Form C	90
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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Depa	artment of	the Treasury	Do not ent	er social security numbers on this for	orm as it may b	e made	public.		Open to Public
		ue Service	Go to и	Inspection					
Α	For the	2023 calend	lar year, or tax year begi	nning	, 2023, a	and end	ling		, 20
в	Check if a	applicable:	C Name of organization N	AT'L RURAL ECON DEVELOPE	RS ASSOC			D Empl	oyer identification number
	Address of	change	Doing business as						42-1356900
	Name cha	ange	Number and street (or P.O. b	ox if mail is not delivered to street address)		Room/si	uite	E Telep	hone number
	Initial retu	urn	400 WEST WILS	ON BRIDGE RD			120		(614)221-1900
	Final retu	rn/terminated	City or town, state or province	e, country, and ZIP or foreign postal code				G Gross	s receipts
	Amended	l return	WORTHINGTON,	ОН 43085				\$	243,256
	Applicatio	on pending	F Name and address of princip	al officer:			H(a) Is this a g	group return	for subordinates? Yes X No
							H(b) Are all s	subordinate	es included? Yes No
1	Tax-exem	npt status:	501(c)(3) X 501(c) (6) (insert no.) 4947(a)(1) or	527		lf "No,"	attach a lis	t. See instructions
J	Website:	WWW	NREDA.ORG				H(c) Group e	exemption	number
к	Form of o	organization:	Corporation Trust X As	ssociation Other	L Year of format	ion: 19	89 M S	State of leg	al domicile: OH
Pa	art I	Summar	'y						
	1	Briefly descr	ibe the organization's mis	sion or most significant activities:	O PROVIDE E	DUCA	TION, AD	VOCAC	Y AND NETWORKING
		OPPORTUN	ITIES TO VARIOUS	RURAL ECONOMIC DEVELOPM	ENT ORGANIZ	ATION	IS.		
ce									
Activities & Governance									
ver	2	Check this b	ox if the organization	discontinued its operations or disposed	d of more than 25	5% of its	s net assets.		
ĝ	3		L 0	erning body (Part VI, line 1a)				3	18
లర	4			ers of the governing body (Part VI, line				4	18
ies	5			in calendar year 2023 (Part V, line 2a)				5	0
ivit								-	0
Act	6			f necessary)				6	•
	7a			Part VIII, column (C), line 12				7a	0
	b	Net unrelate	d business taxable incom	e from Form 990-T, Part I, line 11		• • • •		7b	0
							Prior Year		Current Year
	8		• •	e1h)					74,809
Ine	9	Program ser	vice revenue (Part VIII, lir	ne 2g)					166,700
Revenue	10	Investment in	ncome (Part VIII, column ((A), lines 3, 4, and 7d)					1,522
Re	11	Other revenu	ue (Part VIII, column (A), li	ines 5, 6d, 8c, 9c, 10c, and 11e)					225
	12	Total revenu	e - add lines 8 through 11	(must equal Part VIII, column (A), line	12)				243,256
	13	Grants and s	similar amounts paid (Part	IX, column (A), lines 1-3)					0
	14	Benefits paid	d to or for members (Part	IX, column (A), line 4)					0
	15	Salaries, oth	ner compensation, employe	e benefits (Part IX, column (A), lines 5	-10)				0
es	16a			column (A), line 11e)					0
cpenses			ising expenses (Part IX, co		0				-
Ř	17			ines 11a-11d, 11f-24e)					226,909
	18	•		st equal Part IX, column (A), line 25)					226,909
	19	•	,	18 from line 12					16,347
			- capeneoo. Oubirdot ille			Rea	inning of Curre	ant Year	End of Year
sor	au Ce 20	Total assets	(Part X line 16)			Deg		,148	314,652
sset	ere 20 120		(· · ·)						
Net Assets or	pun 21 22		or fund balances. Subtract					,763	33,920
	art II			line 21 from line 20 \ldots			204	,385	280,732
			Ire Block	urn, including accompanying schedules and stater	ments and to the hest	of my kno	wledge and hel	iof it is	
				fficer) is based on all information of which prepare			medge and bei	101, 11 13	
Ci/	in in	-	EY HOGAN						
Sig	-	Signature of offic	cer					Da	ie
He	re		EY HOGAN, EXECUT	IVE DIRECTOR					
		Type or print nar		1	1				
		Print/Type pre	eparer's name	Preparer's signature	Date		Check	if	PTIN
Ра	id	Wade St	een		05-02-20	24	self-em	ployed	P01340967
Pre	eparer	Firm's name	Steen &	Company			Firm's EIN		
Us	e Only	Firm's addres	s 222 E T	own St			Phone no.		
	-		Columbu	s OH 43215				614-	832-9399

