efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

DLN: 93493049001224

Open to Public Inspection

┌ Yes 🗸 No

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013 D Employer identification number B Check if applicable East Arkansas Planning & Development District Address change 71-0401473 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Terminated Amended return City or town, state or country, and ZIP + 4 Jonesboro, AR 72403 Application pending **G** Gross receipts \$ 2,297,831 Name and address of principal officer

Is this a group return for Melissa Rivers affiliates? 2905 Kina St Jonesboro,AR 72401 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status

H(c) Group exemption number ► **Website:** ► eapdd com L Year of formation 1968 M State of legal domicile AR Part I Summary Briefly describe the organization's mission or most significant activities Economic development in twelve counties in East Arkansas Activities & Governance 2 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) . 28 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 28 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 13 6 **6** Total number of volunteers (estimate if necessary) . . . 0 7a Total unrelated business revenue from Part VIII, column (C), line 12. 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b 0 **Prior Year Current Year** 1,694,527 Contributions and grants (Part VIII, line 1h) . . . 2,010,221 314,128 603,304 Program service revenue (Part VIII, line 2g) . . . 0 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) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 2,324,349 2,297,831 0 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) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines **15 Expenses** 510,251 656,654 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 1,546,990 1,312,454 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,057,241 1,969,108 18 19 Revenue less expenses Subtract line 18 from line 12 267,108 328,723 t Assets or id Balances **Beginning of Current End of Year** 3,550,590 20 Total assets (Part X, line 16) . 3,324,467 957,689 21 855,089 Total liabilities (Part X, line 26) . . 22 Net assets or fund balances Subtract line 21 from line 20 2,366,778 2,695,501

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

Signature of office Sign Here Melissa Rivers Executive Direct Type or print name and title Preparer's signature Print/Type preparer's name Brent Cassady Paid Firm's name Frent G Cassady CPA PLLC Preparer Firm's address > 108 E Huntington Use Only

Jonesboro, AR 72401 May the IRS discuss this return with the preparer shown above? (see instruction

Forn	n 990 (2012)					Page 2
Par			-			
1	Briefly describ	e the organization's missi	on			
<u>Ecor</u>	2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? If "Yes," describe these new services on Schedule O 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O 4 Describe the organization's program service accomplishments for each of its three largest program services, as measurexpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported. 4a (Code) (Expenses \$ 185,537 including grants of \$) (Revenue \$ 41 Economic and Community Development - Provided economic development and long-term economic growth by improving land use, transportation range planning and economic conditions in the district. 4b (Code) (Expenses \$ 888,335 including grants of \$) (Revenue \$ 77 HUD Planning Grant - Provided economic development and long-term economic growth by improving land use, transportation systems, long-rang economic conditions in the district. 4c (Code) (Expenses \$ 615,530 including grants of \$) (Revenue \$ 75 Environmental Services - Provided solid waste, waste tire, and recycling administration, services and education in the district. (Code) (Expenses \$ 103,263 including grants of \$) (Revenue \$ 78 Environmental Services - Provided solid waste, waste tire, and recycling administration, services and education in the district.					
2					r which were not listed on	. Tyes V No
1 Econo 2 3 4 4a 4b	If "Yes," descri	be these new services on	Schedule O			
3	services? .				onducts, any program	
4	Describe the or expenses Sect	rganızatıon's program serv tıon 501(c)(3) and 501(c)	vice accomplishi ((4) organization	is are required to repor		
4a	(Code) (Expenses \$	185,537	ıncludıng grants of \$) (Revenue \$	413,340)
				opment and long-term ecor	nomic growth by improving land use	e, transportation systems, long-
4b	(Code) (Expenses \$	888,335	ıncludıng grants of \$) (Revenue \$	779,047)
			pment and long-ten	m economic growth by imp	roving land use, transportation syst	ems, long-range planning and
4c	(Code) (Expenses \$	615,530	ıncludıng grants of \$) (Revenue \$	796,025)
	Environmental Se	ervices - Provided solid waste, v	vaste tire, and recyc	cling administration, service	s and education in the district	
	(Code) (Expenses \$	103,263	ıncludıng grants of \$) (Revenue \$	71,540)
					ate Relending Program loan prograr	ns to assist qualified borrowers of
4d	Other program	n services (Describe in Sc	:hedule O)			
	(Expenses \$	·	ncluding grants	of\$) (Revenue \$	71,540)

