

PartiV Supplemental Information 43-1341372 Page 2
NAME OF ORGANIZATION OR GOVERNMENT:
CURATORS OF THE UNIVERSITY OF MISSOURI - COLUMBIA
(H) PURPOSE OF GRANT OR ASSISTANCE: MTC GRANTED FUNDING TO ADDRESS THE
SHORTAGE OF LOW-COST/NO COST LEGAL SERVICES THROUGH THE ENTREPRENEURSHIPS
LEGAL CLINIC, GRANT FUNDS TO COMMERCIALIZATION PROJECTS FOR BIOMEDICAL
INNOVATIONS, ASSISTS TECH-BASED ENTREPRENEURS IN EARLY STAGE DEVELOPMENT
BY FACILITATING EDUCATION, TECHNICAL ASSISTANCE & CAPITAL FOR
COMMERCIALIZATION AT MU SBTDC.
NAME OF ORGANIZATION OR GOVERNMENT:
CURATORS OF THE UNIVERSITY OF MISSOURI - ST. LOUIS
(H) PURPOSE OF GRANT OR ASSISTANCE: MTC GRANTED FUNDING FOR ENTREPRENEUR
TRAINING & MENTORING FROM TWO NEW APPROACHES, FLIP MODEL & PROJECT
ARISTOTLE BY GOOGLE, PILOT AIMS TO ACHIEVE SCALE FASTER AT UMSL ITE.

⁴ SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 16 Open to Public Inspection

Name of the organization

MISSOURI TECHNOLOGY CORPORATION

Employer identification number 43-1341372

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MODERIZATION OF MO BUSINESSES BY SUPPORTING THE TRANSFER OF SCIENCE,
TECHNOLOGY AND QUALITY IMPROVEMENT METHODS TO THE WORKPLACE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ESTABLISHMENT OF METHODS OF TECHNOLOGY APPLICATION, COMMERCIALIZATION
AND DEVELOPMENT.
FORM 990, PART VI, SECTION A, LINE 7A:
BOARD MEMBERS OF MISSOURI TECHNOLOGY CORPORATION ARE APPOINTED BY THE
GOVERNOR OF THE STATE OF MISSOURI.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 WILL BE REVIEWED BY THE AUDIT & FINANCE COMMITTEE AND THE
EXECUTIVE DIRECTOR PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. A
COPY OF FORM 990 WILL ALSO BE PROVIDED TO THE BOARD MEMBERS.
FORM 990, PART VI, SECTION B, LINE 12C:
DURING THE FISCAL PERIOD ENDING JUNE 30, 2010, THE BOARD OF MISSOURI
TECHNOLOGY CORPORATION ADOPTED A CONFLICT OF INTEREST POLICY. THE MTC BOARD
REVIEWS THE CONFLICT OF INTEREST ANNUALLY AT A BOARD MEETING. BOARD MEMBERS
ANNUALLY SIGN ACKNOWLEDGEMENTS STATING THAT THEY HAVE RECEIVED AND REVIEWED
THE CONFLICT OF INTEREST POLICY, ADDITIONALLY, ALL APPLICANTS FOR MTC
FUNDING ARE REQUIRED TO DISCLOSE ANY POTENTIAL CONFLICTS.

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization MISSOURI TECHNOLOGY CORPORATION	Employer identification number 43-1341372
THE MISSOURI TECHNOLOGY CORPORATION MAKES THESE DOCUMENTS	AVAILABLE UPON
REQUEST.	
FORM 990 PART XII FINANCIAL STATEMENTS AND REPORTING LINE	1
ACCOUNTING METHOD - MODIFIED CASH BASIS	
·	
FORM 990 PART I - LINE 13, 20, AND 22	
FORM 990 IS BEING AMENDED TO REFLECT ADJUSTMENTS FROM A FI	INANCIAL
STATEMENT AUDIT. THE CHANGES TO THE FORM 990 ARE SET FORTH	H BELOW:
FORM 990 PART 1 WAS AMENDED AS FOLLOWS:	
LINE 13 - GRANTS AND SIMILAR AMOUNTS PAID DECREASED DUE TO	GRANT
EXPENDITURES BEING MOVED TO 06/30/2016 - DECREASE OF \$1,07	74,999; OFFSET
WAS INCLUDED IN NET ASSETS AND FUND BALANCES CARRIED FORWA	ARD FROM THE
2015 AMENDED TAX RETURN	
LINE 20 - TOTAL ASSETS INCREASED DUE TO PRIOR PERIOD ADJUS	STMENT TO
INVESTMENTS OF \$111,982	
LINE 22 - NET ASSETS OR FUND BALANCES INCREASED BY \$111,98	32
FORM 990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLIS	SHMENTS
FORM 990 PART III LINE 4B AND 4E DECREASED BY \$1,074,999	
PART IX - STATEMENT OF FUNCTIONAL EXPENSES	
FORM 990 WAS AMENDED TO DECREASE COLUMN A & B BY \$1,074,99	99 TO REFLECT
ADJUSTMENT TO GRANTS PAID.	
PART X - BALANCE SHEET	
FORM 990 PART X WAS AMENDED TO INCREASE LINE 13 BY \$111,98	32 TO REFLECT edule O (Form 990 or 990-EZ) (2016)
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Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization MISSOURI TECHNOLOGY CORPORATION	Employer identification number 43-1341372
CHANGES OUTLINED ABOVE.	
PART X - BALANCE SHEET	
FORM 990 PART X WAS AMENDED TO INCREASE LINE 27 BY \$51,416	,835 AND
DECREASE LINE 28 BY \$51,304,853, DIFFERENCE BETWEEN THE TW	O ADJUSTMENTS
EQUALS \$111,982 WHICH WAS A PRIOR PERIOD ADJUSTMENT INCLUD	ED ON THE
2015 AMENDED TAX RETURN.	
PART XI - RECONCILIATION OF NET ASSETS	
PART XI WAS AMENDED TO DECREASE THE FOLLOWING:	
LINE 2 BY \$1,074,999	
PART XI WAS AMENDED TO INCREASE THE FOLLOWING:	
LINE 3 REVENUE LESS EXPENSES - INCREASED BY \$1,074,999	
LINE 4 NET ASSETS OR FUND BALANCES AT BEGINING OF YEAR - D	ECREASED TO
REFLECT AMOUNT CARRIED FORWARD FROM THE AMENDED 2015 TAX R	ETURN;
INCREASE OF \$111,982 AND DECREASED OF \$1,074,999; NET CHAN	GE \$963,017
LINE 10 NET ASSETS - INCREASE OF \$111,982	
SCHEDULE I - GRANTS AND OTHER ASSISTANCE TO ORGANIZATIONS	
SCHEDULE I WAS AMENDED TO DECREASE GRANTS BY \$1,074,999	
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