	Columbus OH 43215	614-8
May the IRS	discuss this return with the preparer shown above? See instructions	

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Ра	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🗌
1	Briefly describe the organization's mission:		
	TO PROVIDE EDUCATION, ADVOCACY AND NETWORKING OPPORTUNITIES TO VARIOUS RURAL	ECONOMIC DE	/ELOPMENT
	ORGANIZATIONS.		
2	Did the organization undertake any significant program services during the year which were not listed on the		-
	prior Form 990 or 990-EZ?	🗌 Yes 👌	No
_	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		٦
	services?	🗌 Yes 💈	NO
	If "Yes," describe these changes on Schedule O.	-1 I	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of	-	
	the total expenses, and revenue, if any, for each program service reported.	ners,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 95,695 including grants of \$) (Revenue	\$)
	CONFERENCES AND SEMINARS THAT PROMOTE THE EXCHANGING OF IDEAS AND INFORMATION		BERS.
	EDUCATIONAL OPPORTUNITIES FOR ITS MEMBERS, AND FURTHERING THE MOVEMENT OF REV		
	AMERICA THROUGH ECONOMIC ENHANCEMENT.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4.	(Code:) (Expenses \$ including grants of \$) (Revenue	\$	······
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	Φ)
4d	Other program services (Describe on Schedule O.)		
-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 95,695		
EEA		Form	990 (2023)

Pa	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		x
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		x
3				
-	candidates for public office? If "Yes," complete Schedule C, Part L.	3		x
4				
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		
5		+		
3	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III.	5		v
6		5		x
6				
	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		x
7				
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8				
	complete Schedule D, Part III	8		х
9				
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
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.			
i	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		x
I	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		x
	c 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		x
	d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
	e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			x
	 f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part.X	11f		x
12a				
120	Schedule D, Parts XI and XII	12a		v
	 b Was the organization included in consolidated, independent audited financial statements for the tax year? If 	· · · · 12a		x
		106		
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			X
13				x
14a		14a		x
Ľ	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	<u>14b</u>		x
15				
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16				
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and JV	16		x
17			1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		1	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part.II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		x
20 a	a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		х
ł	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this retum?	20b		
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	1	x
			~ 000	(2022)

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
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		x
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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
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		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
07	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part.II.</i>	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		v
28	Was the organization a party to a business transaction with one of the following parties (See the Schedule	21		x
20	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
2	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Yes," complete Schedule L, Part IV.	28a		v
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a		x x
c c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		~
C	"Yes," complete Schedule L, Part IV.	28c		v
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	200		x x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	25		
50	conservation contributions? If "Yes," complete Schedule M.	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part J	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	01		
02	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part.VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	x	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u>.</u>	
	· · ·		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	x	
				(0000)

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Par				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	x	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	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		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1			
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 requ		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
•	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:		30		
	Initiation fees and capital contributions included on Part VIII, line 12	1			
a h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		-		
b			-		
11	Section 501(c)(12) organizations. Enter:	I			
a L	Gross income from members or shareholders		-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources				
40-	against amounts due or received from them.)		40-		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1	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?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.	1			
b	Enter the amount of reserves the organization is required to maintain by the states in which				
	the organization is licensed to issue qualified health plans		-		
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		x
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities				
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?		17		
	If "Yes," complete Form 6069.				

