DLN: 93493047015986

Form **990**

Internal Revenue Service

Department of the Treasury

Return of Organization Exempt From Income Tax

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

▶ 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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2014 calendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015								
3 Che	eck if ap	oplicable C Name of organization East Arkansas Planning & Development District				entification number				
_	lress cha			71-04	0147	3				
_	ne chan	Doing Danies as								
	ıal retur	Number and street (or P O box if mail is not delivered to street address) Room/suit	Θ.	E Telepho	ne nun	nber				
_ Fina retu	al urn/term	DO Boy 1403	е							
_ Am	ended n	City or town, state or province, country, and ZIP or foreign postal code Jonesboro, AR 72403		G Cross n	acounto	£ 2 060 222				
App	lication	pending		G Gloss I	eceipts	\$ 3,868,333				
		F Name and address of principal officer Melissa Rivers	H(a)	Is this a group subordinates?	returr	n for ┌ Yes				
			H(b)	Are all subordi included?	nates	Γ Yes Γ No				
[Ta:	x-exem	pt status		If "No," attach	a lıst	(see instructions)				
ı w	ebsite	:► eapdd com	H(c)	Group exempt	ion nu	mber ►				
(Forn	n of org	anization 🔽 Corporation 🦲 Trust 🦷 Association 🦲 Other 🕨	L Yea	ar of formation 19	68 M	State of legal domicile AR				
Pa	rt I	Summary								
		Briefly describe the organization's mission or most significant activities								
aı	=	conomic development in twelve counties in East Arkansas								
ĕ	_									
Ē	_		_							
Governance	2 0	Check this box 🔭 if the organization discontinued its operations or disposed of	more	than 25% of its	net as	ssets				
	3 N	mber of voting members of the governing body (Part VI, line 1a)								
Activities &	l	Number of independent voting members of the governing body (Part VI, line 1b)		4	26					
Ě	l	otal number of individuals employed in calendar year 2014 (Part V, line 2a) .			5	13				
ទ្ធ	6 ⊺	otal number of volunteers (estimate if necessary)			6					
•	7 a ⊤	otal unrelated business revenue from Part VIII, column (C), line 12			7a	С				
	b∧	let unrelated business taxable income from Form 990-T, line 34			7b	0				
				Prior Year		Current Year				
a,	8	Contributions and grants (Part VIII, line 1h)		3,285,5		3,342,933				
Revenue	9	Program service revenue (Part VIII, line 2g)		537,6	522	525,400				
Š	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)				0				
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line			_	0				
	12	12)		3,823,1	153	3,868,333				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)				0				
	14	Benefits paid to or for members (Part IX, column (A), line 4)				0				
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)								
<u>š</u>	16a	Professional fundraising fees (Part IX, column (A), line 11e)	· · · · · · · · · · · · · · · · · · ·							
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶0								
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,997,5	60	3,051,725				
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		3,533,923						
	19	Revenue less expenses Subtract line 18 from line 12		275,3	-	334,410				
Net Assets of Fund Balances			Beg	jinning of Curre Year	nt	End of Year				
აგ. გ.	20	Total assets (Part X, line 16)		6,712,1	.72	5,440,917				
2 E	21	Total liabilities (Part X, line 26)		3,741,3	316	2,135,651				
zZ	22	Net assets or fund balances Subtract line 21 from line 20		2,970,8	356	3,305,266				
Par	t II	Signature Block								

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign Here

***** Signature of officer Melissa Rivers Executive Direc Type or print name and title

Paid Preparer **Use Only** Print/Type preparer's name Brent Cassady Preparer's signature Brent Cassady