1,792,665

4e

Total program service expenses ►

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? <i>If</i> "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? If "Yes," complete Schedule C, Part III	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? If "Yes," complete Schedule D, Part III	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? If "Yes," complete Schedule D, Part IX	11d		No
е	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 assistance to any organization or entity located outside the United States? 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 assistance to individuals located outside the United States? 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 and other assistance to any government or organization in the United States on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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		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 25	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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? <i>If</i> "Yes," complete Schedule L, Part	,		
		28a		Νo
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
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		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12		1 63	140
	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			
	gaming (gambling) winnings to prize winners?	1c	Yes	
а	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			
)	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	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	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
)	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
-	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	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?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
ı	If "Yes," indicate the number of Forms 8282 filed during the year			
	· · · · · · · · · · · · · · · · · · ·	1		
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
•	required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
3	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
3	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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			
:	Enter the amount of reserves on hand	1		
	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	14h		- 140

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

	ection A. Governing body and management			
			Yes	No
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			
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 officer, director, trustee, or key employee?	2		No
3	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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod Yes	e.) No
	ection B. Policies (<i>This Section B requests information about policies not required by the Internal R</i> Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No No No No

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 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 Vpon 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, physical address, and telephone number of the person who possesses the books and records of the organization ►Melissa Rivers 2905 King St Jonesboro, AR (870) 932-3957

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

Check if Schedule O contains a response to any question 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

- 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 (1) Arnell Willis	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h an or/tr	offic	ess er e)	(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 related organizations
	1 00	х						0	0	0
Board Member (2) Bob Stacy	1 00									
Board Member		х						0	0	0
(3) Charles Nix	1 00	,								
Board Member		Х				L		0	0	0
(4) Dale Freeman	1 00	х						0	0	0
Board Member								Ů		
(5) David Jansen	1 00	×						0	0	0
Board Member									_	
(6) Dewanye Phelan	1 00	x						0	0	0
Board Member (7) Don Gentry	1 00									
	1 00	×						0	0	0
2nd Vice President (8) Ed Hill	1 00									
Board Member		х						0	0	0
(9) Eoise Trice	1 00									
Board Member		×						0	0	0
(10) Frank Fogleman	1 00	,,								
Board Member		X						0	0	0
(11) Gary Howell	1 00	х						0	0	0
President		_ ^						0	0	
(12) Gary Hughes	1 00	×						0	0	0
Secretary										
(13) Gerald Morris	1 00	x						0	0	0
1st Vice President (14) Harold Perrin	1.00									
	1 00	х						0	0	0
Board Member (15) Jack Caubble	1 00									
Board Member		х						0	0	0
(16) James Sanders	1 00									
Treasurer		Х						0	0	0
(17) Jerry Shipman	1 00	Ţ.,								
Board Member		X						0	0	0
										Form 990 (2012)

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

(A) Name and Tıtle		(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box thar	chec k, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount o compen from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
(18) J	erry Woodard	1 00	×						o	О	ı	0
	Member ım Keasler	1 00										
` '	Member	1 00	х						О	0		0
	ımmy Wıllıams	1 00										
Board	Member		X						0	0	ı	0
(21) L	awrence Owens	1 00	х						0	0		0
Board	Member		_ ^						0			0
` ,	eon Phillips	1 00	x						o	0		0
	Member 1ıke Gaskıll	1 00										
` ,	Member		x						0	0	ı	0
	Randy Carney	1 00	х						0	0		0
	Member								-			
` '	iheila Walters Member	1 00	×						0	0		0
` '	erry Woodard Member	1 00	х						0	0		0
	Voody Wheeless	1 00	х						0	0		0
	Member								-			
` '	Melissa Rivers	40 00			х	x	х		79,674	0		11,122
Execu	tive Director											
1b	Sub-Total			•	•		-					
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)						-		79,674	0		11,122
2	Total number of individuals (including b \$100,000 of reportable compensation f	ut not limited to	those	liste		bove	e) who	rec	eived more than	L		
3	Did the organization list any former offi on line 1a? <i>If</i> "Yes," complete Schedule J			e, key	y em	nplo _ʻ	yee, o	r hig	hest compensate	d employee	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations of individual	reater than \$1	50,000)? If		s," c	omple			om the		No
5	Did any person listed on line 1a receive services rendered to the organization?									ndividual for		No

Section B. Independent Contractors

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.

