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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2009

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A F	or the	2009 calendar year, or tax year beginning JUL 1, 2009 and ending	JUN 30, 2010	
B c	heck if pplicable	Please use IRS	D Employer identifi	cation number
	Addres	ss label or COALETELD WANTED DEVELOPMENT FIND		
	Name change	type	⊣ 31-1	459992
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/suit		
	Termin ated			523-7466
	Ameno return		G Gross receipts \$	1,636,529.
	Application	DIG DIONE GAP, VA 24219	H(a) Is this a group re	eturn
	pendin	F Name and address of principal officer MR. JIM BALDWIN	for affiliates?	Yes X No
		P.O. BOX 548, LEBANON, VA 24266	H(b) Are all affiliates inc	cluded? Yes No
17	ax-exe	empt status. X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
		te: N/A	H(c) Group exemption	
			ar of formation: 1996 N	A State of legal domicile: VA
Ра		Summary		
ė	1	Briefly describe the organization's mission or most significant activities: TO EXPEDI		
an		PROVIDING GAP FINANCING, ENCOURAGE REGIONAL W		
Governance	•	Check this box I if the organization discontinued its operations or disposed of mo		
ő	1	Number of voting members of the governing body (Part VI, line 1a)	3	20
∞ర ∣	1	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
ties	1	Total number of employees (Part V, line 2a)	5	0
Activities	1	Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12	6	0.
¥		Net unrelated business taxable income from Form 990-T, line 34	7 <u>a</u> 7b	0.
_		Tect difficulted basiness taxable freeffic from 1 offi 350 1, life 54	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	268,052.	242,751.
Revenue		Program service revenue (Part VIII, line 2g)	200,0321	242,7310
e Ve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<323,425.	> <80,892.>
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		(00/052.)
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<55,373.	> 161,859.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	389,283.	5,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		,
တ္ဆ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
×	ь	Total fundraising expenses (Part IX, column (D), line 25)		
ш	17	Other expenses (Par HX, polumn (A), lines 11a-11d, 11f-24f)	117,837.	110,927.
	18	Total expenses. Add lines 13:17 (mus) equal Part IX, column (A), line 25)	507,120.	115,927.
- (0	19	Revende less expenses, Subtract line 18 from line 12	<562,493.	<u>45,932.</u>
Net Assets or Fund Balances			Beginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)	12,353,137.	13,537,749.
io A	21	Total liabilities (Part X-line; 26)	<u> 10,677,766.</u>	10,485,323.
15°	ırt II	Net assets or fund balances Subtract line 21 from line 20 Signature Block	1,675,371.	3,052,426.
1.0	11 (11	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements	s and to the best of my knowled	ge and helief it is true correct
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	je	
Sign		Son Bald	10/22	/10
Her	1	Signature of officer	Date	· <u> </u>
HICH		MR. JIM BALDWIN, PRESIDENT		
		Type or print name and title		
				er's identifying number
Paid		signature RICHARD L. LINNEN 10/11/10 e		structions)
	arer's	Firm's name (or BROWN RDWARDS & COMPANY I. I. D	EIN ▶	
Use	Only	self-employed), 1969 LEE HIGHWAY		
		address, and ZIP + 4 BRISTOL, VA 24201	Phone no. ▶ 2	76.466.5248
May	the IE	RS discuss this return with the preparer shown above? (see instructions)		V Vac Na

GIL

	990 (2009) COALFIELI rt III Statement of Program Servi	WATER DEVELOPMENT FUND	31-1459992 Page 2
		Ce Accomplishments	
1	Briefly describe the organization's mission.	TODMENM BY DROUTDING CA	D EINANGING ENGOIDAGE
		LOPMENT BY PROVIDING GA	
		DEVELOPMENT AND LOCAL I	
		PROBLEMS RELATED TO THE	QUANTITY AND QUALITY OF
	WATER.	 	
2		nt program services during the year which were	
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on So		——————————————————————————————————————
3	_	nake significant changes in how it conducts, any	y program services? Yes X No
	If "Yes," describe these changes on Schede	ıle O.	
4		s for each of the organization's three largest pro	
	Section 501(c)(3) and 501(c)(4) organization	s and section 4947(a)(1) trusts are required to re	eport the amount of grants and
	allocations to others, the total expenses, ar	d revenue, if any, for each program service repo	orted.
4a	(Code ⁻) (Expenses \$	5,000 • including grants of \$	5,000.)(Revenue \$
	TO FUND WATER PROJECTS	IN SOUTHWEST VIRGINIA,	FOCUSING ON AREAS WITHOUT
	ADEQUATE WATER SYSTEMS		
	-		
	<u></u>	<u> </u>	
4b	(Code ⁻) (Expenses \$	including grants of \$) (Revenue \$
			-·····
			······································
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$
			· · · · · · · · · · · · · · · · · · ·
		······································	
			-
4d	Other program services (Describe in Sched	ule O)	
	(Expenses \$ include	ng grants of \$) (Revenue	e \$)
<u>4e</u>	Total program service expenses ▶\$	5,000.	
02200	•		Form 990 (2009)