Firm's name Frent G Cassady CPA PLLC

Jonesboro, AR 72401

Firm's address ► 108 E Huntington Ave

May the IRS discuss this return with the preparer shown above? (see instructio

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2014)				Page
Par			vice Accomplishments sponse or note to any line in thi	s Part III	
1	Briefly desc	rıbe the organızatıon's mıssı	on		
Ecor	iomic develop	ment in twelve counties in Ea	st Arkansas		
2		· · · · · · · · · · · · · · · · · · ·	ıcant program services during t	he year which were not listed on	
	If "Yes," des	cribe these new services on	Schedule O		
3	_	nization cease conducting, o	r make sıgnıfıcant changes ın ho	ow it conducts, any program	
	If "Yes," des	cribe these changes on Sch	edule O		
4	expenses S	ection 501(c)(3) and 501(c)	•	of its three largest program service o report the amount of grants and a id	•
4a	(Code) (Expenses \$	1,554,188 including grants	of \$) (Revenue \$	1,554,188)
	Administer and	d disperse General Improvements F	unds provided by the Arkansas state le	egislature under the guidelines of the state	e legislature
4b	(Code) (Expenses \$	924,833 including grants	of \$) (Revenue \$	775,905)
		Grant - Provided economic develo ditions in the district	oment and long-term economic growth	by improving land use, transportation sys	tems, long-range planning and
	(Code) (Expenses \$	669,232 including grants	of \$) (Revenue \$	974,394)
	•	, , ,	raste tire, and recycling administration,	, , , , ,	, , , , , , , , , , , , , , , , , , ,
	See Additio	onal Data			
	Other progr	ram services (Describe in Sc	hedule O)		
	(Expenses		ncluding grants of \$) (Revenue \$	373,079)
4e	Total progr	am service expenses 🕨	3,488,967		

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
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		
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	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		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)							
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No				
22	2 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							
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? <i>If "Yes," complete Schedule J</i>	23		No				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No				
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b						
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c						
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d						
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No				
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No				
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," complete Schedule L, Part II	26		No				
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		No				
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)							
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part		1					
		28a		No				
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No				
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No				
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No				
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No				
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No				
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No				
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		No				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36						
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No				
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes					

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			厂_
_	Entrolle combination Day 2 (Francis 100) Financia (C. C. C		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
C	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
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, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country •			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		N o
	were not tax deductible?	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	\vdash		
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b		9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
a L	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	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.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
c	Enter the amount of reserves on hand	-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response or note to an	y line in this Part VI

