Form 99()
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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

Unternal Service Go to www.lrs.gov/PormS90 for instructions and the latest information. Inspection Addites of applicable: Addites of applicable: Addites of applicable: Description: Addites of applicable: Permittable: Description: Addites of applicable: Description: Description: Description: Description: Description: Description: Description: Description:	Department of the Treasury						•	numbers on this form	•		•		Open t	o Public		
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Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	ets	<u>1</u> 2	1 0	Total assets	(Part X, lin	e16)					412	2,242		269,148		
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	Ass	ື່ອ 2	1 1	Total liabilitie	es (Part X,	line 26)					179	,397		4,763		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	Net	<u>5</u> 2	<u>2</u> N	Vet assets o	or fund bala	nces. Subtract	line 21 from line 2				232	2,845		264,385		
true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	Pa	art I		Signatu	re Block	(
										t of my kno	owledge and be	lief, it is				
	true	, corre	ect, an	la complete. Del	claration of pre	parer (other than on	ncer) is based on all inic	ormation of which preparer has	any knowledge.							
TRACEY HOGAN				TRAC	EY HOGA	N										
Sign Signature of officer Date	Sig	jn	S	Signature of offic	cer							D	late			
Here TRACEY HOGAN, EXECUTIVE DIRECTOR	Не	re		TRAC	EY HOGA	N, EXECUTI	IVE DIRECTOR									
Type or print name and title			Т													
Print/Type preparer's name Preparer's signature Date Check if PTIN				Print/Type pre	eparer's name		Preparer's signature		Date		Check	if	PTIN			
Paid Wade Steen 10-18-2023 self-employed P01340967	Pa	id		Wade St	een				10-18-20)23				967		
Preparer Firm's name Steen & Company Firm's EIN			rer		-	Steen &	Company									

222 E Town St

Phone no.

Form	990 (2022) NAT'L RURAL ECON DEVELOPERS ASSOC	42-1356900	Page 2
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 DEV	/ELOPMENI
	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
		🗌 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, it any, for each program service reported.		
4a	(Code:) (Expenses \$ 102,158 including grants of \$) (Revenue	\$)
ти	CONFERENCES AND SEMINARS THAT PROMOTE THE EXCHANGING OF IDEAS AND INFORMATION		BERS
	EDUCATIONAL OPPORTUNITIES FOR ITS MEMBERS, AND FURTHERING THE MOVEMENT OF RE		
	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 102,158		
EEA		Form	990 (2022)

	n 990 (2022) NAT'L RURAL ECON DEVELOPERS ASSOC 42-1356	900	P	age 3
Pa	Int 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		х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		х
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
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		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.			
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		х
k	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		х
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		х
C	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		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b				
	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	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		х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
k	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this retum?	20b		L
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		х
		For	~ 000	(2022)

Form 990 (2022)

Form	1 990 (2022) NAT'L RURAL ECON DEVELOPERS ASSOC 42-13	56900	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)		1	
			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	24-		
	through 24d and complete Schedule K. If "No," go to line 25a			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	. 24c		
d	to defease any tax-exempt bonds?			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	. 240		
zJa	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	. <u>2</u> Ja		
D.	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%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	. 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		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	. 28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	. 28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M			х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	. 31		х
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		х
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? If "Yes," complete Schedule R, Part I	. 33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
0 -	or IV, and Part V, line 1			x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. <u>35</u> a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	0.51		
20	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	. 36		
37	related organization? <i>If "Yes," complete Schedule R, Part V, line</i> 2	. 30		
57	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	. 37		~
	19? Note: All Form 990 filers are required to complete Schedule O	. 38	x	
Par		. 00	- 21	
n ai	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	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		
			~ 000	(0000)

	990 (2022) NAT'L RURAL ECON DEVELOPERS ASSOC	42-13569	00		Page 5
Par		1		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		
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		
C	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 requi		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:		55		
	Initiation fees and capital contributions included on Part VIII, line 12	1			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		-		
11	Section 501(c)(12) organizations. Enter:		1		
		L			
a h			-		
b	Gross income from other sources (Do not net amounts due or paid to other sources				
100	against amounts due or received from them.)		120		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40-		
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.	L			
b	Enter the amount of reserves the organization is required to maintain by the states in which				
	the organization is licensed to issue qualified health plans		-		
C	Enter the amount of reserves on hand				
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 Q	••••	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		x
	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 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.				