			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?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	1		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	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.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	<u> </u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	ł		
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1-		37
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	4.0%		v
15	and program service activities outside the United States? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	<u> </u>	X
15	or entity located outside the United States? If "Yes," complete Schedule F, Part II	45		, v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	 -	X
10	located outside the United States? If "Yes," complete Schedule F, Part III	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 ''-	ļ	A
	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	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
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			- 1	1

Form 990 (2009) COALFIELD WATER DEVELOPMENT FUND
Part IV Checklist of Required Schedules (continued)

	•	1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> X</u>
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		<u> X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		_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	ĺ		
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X_
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	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 I	31		X
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		_X_
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		_X
34	Was the organization related to any tax-exempt or taxable entity?	ł		
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35_		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		X
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	<u> </u>	<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2009)

Form 990 (2009) COALFIELD WATER DEVELOPMENT FUND
Part V Statements Regarding Other IRS Filings and Tax Compliance

18 Enter the number reported in Box 3 of Form 1098, Annual Summary and Transmittal of U.S. Information Returns. Enter 6-0 into applicable 13 0 12 0 12 12 0 12 0 12 12 0 12 0 12		•		Yes	No					
b. Enter the number of Forms W/3c included in line 1a. Enter 0-if not applicable Del the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, flee for the cleaned rays are indigently with organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2 is greater than 250, you may be required to e-life this return. (See an entructions) 3b. If I wes, "has if fled a Form 990-1 for this year? If "No." provide an explanation in Schedule 0 4 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. *No.* provide an explanation in Schedule 0 4 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. *P. CAYMAN I ISLANDS See the instructions for exceptions and filing requirements for Form TD F 902.1. Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Life Yes," to line 5 a of 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6 Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Life Yes," included the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 Life Was," indicate the number of Forms 8282 fled during the year 9 Life of the organization include with every solicitation an express statement that such contributions or a personal benefit contract? 9 Life the organization include with every solicitation in express provided? 10 Life the organization in entiti	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of								
c Dit the organization compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) without prize without stress of the reportable payments to vendors and reportable gaming (gambling) without prize without stress of the reportable payments to vendors and reportable gaming (gambling) without prize without prize with the reportable payments are stress. It is not called for the calendar year ending with or within the year covered by this return. If all east one is reported on large and a garder than 250, you may be required to e-fee this return, (see instructions). If the sum of lines is and 2 as ignerator than 250, you may be required to e-fee this return, (see instructions). If west, has it filed a Form 990-T for this year? If "No." provide an explanation in Schedule O and 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)? If "Yes," end if the remains of the foreign country, **P CAYMAN ISSANDS.** See the instructions for exceptions and filing requirements for Form TDF 90/22.1. Report of Foreign Bank and Financial Accounts. If "Yes," end if the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," end if the organization that it was or is a party to a prohibited tax shelter transaction? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit are yound the organization include with every solicitation an express statement that such contributions or grift were not tax deductible? If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," indicate the number of Forms 8282 filed during the year. If year, indicate the number of Forms 8282 filed during the year. If year, indicate the number of Forms 8282 filed during the year. If year, indicate the number of Forms 8282 filed during the year. If yea		U.S`Information Returns Enter -0- if not applicable	1		İ					
Cambling) wrinings to prize winners? 10 2 2 2 2 2 2 2 2 2	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			l					