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Pa	art VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See ir	nstruc	ctions
_	Check if Schedule O contains a response or note to any line in this Part VI	<u>•••</u>		х
Se	ction A. Governing Body and Management			
4-	Estable contact for the marker of the contact had at the cost of the terms		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 on 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		x
3	Did the organization delegate control over management duties customarily performed by or under the direct	-		
•	supervision of officers, directors, trustees, or key employees to a management company or other person?	3	х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6	х	
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	x	
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		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	
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 on Schedule Q	9		х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	104		
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a հ	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	x	
b 12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	v	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	x x	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		Λ	
Ŭ	describe on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	x	
14	Did the organization have a written document retention and destruction policy?	14	x	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		x
b	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
-	ction C. Disclosure			
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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
20	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records. ACCENT ON MANAGEMENT (614)221-1900, 400 WEST WILSON BRIDGE RD, WORTHINGTON, OH 4308	25		
	ACCENT ON MANAGEMENT (UTT/221-1300, 400 WEBI WILBON DRIDGE RD, WORIGINGION, OH 4300	ر ر		

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Part VII	Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and										
	Independent Contractors										
	Check if Schedule O contains a response or note to	any line in this Part VII									
Section A.	Officers, Directors, Trustees, Key Employee	s, and Highest Comp	ensated Employees								
1a Complete	this table for all persons required to be listed. Report compe	nsation for the calendar yea	ar ending with or within the								
organization's	tax year.										
 List all of 	the organization's current officers, directors, trustees (whe	ther individuals or organizati	ons), regardless of amount of								
compensation.	Enter -0- in columns (D), (E), and (F) if no compensation was	s paid.									

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

· List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

x Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

	icu organizat		проп	Juic	Ju ai	iy cun	CIII		ilusice.	
				(C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					an one both ar		Reportable	Reportable	Estimated amount
	hours					(trustee)		compensation	compensation	of other
	per week							from the	from related	compensation
	(list any	or In	n	Q	Ke	en H	F	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for	divid	stitut	Officer	y er	nplo	Former	1099-NEC)	1099-NEC)	related organizations
	related organizations	ctor	tiona		Key employee	yee				-
	below	Individual trustee or director	Institutional trustee		yee	mpe				
	dotted line)	ee	stee			Highest compensated employee				
						ğ				
(1) TRACEY HOGAN	8.00									
EXECUTIVE DIRECTOR		х						0	0	0
(2)KARLA_ORGANIST	1.00									
SECRETARY-TREASURER				х				0	0	0
(3) DAN BOYSEL	1.00									
PAST PRESIDENT				х				0	0	0
(4) DAVID_CLEVELAND	1.00									
PRESIDENT				х				0	0	0
(5) BRITTANY_DICKEY	1.00									
1st VICE PRESIDENT				х				0	0	0
(6)LISA_HURLEY	1.00									
2nd VICE PRESIDENT				х				0	0	0
_(7)										
(<u>8</u>)										
_(9)										
<u>(10)</u>										
				_						
(11)										
(12)										
<u>(13)</u>										
(14)										
										Farme 200 (2000)

	90 (2023) NAT'L RURAL ECON I			ASS							2-13569			age 8
Part	VII Section A. Officers, Directors, T	rustees,	Key E	Emp			s, an	ld F	Highest Comp	ensated		/ees	(cont	inued
	(A) Name and title		box,	unles	Po: eck m ss pei	rson is	han one s both ar /trustee)		(D) Reportable compensation from the	(E) Reportable compensatio from related	able ation ated	con	(F) ated am of other opensati	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizatior 1099-MI 1099-NE	ISC/	orgar	om the nization organiz	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23) (24)														
(24)	·													
(25)	0													
1b c	Subtotal		•••	· ·	••• •••	••• •••	· · ·		0					
2	Total (add lines 1b and 1c) Total number of individuals (including but no reportable compensation from the organizat	ot limited to	those	•• e lis	ted	 abc	ve) w	/ho	•	nan \$100,	,000 of			0
3	Did the organization list any former officer, direct		kev er	nlo		or h	iahest	cor	mensated				Yes	No
	employee on line 1a? If "Yes," complete Schedule	e J for such	indivia	lual	•••		• • •					3		x
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater that	•	•					•						
5	individual Did any person listed on line 1a receive or accrue of accr										••••	4		x
0	for services rendered to the organization? If "Yes	," complete	Sched	lule 、	J for	suc	h pers	on				5		х
<u>Secti</u>	on B. Independent Contractors Complete this table for your five highest con	nnensated	linder	enc	lent	cor	otracto	ors	that received mo	re than \$	100 000	of		
	compensation from the organization. Report		-										tax y	ear.
	(A) Name and business address	6							(B) Description of service	es	с	(C) compens	ation	
2	Total number of independent contractors (in received more than \$100,000 of compensat	-					ose li	steo	d above) who					