Forr	m 990 (2022) NAT'L RURAL ECON DEVELOPERS ASSOC 42-13	56900	F	Page 6
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "No)″	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instru			_
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		х
See	ction A. Governing Body and Management		1	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	18		
	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		18		
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?		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			x
6	Did the organization have members or stockholders?	. 6	x	
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,	76		
•	stockholders, or persons other than the governing body?	. 7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following:	80	v	
a h	The governing body?	. 8a . 8b	X	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	. 00	x	
3	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	. 9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	. 3		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	. 10a	1.00	x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	. 10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		x	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	. 12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .		x	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	. 12c	x	
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			x
b	Other officers or key employees of the organization	. 15b		x
	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?	. <u>16a</u>		x
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			
<u> </u>	organization's exempt status with respect to such arrangements?	. 16b		
	tion C. Disclosure			
17 10	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 Image: Another's website Image: Another's website Image: Another's website Image: Another's website Image: Another (and if an how) the exercising tension mode its generating desuments conflict of intersect policy.			
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 W. WILSON BRIDGE RD, WORTHINGTON, OH 430	0 E		
	ACCENT ON MANAGEMENT (UIT/661-1900, 400 W. WILLOUN DRIDGE RD, WORIGINGION, OH 430	55		

Form 990 (202	2) NAT'L RURAL ECON DEVELOPERS	ASSOC	42-1356900 Page 7							
Part VII										
	Independent Contractors									
	Check if Schedule O contains a response or note to	any line in this Part VII	<u> </u>							
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
1a Complete	his table for all persons required to be listed. Report compe	ensation for the calendar yea	ar ending with or within the							
organization's	ax year.									
 List all of 	the organization's current officers, directors, trustees (whe	ther individuals or organizat	ions), regardless of amount of							
compensation.	Enter -0- in columns (D), (E), and (F) if no compensation wa	ıs 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.

	lieu organizat		преп			ny cun	en		1103166.	
					(C)					
(A)	(B)	(ala :-	at ak -		sition			(D)	(E)	(F)
Name and title	Average					nan one s both an		Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or o	Ins	Officer	Key	em Hig	For	1099-MISC/	1099-MISC/	organization and
	related	lirec	ituti	cer	/ em	hest	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	ee on				
	below	uste	trus		ee	Ipen				
	dotted line)	σ	tee			Highest compensated employee				
						٩				
(1) TRACEY HOGAN	5.00									
EXECUTIVE DIRECTOR		х						0	0	0
(2) GARY_CLARK	1.00									
PAST PRESIDENT				х				0	0	0
(3) DAN BOYSEL	1.00									
PRESIDENT				х				0	0	0
(4) DAVID CLEVELAND	1.00									
1st VICE PRESIDENT				х				0	0	0
(5) BRITTANY_DICKEY	1.00									
2nd VICE PRESIDENT				х				0	0	0
(6) LISA_HURLEY	1.00									
SECRETARY-TREASURER				х				0	0	0
(7)										
(8)										
<u>(9)</u>										
<u>(10)</u>										
<u>(11)</u>										
(12)										
(13)										
(14)										
										Form 000 (2022)
										E 000 (0000)

	90 (2022) NAT'L RURAL ECON			ASS							2-1356			age 8
Part	VII Section A. Officers, Directors, T	rustees,	Key E	Emp			s, ar	nd I	Highest Comp	ensated	I Emplo	oyees	(cont	inued,
	(A) Name and title	(B) Average hours per week	box,	, unles	Pos eck m ss per	son is	han one s both a /trustee)	n	(D) Reportable compensation from the	(E) Reportable compensation from related	able ation ated	(F) Estimated a of oth compens		
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)		from the organization related organi		
(15)														
(16)														
<u>(17)</u>														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c d	Subtotal			•••	•••	•••	· · ·	•	0		0			0
2	Total number of individuals (including but not limit reportable compensation from the organization								_	of				c
3	Did the organization list any former officer, direc employee on line 1a? <i>If "Yes," complete Schedu</i>						-					3	Yes	No X
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater th <i>individual</i>	an \$150,00	0? <i>If</i> "Y	′es,"	' con	nplet	te Sch	edu	lle J for such			4		x
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	compensati	on from	n any	unr	elate	ed org	aniz	ation or individual			5		x
-	on B. Independent Contractors	to d in don on	dontoo	ntro	otoro	the	+ =====		more then \$100.00					
1	Complete this table for your five highest compensation from the organization. Report comp										ax year.			
	(A) Name and business addres								(B) Description of servic			(C) Compens	ation	
												· · ·		
2	Total number of independent contractors (includin	g but not lin	nited to	thos	se lis	ted a	above) wh	10					
	received more than \$100,000 of compensation fro	-						-						