22 Effect 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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife this return. (see instructions) 30 Ibid the organization have unnellated business pross income of \$1,000 or more during the year covered by this return? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife this return. (see instructions) 30 Ibid the organization have unnellated business pross income of \$1,000 or more during the year covered by this return? 31 If Yes, "has if filed a Form 990-T for this year? If "No.", provide an explanation in Schedule O 32 A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securines account, or other financial account) 32 B If Yes, "in the name of the foreign country. In the CATMAIN ISLANDIS 33 See the instructions for exceptions and filing requirements for form TDF 902-21, Report of Foreign Bank and Financial Accounts. 34 J X 35 If Yes, "in the first interest the seem of the foreign exceptions and filing requirements for Form TDF 902-21, Report of Foreign Bank and Financial Accounts. 34 J X 35 Was the organization aparty to a prohibited tax shelter transaction? 35 If Yes, "in the seem of the organization that it was or is a party to a prohibited tax shelter transaction? 36 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? 36 If Yes, "idd the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell are not tax deductible? 36 If Yes, "idd the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell are not	C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
First flower the calendary year ending with or within the year covered by this return 2a		(gambling) winnings to prize winners?	1c							
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b A any time during the calendary 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 accountly over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) b If "Yes," and there the name of the foreign country, in CAYMAN I SLANDS See the instructions for exceptions and filing requirements for Form TD F 90 22.1, Report of Foreign Bank and Financial Accounts. 5b Was the organization a party to a prohibited tax shelter transaction of any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction? 5d Dos the organization have annual gross receipts that are normally greater than \$100,000, and did the organization should with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c If "Yes," did the organization norcive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5c If If Yes, "did the organization notify the donor of the value of the goods or services provided? 5c If Yes, "did the organization notify the donor of the value of the goods or services provided? 5c If Yes, "did the organization notify the donor of the value of the goods or services provided? 5d If Yes, "did the organization shall may receive deductible contributions under section 170(c). 5d If Yes, "did the organization may have the provided that th	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1					
Note, if the sum of lines 1a and 2 as greater than 250, you may be required to e-file this return. (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return			l					
3a X b the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X b 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)? b the organization and 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)? b the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax sheller transaction at any time during the tax year? 5b Was the organization aparty to a prohibited tax sheller transaction? 6c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 6d 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? 6d The organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions under section 170(e). 6d 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? 7 Organizations that may receive deductible contributions under section 170(e). 6d The organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to tile form \$282? 7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7 Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required? 7 Organization sell, exc	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_							
b If "Yes," has it flied a Form 990-T for this year? If *Yes," provide an explanation in Schedule O 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)? b If "Yes," enter the name of the foreign country, ▶ CAYMAN ISLANDS See the instructions for exceptions and filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts. See the instructions for exceptions and filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts. See Was the organization a party to a prohibited tax sheller transaction? b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? b Vers, to line 5 a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? c If "Yes," to line 5 a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? b Vers, to line 5 a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? c If "Yes," to line 5 a or 5b, did 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? b If "Yes," to line 5 a deductible? To organization that may receive deductible contributions under section 170(c). b If "Yes," indicate the number of Forms 8282 filed during the year b If "Yes," indicate the number of Forms 8282 filed during the year benefit contract? b Did the organization of undiffed intellectual property, did the organization file a Form 1086 C as required? The For contributions of cars, boats, arplanes, and other vehicles, did the organization, have excess business holdings at any time during the year, and other vehicles, did the organization, have excess business holdings at any time during the ye		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			l					
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		12a							
			Form	990 (2009)					