Se	ection A. Governing Body and Management				
			Y	'es	No
1a	Enter the number of voting members of the governing body at the end of the tax year	26			
	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				
b	Enter the number of voting members included in line 1a, above, who are independent	26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship of a business relation of the officer, director, trustee, or key employee?				No
3	Did the organization delegate control over management duties customarily performed by or unde supervision of officers, directors or trustees, or key employees to a management company or otl				No
4					No
5		s assets? . 5			No
6		6	+		No
	Did the organization have members, stockholders, or other persons who had the power to elect o	· · · · ·	+	_	110
,	more members of the governing body?		ı		Νo
b	Are any governance decisions of the organization reserved to (or subject to approval by) members or persons other than the governing body?	ers, stockholders, 7 1	•		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertal year by the following	ken during the			
а	The governing body?	8	i Y	es	
b	Each committee with authority to act on behalf of the governing body?	81	Y (es	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot organization's mailing address? If "Yes," provide the names and addresses in Schedule O				No
		3			
Se	ection B. Policies (This Section B requests information about policies not required b		nue (Code	·.)
Se				Code 'es	.) No
			Y		
10a	ection B. Policies (This Section B requests information about policies not required b	y the Internal Revelopment of	a Y		No
10a b	ection B. Policies (This Section B requests information about policies not required be Did the organization have local chapters, branches, or affiliates?	y the Internal Reverse 10 ch chapters, purposes?	a b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	the Internal Reverse 10 ch chapters, purposes? 10 body before filing 11	a b	'es	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	the Internal Reverse 10 ch chapters, purposes? 10 body before filing	y a y a	'es	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	the Internal Reverse 100 ch chapters, purposes? 100 body before filing 110 chapters	y da	es	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	y the Internal Reverse 10 ch chapters, purposes? 10 body before filing 11 chapters 12 that could give 12	Your American America	es	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	y the Internal Reverse 10 ch chapters, purposes? 10 body before filing 11 chapters 12 that could give 12 If "Yes," describe	your and your and you are your and you are you	es	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	that could give Internal Reverses 10 ch chapters, purposes? body before filing 11 that could give 12 If "Yes," describe 12	a Y (es	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	y the Internal Reverse 100 ch chapters, purposes? 100 body before filing 111	a Y (es	No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of su affiliates, and branches to ensure their operations are consistent with the organization's exempt that the organization provided a complete copy of this Form 990 to all members of its governing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	y the Internal Reverse 100 ch chapters, purposes? 100 body before filing 111	Y	es	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of su affiliates, and branches to ensure their operations are consistent with the organization's exempted that the organization provided a complete copy of this Form 990 to all members of its governing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and apprindependent persons, comparability data, and contemporaneous substantiation of the deliberation	y the Internal Reversed to Internal Reversed Internal	Y	es es es es	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of su affiliates, and branches to ensure their operations are consistent with the organization's exempt the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its governing the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and apprinted persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official	y the Internal Reversed to the Internal Revers	Y	es es es es	No No
10a b 11a b 12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13 Did the organization have a written policies required by the organization have a written whistleblower policy? Did the organization have a written consistently monitor and enforce compliance with the policy? Did the organization provided a complete copy of this Form 990 to all members of its governing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and apprinted persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	y the Internal Reverse 10 ch chapters, purposes? 10 body before filing 11 chapters 12 that could give 12 chapters, describe 13 chapters 14 chapters 15 chapters 16 chapters 16 chapters 16 chapters 17 chapters 17 chapters 18	Y	es es es es	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of su affiliates, and branches to ensure their operations are consistent with the organization's exempt the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its governing the form? Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and apprinted pendent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar and taxable entity during the year?	y the Internal Reversed to the Internal Revers	Y	es es es es	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of su affiliates, and branches to ensure their operations are consistent with the organization's exempt Has the organization provided a complete copy of this Form 990 to all members of its governing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 plus the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and apprindependent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar and taxable entity during the year?	y the Internal Reversed to the Internal Revers	Y	es es es es	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of su affiliates, and branches to ensure their operations are consistent with the organization's exempt the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its governing the form? Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and apprinted pendent persons, comparability data, and contemporaneous substantiation of the deliberation. The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar and taxable entity during the year?	y the Internal Reverse 100 ch chapters, purposes? 100 body before filing 111 chapters 122 that could give 122 that could give 123 chapters 134 chapters 135 chapt	Y	es es es es	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 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 ►Melissa Rivers

 - PO Box 1403
 - Jonesboro, AR 72403 (870) 932-3957

Form 990 (2014)	
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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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form 990 (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	T			
С	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	•	89,248	0	10,410

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person			No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(B) Description of services	(C) Compensation
Consulting	108,132
	Description of services