Form 99	90 (20	022) NAT'L	RU	RAL ECON	N DEV	VELOPERS ASS	OC		42-13569	00 Page 9
Part '	VIII	Statement of Rev	/enu	ie						
		Check if Schedule O co	ontain	is a respons	se or n	ote to any line in this	Part VIII			
				·			(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					
	b				1b	90,950				
ants ints	c			1c						
อีอี	d	Related organizations .			1d					
iifts Ir Al	е	Government grants (contr	ributio	ons)	1e					
s, G mila	f	All other contributions, gif	ts, gr	ants,						
rsiio		and similar amounts not in	nclud	ed above	1f					
ibut	g	Noncash contributions inc	clude	d in						
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f			1g	\$				
ыÇ	h	Total. Add lines 1a-1f					90,950			
						Business Code				
-	2a	PROGRAMS AND SERV	/ICE	S		900099	164,390	164,390		
/ice	b									
Ser	c									
Jram Serv Revenue	d									
gra Re	е									
Program Service Revenue	f	All other program service	rever	nue	••					
	g	Total. Add lines 2a-2f .					164,390			
	3	Investment income (includi	ing di	vidends, inte	erest, a	and				
		other similar amounts) .								
	4	Income from investment of	tax-e	exempt bond	d proc	eeds				
	5	Royalties								
				(i) Rea	ıl	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	с	Rental income or (loss)	6c							
	d	Net rental income or (loss)) .							
	7a	Gross amount from		(i) Securiti	ies	(ii) Other				
		sales of assets								
		other than inventory	7a							
	b	Less: cost or other basis								
е		and sales expenses	7b							
/en	c	Gain or (loss)	7c							
Rev	d	Net gain or (loss)			• <u>• •</u>					
Other Revenue	8a	Gross income from fundra	ising							
Ē		events (not including \$			_					
		of contributions reported o	on line	9						
		1c). See Part IV, line 18	•••		8a					
	b	Less: direct expenses .	•••		8b					
	С	Net income or (loss) from	fundr	aising even	ts					
	9a	Gross income from gaming	g							
		activities, See Part IV, line	19		9a					
	b	Less: direct expenses .	•••		9b					
	C	Net income or (loss) from	gami	ng activities	· · ·					
	10a	Gross sales of inventory, I	ess							
		returns and allowances .			10a					
		Less: cost of goods sold			10k					
	C	Net income or (loss) from	sales	of inventor	у					
						Business Code				
sn	11a	OTHER MISC REVENU	JES			900099	1,628	1,628		
ano	b									
sell{ evel	c									
Miscellanous Revenue		All other revenue								
2		Total. Add lines 11a-11d					1,628			
	12	Total revenue. See instru	uction	s			256,968	166,018	0	0

2022) NAT'L RURAL ECON DEVELOPERS ASSOC

Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must complete all o	columns. All other orga	nizations must comple	te column (A).	
	Check if Schedule O contains a response or note to	any line in this Part IX			[]
Doı	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, s	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					
11	Fees for services (nonemployees):				
a	Management	98,195		98,195	
b		507255		507255	
c	Accounting				
d					
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				
Э	(A) amount, list line 11g expenses on Schedule O.)	4,663		4,663	
12	Advertising and promotion	13,695		13,695	
13	Office expenses	5,462		5,462	
14	Information technology	5,402		5,402	
15	Royalties				
16					
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	91,559	91,559		
20		91,009	91,009		
20	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23		1,255		1,255	
24	Other expenses. Itemize expenses not covered	1,255		1,255	
24	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	10,599	10,599		
b		10,333	10,339		
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	225,428	102,158	123,270	0
26	Joint costs. Complete this line only if the	223,720	102,130	123,270	0
-	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				

following SOP 98-2 (ASC 958-720)

. . .