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

<u>Sec</u>	tion A. Governing Body and Management							
	•	1	ı		Yes	No		
1a	Enter the number of voting members of the governing body	1a		20	1			
b	Enter the number of voting members that are independent	1b	<u> </u>	20				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other					
	officer, director, trustee, or key employee?			2	ļ	_X_		
3	Did the organization delegate control over management duties customarily performed by or under the	ie dire	ct supervision)				
	of officers, directors or trustees, or key employees to a management company or other person?			3_	X			
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		<u>X</u>		
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		5		X		
6	Does the organization have members or stockholders?			6		X		
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the					
	governing body?			7a	<u> </u>	<u>X</u>		
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		<u>X</u>		
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dunn	g the year					
	by the following:							
а	The governing body?			8a	X			
b	Each committee with authority to act on behalf of the governing body?			8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the		1			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	levenu	ie Code.)		r			
					Yes	No		
	Does the organization have local chapters, branches, or affiliates?			10a	ļ	X		
þ	If "Yes," does the organization have written policies and procedures governing the activities of such	chap	ters, affiliates,					
	and branches to ensure their operations are consistent with those of the organization?			10b	 	<u> </u>		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	iling tl	ne form?	11	X	<u> </u>		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				x			
	Does the organization have a written conflict of interest policy? If "No," go to line 13							
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise							
	to conflicts?			12b	X	<u> </u>		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	' describe		l			
	ın Schedule O how this is done			12c	X	<u> </u>		
13	Does the organization have a written whistleblower policy?			13	X			
14	Does the organization have a written document retention and destruction policy?			14_	X	<u> </u>		
15	Did the process for determining compensation of the following persons include a review and approve	al by	ndependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,			1			
	The organization's CEO, Executive Director, or top management official			<u>15a</u>	-	X		
þ	Other officers or key employees of the organization			15b	ļ	X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a					
	taxable entity during the year?			<u>16a</u>	├	X		
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-			on				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	janiza	tion's					
	exempt status with respect to such arrangements?			<u>. 16b</u>				
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed VA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	ı (501	(c)(3)s only) a	vailable for				
public inspection. Indicate how you make these available. Check all that apply.								
Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conflic	t of interest p	olicy, and fin	ancial			
	statements available to the public.		,					
20	State the name, physical address, and telephone number of the person who possesses the books a	and re	cords of the o	rganization.	_			
	SUZIE CRADIC - 276-523-2400	1.0						
	3441 MOUNTAIN EMPIRE ROAD, BIG STONE GAP, VA 2423	LY						

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

Check this box if the organization did not co	ompensate an	y cu	rren	t off	icer	, dire	cto	r, or trustee.		_
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average			Posi	tion	1		Reportable	Reportable	Estimated
	hours	(ct	neck	allt	hat	арр	y)	compensation	compensation	amount of
	per	ctor						from	from related	other
	week	r dire				B		the organization	organizations (W-2/1099-MISC)	compensation from the
		stee o	ruste			Suac		(W-2/1099-MISC)	(***271099****130)	organization
		sal tru	onal		ploye	E 60 H		(,		and related
		ndividual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Рог тег			organizations
MD DANDY ALDEDE		=	=	0	_	Ξ 4	<u></u>			
MR. RANDY ALBERT BOARD MEMBER		x						0.	0.	0
MS. BARBARA ALTIZER		^	-			\vdash		U •	0.	0.
BOARD MEMBER		x						0.	0.	0.
MR. JIM BALDWIN		Λ	├─			-				<u>U•</u>
PRESIDENT		$ \mathbf{x} $		$ \mathbf{x} $				0.	0.	0.
MR. HARRY CHILDRESS			├─	22		\vdash		0.		
BOARD MEMBER		х						0.	0.	0.
MR. DAVID DEAL										
BOARD MEMBER		x						0.	0.	0.
MR. SIM EWING										
TREASURER	•	X		x				0.	0.	0.
MR. RON FLANARY										
VICE PRESIDENT		X		X				0.	0.	0.
MR. ROBERT HILT									-	
BOARD MEMBER		X						0.	0.	0.
MR. JAMES KEEN						i				
BOARD MEMBER		X	L					0.	0.	0.
MR. ROBERT E. PERKINSON,										
BOARD MEMBER		X				<u> </u>		0.	0.	0.
MR. RICHARD PUCKETT						1				
SECRETARY		X		Х	_			0.	0.	0.
MR. DONNIE RATLIFF									_	
BOARD MEMBER		Х			<u> </u>	 		0.	0.	0.
MR. JOHN SNIDER					l					
BOARD MEMBER		X		-	⊢	┢	_	0.	0.	0.
MS. CATHY ST. CLAIR									0	_
BOARD MEMBER		X	├-		┝		_	0.	0.	0.
MR. BRIAN SULLIVAN BOARD MEMBER		x			Ì			0.	0.	_
MR. DENNIS SUTHERLAND		^	-	-	-			U •	<u> </u>	0.
BOARD MEMBER		x						0.	0.	0.
MR. BENNY WAMPLER		┢	\vdash		\vdash	\vdash			<u> </u>	
BOARD MEMBER		X	1			1		0.	0.	0.
DOLARD FIREDUK	<u> </u>	1 47				Ь—	Ь			<u> </u>