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►1

art V	1a	Statement o Check if Schedi	ule O contains a respor	nse or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
និង								
<u> </u>	b	Membership du	es 1b	66,612				
, Gm	С	Fundraising eve	ents 1c					
ar.	d	Related organiz	rations 1d					
Contributions, Giffs, Grants and Other Similar Amounts	e	Government grants	s (contributions) 1e	3,276,321				
§ 22	f	All other contribution	ons, gifts, grants, and 1f		i			<u> </u>
1 per		sımılar amounts no	ot included above		ļ	ļ		
ĕ	g	Noncash contribution 1a-1f \$	ons included in lines					
and	h	Total. Add lines	s 1 a - 1 f	🗼	3,342,933			
				Business Code				
ž	2a	Revolving loan fun	nd	900099	46,778	46,778		
35 28	b	Service revenue		900099	478,622	478,622		
တို့ သိ	c							
ऋ ों•	d							
<u> </u>	e							
Program Service Revenue	f	All other progra	am service revenue					
ž	g	Total. Add lines	s 2a-2f		525,400			
	3		ome (including dividend					
	4		ar amounts) stment of tax-exempt bond ;	—				
	4 5			· · · · · · · · · · · · · · · · · · ·				
	•	Koyulcies .	(ı) Real	(II) Personal				
	6a	Gross rents	, ,	, ,				
	b	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	LI me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
		sales expenses						
	c	Gain or (loss)						
	d 8a	Gross income f	rom fundraising	· · · · •				
		events (not inc \$ of contributions	luding s reported on line 1c)					
<u> </u>		See Part IV, lin	a a					
	b	Less direct ex	penses b					
,	c		(loss) from fundraising	events 🛌				
	9a	Gross income f See Part IV, lin	rom gaming activities ie 19 a					
	b	Less direct ex	penses b					
			loss) from gamıng activ) ا	vities . ►				
	10a	Gross sales of returns and allo						
	b	Less cost of go	oods sold b					
_	С		(loss) from sales of inve					
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	c	A.II						
		All other reven	ı					
	е		s 11a-11d					
	12	Total revenue.	See Instructions	🕨	3,868,333	525,400	0	

	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u></u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations 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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	92,952	88,304	4,648	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	291,208	276,648	14,560	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,404	6,084	320	
9	Other employee benefits	43,558	41,380	2,178	
10	Payroll taxes	48,076	45,672	2,404	
11	Fees for services (non-employees)				
а	Management				
b	Legal	18,844	18,844		
c	Accounting	69,908	66,413	3,495	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	906,392	906,392		
12	Advertising and promotion	37,925	36,029	1,896	
13	Office expenses	56,169	53,361	2,808	
14	Information technology	30,287	28,773	1,514	
15	Royalties				
16	Occupancy	96,458	91,635	4,823	
17	Travel	12,162	11,554	608	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	36,487	34,663	1,824	
20	Interest	6,531	6,531		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	41,527	39,451	2,076	
23	Insurance	19,274	18,310	964	
24	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)				
а	Program costs	148,786	148,786		
b	Bank fees	607	577	30	
c	Dues and registrations	13,314	12,649	665	
d	Subscriptions	2,866	2,723	143	
e	All other expenses	1,554,188	1,554,188		
25	Total functional expenses. Add lines 1 through 24e	3,533,923	3,488,967	44,956	0
26	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)				

Form 990 (2014) Page **11 Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X $\,$. $\,$ Γ **(A)** Beginning of year (B) End of year 1 95,387 Cash-non-interest-bearing 1

_	··		· ·			
2	Savings and temporary cash investments			5,681,308	2	4,240,808
3	Pledges and grants receivable, net			84,399	3	229,228
4	Accounts receivable, net			4		
5	Loans and other receivables from current and former officers, diemployees, and highest compensated employees Complete Pai Schedule L	rt II of	, trustees, key		5	
6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and cand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	ontribu iployee	ting employers		6	
7	Notes and loans receivable, net			604,195	7	483,625
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges		🗆	50	9	50
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	908,114			
Ь	Less accumulated depreciation	10b	516,295	318,145	10c	391,819
11	Investments—publicly traded securities			11		
12	Investments—other securities See Part IV, line 11				12	
13	Investments—program-related See Part IV, line 11				13	
14	Intangible assets		14			
15	Other assets See Part IV, line 11				15	
16	Total assets. Add lines 1 through 15 (must equal line 34)			6,712,172	16	5,440,917
17	Accounts payable and accrued expenses			3,025,385	17	1,532,407
18	Grants payable		18			
19	Deferred revenue			19		
20	Tax-exempt bond liabilities			20		
21	Escrow or custodial account liability Complete Part IV of Scheo	dule D			21	
22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi		tees,			
	persons Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated third parties				23	
24	Unsecured notes and loans payable to unrelated third parties			715,931	24	603,244
25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	t X of S	chedule		25	
26	D			3,741,316	25 26	2,135,651
20	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🖟		<u> </u>	3,741,310	20	2,135,651
37	lines 27 through 29, and lines 33 and 34.			1 044 540	_	1 200 070
27 28	Unrestricted net assets	•	·	1,211,548 344,488		1,296,876 598,408
29	Permanently restricted net assets		· -	1,414,820		1,409,982
29	Organizations that do not follow SFAS 117 (ASC 958), check he	re ► [and	1,414,020	29	1,400,002
30	complete lines 30 through 34. Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building or equipment fund		· · ·		31	
32	Retained earnings, endowment, accumulated income, or other fu		· · · ⊢		32	
33	Total net assets or fund balances		. H	2,970,856	-	3,305,266
34	Total liabilities and net assets/fund balances		·	6,712,172		5,440,917
	rotal habilities and het assets/fulla balances		•	0,712,172	54	5,440,317