(A) Name and business address	(B) Description of services	(C) Compensation
White River Regional Management Cor ,1652 White Drive Batesville AR 72503	Waste tire disposa	242,436
Building Communities , 6126 W State Street Boise ID 83703	Consulting	320,000
Younger Associates , 97 Directors Row Ste 100 Jackson TN 38305	Consulting	134,375

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 ►3

		Check if Schedule O contains a respon	2, 94551011	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
<u>.</u>	1a	Federated campaigns 1a					
Ĕ	b	Membership dues 1b	67,273				
Ĕ	c	Fundraising events 1c					
ar /	d	Related organizations 1d					
፪	e	Government grants (contributions) 1e	1,627,254				
Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above					
≝	g	Noncash contributions included in lines		ł			
and (-	1a-1f \$ Total. Add lines 1a-1f		1,694,527			
<u>ā</u>	h	Total. Add lines 1a-11	•	1,054,527			
	2a	Income on RLF	Business Code 900099	69,867	69,867		
	b	Service income	900099	533,437	533,437		
	c		300035	333,137	333,131		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f	🛌	603,304			
	3	Investment income (including dividend					
	4	and other similar amounts) Income from investment of tax-exempt bond p	_				
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	(I) Securities Gross amount	(II) Other				
	,	from sales of assets other					
	b	than inventory Less cost or					
	_	other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18					
		a					
	b c	Less direct expenses b Net income or (loss) from fundraising e	vents •				
		Gross income from gaming activities See Part IV, line 19					
	b	Less direct expenses b					
	c	Net income or (loss) from gaming activ	ities				
1	.0a	Gross sales of inventory, less returns and allowances .					
	b	Less cost of goods sold b					
		Net income or (loss) from sales of inve	ntory 🛌				
		Miscellaneous Revenue	Business Code				
1	.1a						
	b						
	C C	All other revenue					
	d	All other revenue					
	e	Total. Add lines 11a-11d	▶				

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) マ Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 80,618 68,525 12,093 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) . . . Other salaries and wages 442,355 376,002 66,353 Pension plan accruals and contributions (include section 401(k) 16,088 12,057 4,031 and 403(b) employer contributions) 66,862 56,833 10,029 Other employee benefits 10 50,731 43,121 7,610 11 Fees for services (non-employees) Management 21,331 Legal 21,331 Accounting 75,113 63,846 11,267 Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 774,447 774,447 Schedule O) Advertising and promotion . . 18,747 15,935 12 2,812 13 Office expenses 35,198 29,918 5,280 10,139 8,618 1,521 14 Information technology . . . 15 Royalties . 106,053 90,145 15,908 16 Occupancy **17** 31,206 26,525 4,681 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 3,245 2,758 487 20 7,837 7,837 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 24,161 20,537 3,624 23 28,631 24,336 4,295 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) a Program costs 65,385 55,577 9,808 Bank fees 440 374 66 12,541 Dues and registrations 10,660 1,881 d Subscriptions 2,185 1,857 328 95,795 e All other expenses 81,426 14,369 Total functional expenses. Add lines 1 through 24e 25 1,969,108 1,792,665 176,443 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)

Assets

Liabilities

Net Assets or Fund Balances

Form 990 (2012)