31-1459992 Page 8

Grant Joseph A. Officers, Directors, 110		T	Jycc			ngu	CSL			T		
` (A) Name and title	(B) Average			(C Posi				(D) Reportable	(E) Reportable	_	(F) stimate	nd
Name and the	hours per week				that	арр		compensation from the	compensation from related organizations	con	mount other npensa	of ation
		Individual trustee or director	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org ar	from th ganızat nd relat ganızatı	ion ed
MR. MIKE HYMES BOARD MEMBER		x				1		0.	0			0.
MR. MIKE THOMAS		^		<u> </u>		├-	\vdash			•		<u> </u>
BOARD MEMBER		X						0.	0			0.
MR. MARK WOOTEN												
BOARD MEMBER		X						0.	0	•		0.
					_							
										-		
1b Total2 Total number of individuals (including but r	ot limited to the	nose	liste	ed al	bov	e) wl	ho r	eceived more than \$100	0,000 in reportable			0.
compensation from the organization			_								Yes	0 No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			, ke	y em	plo	уее,	or I	highest compensated er	mployee on	3	Tes	X
4 For any individual listed on line 1a, is the su			omp	ensa	atior	n and	d ot	her compensation from	the organization		_	
and related organizations greater than \$15			-							4	 	X
5 Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched				rom	any	y uni	relat	ted organization for serv	ices rendered to	5		х
Section B. Independent Contractors	ule o for such	pers	UII								Щ.	_ <u>A</u> _
Complete this table for your five highest contact the organization NONE	mpensated in	depe	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of compe	nsation	from	
(A) Name and business	address							(B) Description of s	services		(C) ensatio	n
										<u>.</u>		
O Total number of independent contractors	unaludina hi h	204 l-	mete	.d 4c	*h-			d shough what received a	nore then			
2 Total number of independent contractors (\$100,000 in compensation from the organi	-	101 11	111111	u 10		ose 11 0	รเย(u adove) who received f	nore man			
The state of the s					_	-				Forn	n 990 ((2009)

		(2009) COALI	D	31-1459992 Page 9				
Par	t VI	II Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b d e f	 Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grand similar amounts not included about 	nts, and nts, and nts, and	212,551.				
and	-	Noncash contributions included in lines Total, Add lines 1a-1f	3 1a-1f \$		242,751.	1		
Program Service Revenue	2 a	1		Business Code	242,731.			
ջ립	С							
e a	d	·						
Š_	е						-	-
_	f	All other program service revolutions 2a-2f	enue					
	3	Investment income (including	dıvıdends, ıntere	est, and				
		other similar amounts)		▶	10,076.			10,076.
	4 5	Income from investment of ta Royalties	x-exempt bond p	(ii) Personal			-	
	6 a	Gross Rents						
	b	Less: rental expenses						
	c	Rental income or (loss)		<u> </u>				
		Net rental income or (loss)		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other]		
	_	assets other than inventory Less. cost or other basis	1,383,702,					
	IJ	and sales expenses	1,474,670.					
	c	Gain or (loss)	<90968.]		
		Net gain or (loss)	(303001		<90,968.	>		<90,968.
enne		Gross income from fundraising transluding \$	of		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			13073001
Other Revenue	ь	contributions reported on line Part IV, line 18 Less. direct expenses	e 1c) See a b					
°		Net income or (loss) from fun	draising events					
	9 a	Gross income from gaming a	ctivities. See	[
		Part IV, line 19	а					
		Less: direct expenses	b					
		Net income or (loss) from gar	_	P				-
	ıo a	 Gross sales of inventory, less and allowances 	returns a					
	b	Less: cost of goods sold	b					
		Net income or (loss) from sale	_					
		Miscellaneous Reveni		Business Code				
	11 a							
	b)						
	C	·		<u> </u>				
	d	All other revenue		<u>L</u>				
		Total Add lines 11a-11d			161 050			.00 000
932009 02-04-	12	Total revenue. See instructions.			161,859.	0.	0	<80,892. Form 990 (2009)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u> </u>			expenses	general expenses	expenses
1	Grants and other assistance to governments and	5,000.	5,000.		
_	organizations in the U.S. See Part IV, line 21		5,000.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
2	Grants and other assistance to governments,				
3	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	-			
J	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 contributions (include section 401(k)				
•	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	60,890.		60,890.	
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	50,037.		50,037.	
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			• •	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				<u> </u>
23	Other expanses, Itemize expanses not severed				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а					
b					
С					
d					
е					
f	All other expenses	115 005		110 000	
25	Total functional expenses. Add lines 1 through 24f	115,927.	5,000.	110,927.	0.
26	Joint costs. Check here ▶				
	educational campaign and fundraising solicitation				