Liabilities

Net Assets or Fund Balances

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,8	368,333
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		3	334,410
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
5	Net unrealized gains (losses) on investments	5			,
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		3,3	305,266
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed o	n		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	1e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	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?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Additional Data

Software ID: Software Version:

EIN: 71-0401473

Name: East Arkansas Planning & Development District

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	270,605	including grants of \$) (Revenue \$	323,174)							
Economic & Community Development - Provided economic development and long-term economic growth by improving land use, transportation systems, long-range planning and economic conditions in the district												
(Code) (Expenses \$	70,109	ıncludıng grants of \$) (Revenue \$	49,905)							
facılıtate SBA lendı	Financial services - Administer Economic Development Administration, USDA Intermediate Relending Program loan programs, and facilitate SBA lending with financial institutions to assist qualified borrowers of second resort by providing business loans throughout the twelve county district											

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
Name and Title A vera hours week ((B) (C) A verage hours per week (list any hours (C) Position (do not chemore than one box, un person is both an officiant and a director/truste						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	any hours for related organizations below dotted line)	a Individual trustee or director	dire Institutional Trustee			Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099-MISC)	from the organization and related organizations	
(1) Gary Howell	1 00	x						0	0	0	
Board Member	0 00	_ ^						0	0	0	
(1) Frank Fogleman	1 00	l x						0	0	0	
Board Member	0 00										
(2) Woody Wheeless	1 00	×						0	0	0	
Board Member (3) Ed Hill	0 00					-	_				
		×						0	0	0	
Board Member (4) Harold Perrin	0 00										
		×						0	0	0	
Board Member (5) Bob Stacy	0 00										
Board Member	0 00	×						0	0	0	
(6) Terry Woodard	1 00									_	
Board Member	0 00	×						0	0	0	
(7) Mike Gaskill	1 00										
Board Member	0 00	×						0	0	0	
(8) Dale Freeman	1 00										
Board Member	0 00	×						0	0	0	
(9) James Sanders	1 00							_	_	_	
Board Member	0 00	×						0	0	0	
(10) Jım Keasler	1 00	.,							_	_	
Board Member	0 00	X						0	0	0	
(11) Jimmy Williams	1 00										
Board Member	0 00	X						0	0	0	
(12) Randy Carney	1 00	X						0	0	0	
Board Member	0 00	^						Ů	Ů	Ů	
(13) Don Gentry	1 00	x						0	0	0	
2nd Vice President	0 00	^						Ů	Ů	0	
(14) Leon Phillips	1 00	l x						0	0	0	
Board Member	0 00							Ŭ	ŭ	ŭ .	
(15) David Jansen	1 00	l x						0	0	0	
Board Member	0 00							_	_		
(16) Gary Hughes	1 00	×						0	0	0	
Secretary	0 00										
(17) Eoice Trice	1 00	×						0	0	0	
Board Member	0 00					-					
(18) Jerry Woodard		×						0	0	0	
Board Member (19) Donnie Sanders	1 00										
		×						0	0	0	
Board Member (20) Rob Young	0 00										
		×						0	0	0	
Board Member (21) Rusty McMillon	1 00					+					
Board Member	0 00	х						0	0	0	
(22) Jay Hollowell	1 00					+					
Board Membr	0 00	х						0	0	0	
(23) Bobby Cantrell	1 00										
Board Member	0 00	х						0	0	0	
(24) Barbara Lewallen	1 00					†					
Board Member	0 00	X						0	0	0	
	1	1				1	·	I.	i.	<u> </u>	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	2/1099-MISC) 2/1099-MISC)	related organizations	
(26) Grady Collum Board Member	1 00	Х						0	0	0
(1) Melissa Rivers	0 00			х			·	89,248	0	10,410