Part X Balance Sheet

	Check if Schedule O contains a response to any question in this Part X	(A)		(B)
Τ.	Cook was street because	Beginning of year 1,788,336		End of year 1,984,764
1	Cash—non-interest-bearing	1,788,330		1,984,764
2	Savings and temporary cash investments	240,794	2	01.004
3	Pledges and grants receivable, net	240,794		91,994
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors, trustees, employees, and highest compensated employees. Complete Part II of Schedule L	key	5	
6	Loans and other receivables from other disqualified persons (as defined under sec 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employ and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficial organizations (see instructions) Complete Part II of Schedule L	yers	6	
7	Notes and loans receivable, net	982,835	7	1,159,777
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	206	9	50
10a	Land, buildings, and equipment cost or other basis Complete	8,132		
Ь	Less accumulated depreciation 10b 45	4,127 312,296	10c	314,005
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)	3,324,467	16	3,550,590
17	Accounts payable and accrued expenses	185,339	17	83,173
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
	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	772,350	24	771,916
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
26	D	957,689	_	855,089
120	Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete	557,555	20	000,000
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	1,327,660	27	1,333,739
28	Temporarily restricted net assets	-345,993	28	-79,385
29	Permanently restricted net assets	1,385,111	29	1,441,147
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
30	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 funds		32	
33	Total net assets or fund balances	2,366,778	-	2,695,501
34	Total liabilities and net assets /fund halances	3 324 467		3 550 590

Par	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				<u></u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,2	297,831
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,9	969,108
3	Revenue less expenses Subtract line 2 from line 1	3		3	328,723
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,366		366,778
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		2,6	95,501
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. F
				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 re a separate basis, consolidated basis, or both	viewed on			
	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 sebasis, consolidated basis, or both	eparate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for overs audit, review, or compilation of its financial statements and selection of an independent accountant?	ight of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n in			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Single Audit Act and OMB Circular A-133?	the	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ne required	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493049001224

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Open to Public

tema	I Revenue Service	1	m 990. ► See separate instructions.		Inspec	tion	
	me of the organi			Employer i	er identification number		
Eas	st Arkansas Planning	& Development District		71-04014	173		
Pa		izations Maintaining Donor Adv		_		te if the	
	organiz	zation answered "Yes" to Form 990	· · · · · · · · · · · · · · · · · · ·	(1) -			
	Total number a	t and afwar	(a) Donor advised funds	(b) Fu	ınds and other accou	ınts	
L 2	Total number a	tributions to (during year)					
2 3		nts from (during year)					
, 1		e at end of year					
5		zation inform all donors and donor adviso		or advised			
	funds are the o	rganızatıon's property, subject to the or	ganization's exclusive legal control?		√Yes	┌ No	
5	used only for c	zation inform all grantees, donors, and donated haritable purposes and not for the benefermissible private benefit?			ose Yes	┌ No	
Pai	rt III Conse	rvation Easements. Complete ıf	the organization answered "Yes" t	o Form 990	, Part IV, line 7.		
2	Protection Preservation Complete lines	on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a he last day of the tax year	Preservation of a	certified histo	oric structure		
	casement on th	ne fast day of the tax year		He	eld at the End of the	Year	
а	Total number o	of conservation easements		2a			
b	Total acreage	restricted by conservation easements		2b			
c	Number of cons	servation easements on a certified histo	oric structure included in (a)	2c			
d		servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d			
3	Number of cons	servation easements modified, transferr	ed, released, extinguished, or terminate	ed by the orga	anızatıon durıng		
	the tax year 🛌						
1	Number of stat	es where property subject to conservati	ion easement is located ►				
5		nization have a written policy regarding t f the conservation easements it holds?	the periodic monitoring, inspection, hand	dling of violat	ions, and Yes	┌ No	
5	Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments during	the year		
7	•	enses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the y	ear		
3		servation easement reported on line 2(o	d) above satisfy the requirements of sec	ction 170(h)(
9	balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the	e footnote to the organization's financia			No	
22.5		n's accounting for conservation easeme izations Maintaining Collection		or Other S	imilar Assats		
ŒЦ		ete if the organization answered "Y		or other s	mmar Assets.		
La	If the organizat works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	or research II	n furtherance of pub		
b	works of art, hı	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to thes	ts held for public exhibition, education,			lıc	
	(i) Revenues I	ncluded in Form 990, Part VIII, line 1		•	- \$		
	(ii) Assets incl	luded in Form 990, Part X		•	+\$		
2	If the organizat	tion received or held works of art, histor nts required to be reported under SFAS		or financial ga	'		
а	Dayanuas incli	idad in Form 900 Part VIII June 1					