COALFIELD WATER DEVELOPMENT FUND Part X **Balance Sheet** (A) (B) Beginning of year End of year 395,795 1 411,736. Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11,957,342. 11,992,335. Investments - publicly traded securities 11 11 1,133,678. Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 12,353,137. 13,537,749. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 677,766. 485,323. 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 10,000,000. 10,000,000. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities. Complete Part X of Schedule D 25 10,677,766. 10,485,323. 26 Total liabilities. Add lines 17 through 25 26

Organizations that do not follow SFAS 117, check here

and 30

381,371

294,000.

Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117, check here

X and complete

lines 27 through 29, and lines 33 and 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

32 1,675,371 33 3,052,426. 13,537,749. 12,353,137.

31

2,758,426.

294,000.

Net Assets or Fund Balances

27

28

31

32

33

Form	990 (2009) COALFIELD WATER DEVELOPMENT FUND 31-145	9992	Pa	ge 12
Par	t XI Financial Statements and Reporting			
	•		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 in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	_ X	
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	_X_	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both.			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990 (2009)

SCHEDULE A

Internal Revertue Service

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Quen to Public

Inspection

Name of the organization

Employer identification number

			LD WATER DEV						3:	<u>1-14599</u>	92
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part) See inst	ructions			
he organ	nization is not a	a private foundation	because it is: (For lines	1 through 1	1, check o	only one b	ox)				
1 🔲	A church, co	nvention of churche	s, or association of chur	ches desci	nbed in se	ction 170	(b)(1)(A)(i)	•			
2 🔲	A school des	cnbed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)							
з 🗔	A hospital or	a cooperative hospi	tal service organization (described	n section	170(b)(1)	A)(iii).				
4 🔲	A medical res	search organization	operated in conjunction	with a hos	pital descr	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the hospital's r	name,
	city, and stat	:e:			·						
5 🗀	An organizati	on operated for the	benefit of a college or un	niversity ov	vned or op	erated by	a governr	nental uni	t describe	ed in	
	section 170(b)(1)(A)(iv). (Complete Part II.)										
6 🗀	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general į	public describ	ed in
	section 170((b)(1)(A)(vi). (Comple	ete Part II)								
8 <u> </u>	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)						
9 🔲	An organizati	on that normally rec	eives: (1) more than 33	1/3% of its	support fr	rom contri	butions, m	embershij	o fees, ar	nd gross recei	pts from
	activities rela	ited to its exempt fu	nctions - subject to certa	an excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross inv	vestment
	income and i	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nızatıon a	after June 30,	1975.
	See section	509(a)(2). (Complete	e Part III)								
10 🖳	An organizati	ion organized and o	perated exclusively to te	st for publi	c safety. S	See sect io	n 509(a)(4	i).			
11 📖	An organizati	ion organized and op	perated exclusively for th	ne benefit d	of, to perfo	rm the fur	nctions of,	or to carry	y out the	purposes of o	ne or
	more publicly	y supported organiza	ations described in secti	on 509(a)(1	l) or sectio	n 509(a)(2). See sec	tion 509(a	a)(<mark>3).</mark> Che	eck the box th	at
	describes the	e type of supporti <u>ng</u>	organization and compl		_					-	
	a L Type	ı b ∟	_ Type II	г 🔛 Тур	e III - Func	tionally inf	egrated		d	J Type III - Oth	ner
e	By checking	this box, I certify that	at the organization is not	controlled	directly of	r indirectly	by one o	more disc	qualified	persons other	than
	foundation m	nanagers and other t	han one or more publicl	y supporte	d organıza	itions desc	cribed in s	ection 509	9(a)(1) or	section 509(a)	(2)
f	If the organiz	ation received a writ	tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	111			
	supporting o	rganization, check tl	his box								
g	Since Augus	t 17, 2006, has the o	organization accepted ai	ny gift or co	ontribution	from any	of the follo	owing pers	sons?		
	••	•	lirectly controls, either a	lone or tog	ether with	persons o	lescribed i	n (II) and (I	III) below,	·	es No
	•		upported organization?							11g(i)	
	• • • • •	•	n described in (i) above?							11g(ii)	
	• •	•	person described in (i)	• •						11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganization	(s)						
		<u> </u>	/:::) Type of					r			
٠,	e of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) Is organizatio	on in col. I	(vii) Amou	ınt of
org	ganization		(described on lines 1-9		sted in your document?		support?	(i) organız U.S	ed in the	suppoi	rt
			above or IRC section (see instructions))	Yes					,		
			(acc manuchona))	162	No	Yes	No	Yes	No		
								ļ			
_				 							
			İ								
				 		-			 		
				1	Ì]]]		
]	<u> </u>	1		
		<u> </u>	 	 				ļ			
					İ						