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DLN: 93493047015986

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, 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.

Inspection Name of the organization **Employer identification number** East Arkansas Planning & Development District 71-0401473 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) 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 day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year -_ 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 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 in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	4 III Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	<u>cal Tre</u>	<u>easu</u>	res, or Ot	her S	Similar As	sets (d	continued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, ch	neck	any of th	ne follo	owing that ar	e a sı	gnıfıcant use	ofits	
а	Public exhibition		d	Γ	Loan o	rexch	nange progra	ms			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	w the	y further	r the o	rganızatıon's	exen	npt purpose	ın	
5	During the year, did the organization solicit of									┌ Yes	□ No
Par	assets to be sold to raise funds rather than t		•								1 140
	Part IV, line 9, or reported an an										
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ions o	r other asse	ts not		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving t	able		_				
_							<u> </u>		An	nount	
C	Beginning balance						<u> </u>				
d	Additions during the year							d			
e •	Distributions during the year							e			
f	Ending balance			_				f		<u> </u>	
2a b	Did the organization include an amount on Fo								•	│ Yes	Г №
	If "Yes," explain the arrangement in Part XII rt V Endowment Funds. Complete i										'
Pa	Endowment Funds. Complete i	(a)Current year)Prior			vo years back			(e)Four	years back
1a	Beginning of year balance	, ,			,			<u> </u>	,		,
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end baland	ce (lın	e 1g	, column	n (a)) h	neld as				
а	Board designated or quasi-endowment ►										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiza	ation	that	are held	and a	dmınıstered	for the	e		
	organization by									Yes	No
	(i) unrelated organizations								3a(
ь	If "Yes" to 3a(II), are the related organization							٠.	31		+
4	Describe in Part XIII the intended uses of th										
Par	t VI Land, Buildings, and Equipme		the o	rgar	ıızatıon	answ	ered 'Yes'	to Fo	rm 990, Pa	art IV, I	ine
	11a. See Form 990, Part X, line 1 Description of property	LU.			a) Cost or sıs (ınvest		(b)Cost or other		(c) Accumulated depreciation	d (d)	Book value
1-	Land			-				+			
i Ai			-				ļ	+		-	
	Buildinas						340 1	59 l	120 1	72	219.987
b	Buildings						340,1	.59	120,1	72	219,987
b	Leasehold improvements										219,987 171,832
b c d	Leasehold improvements						340,1 567,9		120,1 396,1		219,987 171,832