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Art</u>	<u>:, HIS</u>	<u>tori</u>	<u>caıı</u>	reasu	res, or O	tne	<u>r Similar A</u>	ssets (d	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other recor	ds, ch	neck	any of	the follo	wing that a	are a	sıgnıfıcant us	e of its	
а	Public exhibition		d	Γ	Loar	orexch	ange progi	ams			
b	☐ Scholarly research		e	Γ	Othe	er					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furth	ner the o	rganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit o								ıılar	_	_
	assets to be sold to raise funds rather than t		•						!! t- F	☐ Yes	No
Pali	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	a "Y	es" to Form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						rotherass	ets	not	☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_				
									Α	mount	
C	Beginning balance							1 c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?							☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	n has	been pr	ovided in F	art)	KIII		Γ
Pa	rt V Endowment Funds. Complete					es" to F	orm 990,	Par	t IV, line 10		
_		(a)Current year	(b)) Prior	year	b (c) Tw	o years back	(d)	Three years back	(e)Four	years back
1a	Beginning of year balance					-		+			
Ь	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 curi	ent year end balan	ce (lın	ne 1g	, colui	nn (a)) h	eld as			_	
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment ▶										
c	Temporarily restricted endowment ▶										
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are he	ld and a	dmınıstere	d for	the	Yes	No
	(i) unrelated organizations				•					(i)	
	(ii) related organizations							•		(ii)	
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the					·		•		Bb	
	t VI Land, Buildings, and Equipme					10					
	Description of property	Jee Form 33	, , , ,	(i) Cost	or other	(b)Cost or		(c) Accumulate		Book value
				ba	sıs (ınv	estment)	basıs (oth	er)	depreciation		
1a	Land			\top							
	Buildings						340),159	109,	378	230,781
С	Leasehold improvements										
d	Equipment						427	7,973	344,	749	83,224
e			•								
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), lin	e 10(c).)			>		314,005

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value	(c) Method	d of valuation
(including name of security)		Cost or end-of-	year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Method	d of valuation
		Cost or end-of-	year market value
((-)	•		
Part IX Other Assets. See Form 990, Part X, II		1	(1) 5 1 1
(a) Descri	ption		(b) Book value
T. 1 (0) (1) (1) (2) (2) (1)	- \		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1:			
Part X Other Liabilities. See Form 990, Part 3	x, line 25. (b) Book value		
	(b) Book value		
Federal income taxes			
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶			
2 Fin 48 (ASC 740) Footnote In Part XIII provide the te	xt of the feetnets to the orga	nization's financial statem	anta that raparts the

ınformatıon

Identifier

Fell	Reconcination of Revenue per Addited Financial Statements with Revenue	hei k	.etui ii
1	Total revenue, gains, and other support per audited financial statements	1	2,297,831
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities	7	
c	Recoveries of prior year grants	7	
d	Other (Describe in Part XIII)	7	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,297,831
4	Amounts included on 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 Part XIII)	7	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,297,831
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	1,969,108
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses	7	
d	Other (Describe in Part XIII)	7	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,969,108
4	Amounts included on 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 Part XIII)	7	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,969,108

Return Reference

Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493049001224

OMB No 1545-0047

2012

Open to Public
Inspection

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization
East Arkansas Planning & Development District

T1-0401473

Identifier	Return Reference	Explanation
O01	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
O02	Governing documents etc available to public Part VI line 19	Public record documents are available at the District9s office upon request
O03	List of other fees for services expenses Part IX line 11g	Fees for services includes consulting fees of \$601,544 paid for the HUD Planning Grant activities and \$33,640 for Economic and Community Development activities, and \$139,263 for Waste Tire disposal fees
O04	General explanation attachment	Part III, Line 4d Revolving Loan Funds - Administer Economic Development Administration and USDA Intermediate Relending Program loan programs to assist qualified borrowers of second resort by providing business loans throughout the twelve county district