	edule A (Form 990 or 990-EZ) 2009 C rt II Support Schedule for (Complete only if you checke	Organizations	Described in	ELOPMENT Sections 170	FUND (b)(1)(A)(iv) and	31-145 d 170(b)(1)(A)(9992 Page 2
<u></u>		u trie box on line 5	, 7, 01 6 01 Part 1.)	<u>_</u>			
	etion A. Public Support		- · - ·				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	200 605	405 605	005 601	060 050	040 554	
	include any "unusual grants ")	222,605.	425,697.	295,681.	268,052.	242,751.	1,454,786.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to				!		
	the organization without charge						
4	Total. Add lines 1 through 3	222,605.	425,697.	295,681.	268,052.	242,751.	1,454,786.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		ı				
	column (f)						118,979.
	Public support. Subtract line 5 from line 4			<u> </u>			1 335 807
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	222,605.	425,697.	<u> 295,681.</u>	268,052.	242,751.	1,454,786
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	23,849.	25,337.	<u>24,318.</u>	12,706.	10,076.	96,286.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)			· · · · · · · · · · · · · · · · · · ·			
11	Total support. Add lines 7 through 10						1,551,072,
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here			·	<u></u>	
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2009 (line 6, column (f) di	vided by line 11, o	olumn (f))		14	<u>86.12 %</u>
15	Public support percentage from 2008	Schedule A, Part	II, line 14			15	79.69 %
16a	33 1/3% support test - 2009. If the o	rganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright \mathbf{X}$
b	33 1/3% support test - 2008. If the o	rganization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances tes	t - 2009. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	dorganization		
b	10% -facts-and-circumstances tes	t - 2008.If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets ti						
	organization meets the "facts-and-cire				•		ightharpoons
<u>18</u>	Private foundation. If the organization		_				s
							or 990-FZ) 2009

١-١			/F	000	or 990		0000
SCI	reaute	м	(FOIII)	990	or aan	·EZI	2009

Sch	edule A (Form 990 or 990-EZ) 2009	Organizations	Deposits of in	Continu F00/s	1(0)		Page 3
Sol	irt III Support Schedule for Cetion A. Public Support	<u>Jrganizations</u>	Described in	Section 509(a	(Complete only	y if you checked the be	ox on line 9 of Part I.)
			T #10000		1		
	endar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
•	membership fees received (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,					-	
_	merchandise sold or services per-	ļ					
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that			·			
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that		!				
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
_	Add lines 7a and 7b		-			ļ	
	Public support (Subtract line 7c from line 6) ction B. Total Support				1	<u> </u>	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(=) 0007	(4) 0000	4.1.0000	(0 T.) .)
	Amounts from line 6	(a) 2003	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	Gross income from interest,			-	-		
	dividends, payments received on					-	
	securities loans, rents, royalties and income from similar sources			•			
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)			<u> </u>			
	Total support (Add lines 9, 10c, 11, and 12)		L		<u> </u>	<u> </u>	
14	•	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a secti	on 501(c)(3) organız	ation,
<u></u>	check this box and stop here	is Current De					<u> </u>
	etion C. Computation of Publ Public support percentage for 2009 (I			(O)		T45	
15 16	Public support percentage from 2008		•	column (1))	•	15	<u>%</u>
	ction D. Computation of Inves					16	%
17	Investment income percentage for 20			ne 13 column (fl)		17	
18	Investment income percentage from 2	•	•	.5 15, 50idilai (i))		18	<u>%</u> %
	33 1/3% support tests - 2009. If the	•	•	on line 14, and line	e 15 is more than		
	more than 33 1/3%, check this box a						▶ □
b	33 1/3% support tests - 2008. If the	•	-		.,		and
	line 18 is not more than 33 1/3%, che						▶□
20	Private foundation. If the organization					_	
					_		_