Form 99	90 (20	23) NAT'L	RU	RAL ECO	N DE	VELOPERS ASS	OC		42-13569	000 Page 9
Part	VIII	Statement of Rev	/enu	le						
		Check if Schedule C) cor	ntains a re	spons	e or note to any li	ne in this Part V	/		[
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns .			1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b	74,809				
	c	Fundraising events			1c					
	d	Related organizations .			1d					
	e	Government grants (cont	ributi	ons)	1e					
imii O	f	All other contributions, git	fts, gr	rants,						
utior er S		and similar amounts not i			1f					
Grib	g									
Son		lines 1a-1f								
	h	Total. Add lines 1a-1f	••				74,809			
						Business Code				
ë		SPONSORSHIPS				900099	83,900	83,900		
ه يُز		ANNUAL CONFERENCE				900099	82,800	82,800		
Program Service Revenue	C d									-
Rev	d									
	e f	All other program service	rovor							
<u>а</u>		Total. Add lines 2a-2f .					166,700			
							1007/00			
	3	Investment income (including dividends, interest, a other similar amounts)				1,522	1,522			
	4	Income from investment of			F	• -				
	5	Royalties		•	•	F				
		·		(i) Rea		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income or (loss)	6c							
	d	Net rental income or (loss)							
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets								
		other than inventory	7a							
	b	Less: cost or other basis								
nue		and sales expenses	7b							
Iəvei		Gain or (loss)								
Other Revenue		Net gain or (loss)			•••					
the	oa	Gross income from fundra events (not including \$	using							
0		of contributions reported of	n lin	<u></u>	-					
		1c). See Part IV, line 18			8a					
	Ь	Less: direct expenses .								
		Net income or (loss) from								
		Gross income from gamin		0						
		activities. See Part IV, line	-		9a	ı				
	b	Less: direct expenses								
	c	Net income or (loss) from	gami	ng activities	·					
	10a	Gross sales of inventory,	less							
		returns and allowances .			10a	a				
		Less: cost of goods sold								
	C	Net income or (loss) from	sales	s of inventor	у					
						Business Code				
ŝ		OTHER MISC REVENU				900099	225	225		
anc	b									
cell teve	C									
Miscellanous Revenue		All other revenue				L	0.05			
		Total. Add lines 11a-11d Total revenue. See instru					225 243,256	168,447	0	0
	14	i Juai revenue. See molit	JUIJU				443,430	100,44/	0	0

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Part IX	Statement of	of Functi	onal Ex	pense	es	
Form 990	(2023)	NAT'L	RURAL	ECON	DEVELOPERS	ASSOC

200	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a response or		B (1)/		
Do r	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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				
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a		87,900		87,900	
b	Legal				
с		11,007		11,007	
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				
40	(A), amount, list line 11g expenses on Schedule O.)				
12 12	Advertising and promotion Office expenses	01 011		01 011	
13 14	Information technology	21,211		21,211	
14 15	Royalties				
15 16					
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	95,695	95,695		
20		95,095	35,095		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23		3,134		3,134	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	BOARD EXPENSES	2,289		2,289	
b	MARKETING	5,673		5,673	
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	226,909	95,695	131,214	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)				