Part VII	Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
	a) Description of security or category	(b)Book value	(c) Method of va	
/1 \5	(including name of security)		Cost or end-of-year	market value
	l derivatives			
Other	held equity interests			
Total (Colum	on (h) must oqual Form 000 Part V cal (P) line 12.)	<u> </u>		
	Investments—Program Related. Co			orm 990 Part IV line 11c
Lair Attr	See Form 990, Part X, line 13.	implete il the organization	i aliswered Tes to To	offit 990, Parciv, line 11c.
	(a) Description of investment	(b) Book value	(c) Method of va	
			Cost or end-of-year	market value
-				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX		answered 'Yes' to Form 990	, Part IV, line 11d See	Form 990, Part X, line 15
	(a) Descrip	otion		(b) Book value
Total. (Colum	mn (b) must equal Form 990, Part X, col.(B) line 15	· · · · · ·		
	Other Liabilities. Complete if the organ			ine 11e or 11f. See
	Form 990, Part X, line 25.			
1	(a) Description of liability	(b) Book value		
Federal inco	ome taxes			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	the taxt of the feetness to the	oo organization's financis	

Par		on of Revenue per Audited Financial Statements With Revenue per on answered 'Yes' to Form 990, Part IV, line 12a.	er Ret	curn Complete If
1	Total revenue, gains, a	and other support per audited financial statements	1	3,868,333
2	A mounts included on I	line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (l	losses) on investments 2a		
b	Donated services and	use of facilities		
c	Recoveries of prior yea	ar grants		
d	Other (Describe in Par	rt XIII)		
e	Add lines 2a through 2	2d	2e	
3	Subtract line 2e from li	line 1	3	3,868,333
4	A mounts included on F	Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses	not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Par	rt XIII)		
C	Add lines $\mathbf{4a}$ and $\mathbf{4b}$.		4c	
5		nes 3 and 4c. (This must equal Form 990, Part I, line 12)	5	3,868,333
Part		on of Expenses per Audited Financial Statements With Expenses ation answered 'Yes' to Form 990, Part IV, line 12a.	per R	eturn. Complete
1	Total expenses and los	sses per audited financial statements	1	3,533,923
2	Amounts included on l	line 1 but not on Form 990, Part IX, line 25		
а	Donated services and	use of facilities		
b	Prior year adjustments	s		
С	Otherlosses			
d	Other (Describe in Par	rt XIII)		
e	Add lines 2a through 2	2d	2e	
3	Subtract line 2e from li	line 1	3	3,533,923
4	Amounts included on F	Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses	not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Par	rt XIII)		
С			4c	
5		ines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	3,533,923
Par	Supplemen	tal Information		
Part		uired for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to p		any additional
	Return Reference	Explanation		

Jenedale 2 (1 01111 330) 2013		r age 3	
Part XIII Supplemental Information	on (continued)		
Return Reference	Explanation		
-			

Schedule D (Form 990) 2014

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493047015986

OMB No 1545-0047

2014

Open to Public Inspection

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.

Name of the organization	Employer identification number
East Arkansas Planning & Development District	
	71-0401473

990 Schedule O, Supplemental Information

Return Reference	Explanation	
Form 990 governing body review Part VI line 11	Return is reviewed by the Executive Director and emailed to all board members for review prior to filing	
Conflict of interest policy compliance Part VI line 12c	Board members are required to abstain during votes on issues that directly affect their ju risdictions or allocated resources to their jurisdictions. Abstentions are documented in the board meeting minutes	
CEO executive director top management comp Part VI line 15a	Compensation ranges for all positions, including the Executive Director, are determined by an independent third party HR consultant and used by the board in salary deliberations an didecisions which are contemporaneously documented in the related board meeting minutes	
Other officer or key employee compensation Part VI line 15b	Compensation ranges for all positions, including key employees, are determined by an indep endent third party HR consultant and used by the Executive Director in salary deliberation s and decisions which are contemporaneously documented in the related board meeting minute s	
Governing documents etc available to public Part VI line 19	Public record documents are available at the Districts office upon request	
List of other fees for services expenses Part IX line 11g	Waste Tire disposal, \$465,341, HUD Planning Grant consultants, \$317,720, Recycling service s, \$61,353, information technology support, \$9,069	
List of other expenses Part IX line 24e	Disbursement of General Improvement Funds as provided by Arkansas legislature, \$1,608,197	