Form	990 (20	22) NAT'L RURAL ECON DEVELOPERS ASSOC	4:	2-135690	00 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	178,407	1	109,374
	2	Savings and temporary cash investments	157,777	2	158,438
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	75,350	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	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	708	9	1,336
	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)	412,242	16	269,148
	17	Accounts payable and accrued expenses	41,012	17	3,578
	18	Grants payable		18	
	19	Deferred revenue	138,385	19	1,185
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
iliti		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	179,397	26	4,763
		Organizations that follow FASB ASC 958, check here			
S	07	and complete lines 27, 28, 32, and 33.		07	
anc	27	Net assets without donor restrictions		27	
Bal	28	Net assets with donor restrictions		28	
pu		Organizations that do not follow FASB ASC 958, check here			
Ŀ	20	and complete lines 29 through 33.		20	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund	000.047	30	064 00-
	31	Retained earnings, endowment, accumulated income, or other funds	232,845	31	264,385
Net	32	Total net assets or fund balances	232,845	32	264,385
	33	Total liabilities and net assets/fund balances	412,242	33	269,148

EEA

Form **990** (2022)

Form	990 (2022) 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		256,	,968	
2	Total expenses (must equal Part IX, column (A), line 25)	2		225,428		
3	Revenue less expenses. Subtract line 2 from line 1			31,540		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			232,845		
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		264,	,385	
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		x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
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	(2022)	

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. OMB No. 1545-0047

Open to Public

Inspection

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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.

Name of the organization	Employer identification number
NAT'L RURAL ECON DEVELOPERS ASSOC	42-1356900
CATEGORIES OF MEMBERSHIP	
NDIVIDUAL MEMBER: THOSE INDIVIDUALS WHO QUALIFY FOR MEMBERSHIP	AS DEFINED IN SECTION 1.
MAY QUALIFY TO BE INDIVIDUAL MEMBERS AND SHALL BE ENTITLED TO AI	L THE RIGHTS AND
PRIVILEGES OF MEMBERSHIP, INCLUDING, BUT NOT LIMITED TO, VOTING,	THE RIGHT TO VOTE AND THE
RIGHT TO HOLD OFFICE. HONORARY MEMBER: A PAST PRESIDENT OR FOUND	DER OF THE ASSOCIATION.
DUES AND ANNUAL CONFERENCE REGISTRATIONS ARE COMPLIMENTARY FOR E	IONORARY MEMBERS. HONORARY
MEMBERS SHALL BE SELECTED AND APPROVED BY THE BOARD OF DIRECTORS	AS NEEDED. STUDENT
MEMBER: AN INDIVIDUAL ENROLLED AT A COLLEGE, UNIVERSITY, COMMUNI	TY COLLEGE OR OTHER
EDUCATIONAL INSTITUTION FULL-TIME (12+ CREDIT HOURS) AT THE UNDE	RGRADUATE (OR GRADUATE
LEVEL) IN AN ECONOMIC DEVELOPMENT OR RELATED DEGREE PROGRAM. QUA	LIFY TO BE AN AFFILIATE
LIMITED MEMBER IN ONE OF THE TWO SUB-CATEGORIES:	
1. AN ORGANIZATION MADE UP OF PRIMARILY LOCAL, COMMUNITY-BASED E	CONOMIC DEVELOPERS AND/OR
GOVERNMENT OFFICIALS.	
2. AN ORGANIZATION MADE UP OF PRIMARILY STAFF AND/OR DIRECTORS C	OF RURAL UTILITIES. VOTING
MEMBERS: INDIVIDUAL MEMBERS ARE ELIGIBLE TO VOTE ON ACTIONS OF T	THE ASSOCIATION.
VOTING MEMBERS: INDIVIDUAL MEMBERS ARE ELIGIBLE TO VOTE ON ACTIO	ONS OF THE ASSOCIATION.
NONNVOTING MEMBERS: HONORARY, STUDENT, AND AFFILIATE LIMITED MEM	BERS ARE NOT ELIGIBLE TO
VOTE ON THE ACTIONS OF THE ASSOCIATION AND ARE NOT ELIGIBLE FOR	ELECTION TO ANY ELECTED
POSITION 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) 2022	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)	
N.L. DOGUNENTS ADD AVAILABLE UDON DEGUEST	
ALL DOCUMENTS ARE AVAIABLE UPON REQUEST.	

990	Overflow Statement (This page is not filed with the return. It is for your records only.)	2022	Page 1
Name(s) as shown on return	ECON DEVELOPERS ASSOC	FEIN Z	12-1356900
	CONFERENCES, CONVENTIONS AND MEETINGS		
			Amount
ANNUAL CONF	ERENCE	\$	80,414
MEMBER SERV	TOTAL:	\$	<u>11,145</u> 91,559