	990 (20	,	4:	2-1356	900 Page 11
Par	t X	Balance Sheet			
	_	Check if Schedule O contains a response or note to any line in this Part X		• • • •	
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	109,374	1	132,908
	2	Savings and temporary cash investments	158,438	2	159,928
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) \ldots		6	
6	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	1,336	9	21,816
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a	_		
	b	Less: accumulated depreciation		10c	
	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 33)	269,148	16	314,652
	17	Accounts payable and accrued expenses	3,578	17	
	18	Grants payable		18	
	19	Deferred revenue	1,185	19	33,920
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
llitie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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 D		25	
	26	Total liabilities. Add lines 17 through 25	4,763	26	33,920
		Organizations that follow FASB ASC 958, check here			
ŝ		and complete lines 27, 28, 32, and 33.			
nce	27	Net assets without donor restrictions		27	
ala	28	Net assets with donor restrictions		28	
а Б		Organizations that do not follow FASB ASC 958, check here			
Fun		and complete lines 29 through 33.			
o	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds	264,385	31	280,732
Net Assets or Fund Balances	32	Total net assets or fund balances	264,385	32	280,732
	33	Total liabilities and net assets/fund balances	269,148	33	314,652
EEA					Form 990 (2023)

Form	990 (2023) NAT'L RURAL ECON DEVELOPERS ASSOC	42-135690	0	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		243,	,256
2	Total expenses (must equal Part IX, column (A), line 25)				,909
3	3 Revenue less expenses. Subtract line 2 from line 1				,347
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		264,	,385
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 on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		280,	,732
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u> .	3b		
EEA			Forn	n 990	(2023)

SCHEDULE O (Form 990)

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 2023 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

NAT'L RURAL ECON DEVELOPERS ASSOC

Employer identification number 42–1356900

01. Management duties delegation (Part VI, line 3)

A MANAGEMENT COMPANY IS HIRED BY THE BOARD TO MANAGE THE DAILY OPERATIONS OF THE

ORGANIZATION.

02. Members or stockholder classes and rights (Part VI, line 6)

DEFINITION OF MEMBERSHIP:

REGULAR MEMBERSHIP: ANY PERSON EMPLOYED BY AN ORGANIZATION DEFINED AS A LOCAL OR REGIONAL

NON-FOR-PROFIT ECONOMIC DEVELOPMENT ORGANIZATION, RURAL UTILITY AS DEFINED, ASSOCIATION,

OR GOVERNMENT AGENCY, EDUCATIONAL INSTITUTIONS, AND ECONOMIC DEVELOPMENT RELATED VENDORS

SUCH AS CONSULTANTS, DEVELOPMENT COMPANIES, REAL ESTATE SERVICES, FINANCIAL INSTITUTIONS,

LAW FIRMS, ACCOUNTING FIRMS AND SITE CONSULTANTS, CONSTRUCTION COMPANIES, REAL ESTATE

DEVELOPMENT, AND RETIRED EMPLOYEES OF SAID ORGANIZATIONS. RURAL UTILITIES SHALL BE DEFINED

AS ORGANIZATIONS THAT BORROW MONIES OR ARE ELIGIBLE TO BORROW MONIES FROM (1) RURAL

UTILITY SERVICE, (2) NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION, (3) COBANK

OR (4) RURAL WATER DISTRICTS. NAME OF THE PERSON AS IDENTIFIED ON THE MEMBERSHIP

APPLICATION.

RURAL UTILITIES SHALL BE DEFINED AS (1) COOPERATIVE RURAL UTILITIES, (2) RURAL LOCAL

EXCHANGE CARRIERS AS DEFINED IN THE U.S. TELECOMMUNICATIONS ACT OF 1996 OR (3)

ORGANIZATIONS THAT BORROW MONIES OR ARE ELIGIBLE TO BORROW MONIES FROM THE (1A) RURAL

UTILITIES SERVICE, (2B) NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION, OR (3C)

COBANK. THE MEMBERSHIP SHALL BE IN THE NAME OF THE PERSON AS IDENTIFIED ON THE MEMBERSHIP

APPLICATION. - AFFILIATE LIMITED MEMBER: ANY REGIONAL ORGANIZATION THAT CONSISTS OF

SEPARATE DEVELOPMENT ORGANIZATIONS SUCH AS REGIONAL ECONOMIC DEVELOPMENT GROUPS, REGIONAL

MARKETING GROUPS, REGIONAL CORRIDORS, REGIONAL UTILITY GROUPS AND COUNCILS OF

GOVERNMENT.

Schedule O (Form 990) 2023 Name of the organization	Employer identification number
NAT'L RURAL ECON DEVELOPERS ASSOC	42-1356900
ATEGORIES OF MEMBERSHIP	
NDIVIDUAL MEMBER: THOSE INDIVIDUALS WHO QUALIFY FOR MEMBERSHI	P AS DEFINED IN SECTION 1.
MAY QUALIFY TO BE INDIVIDUAL MEMBERS AND SHALL BE ENTITLED TO	ALL THE RIGHTS AND
PRIVILEGES OF MEMBERSHIP, INCLUDING, BUT NOT LIMITED TO, VOTIN	G, THE RIGHT TO VOTE AND THE
RIGHT TO HOLD OFFICE. HONORARY MEMBER: A PAST PRESIDENT OR FOU	NDER OF THE ASSOCIATION.
UES AND ANNUAL CONFERENCE REGISTRATIONS ARE COMPLIMENTARY FOR	HONORARY MEMBERS. HONORARY
MEMBERS SHALL BE SELECTED AND APPROVED BY THE BOARD OF DIRECTO	RS AS NEEDED. STUDENT
MEMBER: AN INDIVIDUAL ENROLLED AT A COLLEGE, UNIVERSITY, COMMU	NITY COLLEGE OR OTHER
DUCATIONAL INSTITUTION FULL-TIME (12+ CREDIT HOURS) AT THE UN	DERGRADUATE (OR GRADUATE
LEVEL) IN AN ECONOMIC DEVELOPMENT OR RELATED DEGREE PROGRAM. Q	UALIFY TO BE AN AFFILIATE
IMITED MEMBER IN ONE OF THE TWO SUB-CATEGORIES:	
. AN ORGANIZATION MADE UP OF PRIMARILY LOCAL, COMMUNITY-BASED	ECONOMIC DEVELOPERS AND/OR
OVERNMENT OFFICIALS.	
2. AN ORGANIZATION MADE UP OF PRIMARILY STAFF AND/OR DIRECTORS	OF RURAL UTILITIES. VOTING
MEMBERS: INDIVIDUAL MEMBERS ARE ELIGIBLE TO VOTE ON ACTIONS OF	THE ASSOCIATION.
YOTING MEMBERS: INDIVIDUAL MEMBERS ARE ELIGIBLE TO VOTE ON ACT	IONS OF THE ASSOCIATION.
IONNVOTING MEMBERS: HONORARY, STUDENT, AND AFFILIATE LIMITED M	EMBERS ARE NOT ELIGIBLE TO
OTE ON THE ACTIONS OF THE ASSOCIATION AND ARE NOT ELIGIBLE FO	R ELECTION TO ANY ELECTED
OSITION TO THE BOARD OF DIRECTORS.	
3. Member election for additional members (Part VI, line 7a)	
DIRECTORS ARE ELECTED AT-LARGE BY THE MEMEBRSHIP	

04. Form 990 governing body review (Part VI, line 11)

THE EXECTIVE BOARD REVIEWS THE FORM 990 BEFORE FILING.

EEA

05. Conflict of interest policy compliance (Part VI, line 12c)

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
NAT'L RURAL ECON DEVELOPERS ASSOC	42-1356900
06. Other officer or key employee compensation (Part VI, line 15b	
BOARD MEMBERS ARE NOT COMPENSATED FOR THEIR SERVICE.	
07. Governing documents, etc, available to public (Part VI, line 19)	
NUL DOGUNENTIC ADE AVAILABLE VIDON DECUECT	
ALL DOCUMENTS ARE AVAIABLE UPON REQUEST.	

990	Overflow Statement (This page is not filed with the return. It is for your records only.)	2023	Page 1
Name(s) as shown on return	ECON DEVELOPERS ASSOC	FEIN	42-1356900
			11 1000000
	CONFERENCES, CONVENTIONS AND MEETINGS		
			Amount
ANNUAL CONF	'ERENCE	\$	92,527
MEMBER SERV	Total:	\$	<u>3,168</u> 95,695