Schedule D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ➤ Attach to Form 990. ➤ See separate instructions. Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

Pa	rt I Organizations Maintaining Donor Advise		31-1459992			
Pai			S of Accounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line					
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year .					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds			
	are the organization's property, subject to the organization's	exclusive legal control?	☐ Yes ☐ No			
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring			
	impermissible private benefit?		Yes No			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, I	Part IV, line 7			
1	Purpose(s) of conservation easements held by the organization	on (check all th <u>at a</u> pply).				
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an his	storically important land area			
	Protection of natural habitat	Preservation of a cer	tified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last			
	day of the tax year.					
			Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c			
d	d Number of conservation easements included in (c) acquired after 8/17/06					
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by th	e organization during the tax			
	year ▶	-	•			
4	Number of states where property subject to conservation ear	sement is located				
5	Does the organization have a written policy regarding the per					
	violations, and enforcement of the conservation easements if	t holds?	Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,		during the year			
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) above					
	and section 170(h)(4)(B)(ii)?	, ,	Yes No			
9	In Part XIV, describe how the organization reports conservati	ion easements in its revenue and expensi				
	include, if applicable, the text of the footnote to the organization		•			
	conservation easements		g			
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	Other Similar Assets.			
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8				
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	palance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	iblic service, provide, in Part XIV, the text of			
	the footnote to its financial statements that describes these		,			
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balar	nce sheet works of art, historical treasures.			
	or other similar assets held for public exhibition, education, of					
	these items:					
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$			
	(ii) Assets included in Form 990, Part X	•	► \$ ► \$			
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	al gain, provide			
_	the following amounts required to be reported under SFAS 1		g, p. 4 1.44			
а	Revenues included in Form 990, Part VIII, line 1		▶ \$			
b	Assets included in Form 990, Part X		► \$ ► \$			
~		•	· ·			

Sche Par		LD WATER D						Page 2
3	Using the organization's acquisition, accessi							
·	(check all that apply).	ion, and other 1000.0	o, oncon any or the	Tollowing that are a	Jigi illiourit o		5110011011	1101113
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	e						
c	Preservation for future generations	_						
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organization's exe	empt purpo	se in Part	XIV.	
5	During the year, did the organization solicit of	•	•	•				
•	to be sold to raise funds rather than to be m						Yes	□ No
Par	t IV Escrow and Custodial Arran				rm 990. Par	rt IV. line 9		
	reported an amount on Form 990, Pa		J					
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	is or other assets no	t included			
	on Form 990, Part X?		•				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table					
	, .	·	J				Amount	
С	Beginning balance				1c			
	Additions during the year				1d	,		
	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F	orm 990. Part X. line	21?				Yes	No
	If "Yes," explain the arrangement in Part XIV							
Par			swered "Yes" to Fo	rm 990, Part IV, line	10			
	·	(a) Current year	(b) Prior year	(c) Two years back	(d) Three ye	ears back	(e) Four	years back
1a	Beginning of year balance	12,181,356,	14,176,235,					
b	Contributions							
c	Net investment earnings, gains, and losses	1461415.	<1,606,814,					
d	Grants or scholarships	159,069.	333,554.					
	Other expenditures for facilities	, , , , , , , , , , , , , , , , , , , ,						
	and programs							
f	Administrative expenses	110,221.	54,511.					
g	End of year balance	13,373,481.	12,181,356.					
2	Provide the estimated percentage of the year							
	Board designated or quasi-endowment		%					
b	Permanent endowment ▶ 2.20	 %	_					
c		%						
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organiz	ation		
	by:	ŭ			, , , , , , , , , , , , , , , , , , ,		[·	Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
ь	If "Yes" to 3a(ii), are the related organization	s listed as required o	n Schedule R?				3b	
4	Describe in Part XIV the intended uses of the	e organization's endo	wment funds					
Par	t VI Investments - Land, Building	gs, and Equipme	ent. See Form 990	, Part X, line 10.				
	Description of investment	(a) Cost or o	ther (b) Cost	or other (c)	Accumulate	d	(d) Book	value
	·	basis (investr	nent) basis	(other) de	epreciation	,		
1a	Land			·			·	
b	Buildings				· · · · ·			
	Leasehold improvements							
	Equipment						,	
	Other					1		
Total	Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X column (B) line 1	10(c))		—		0.

Schedule D (Form 990) 2009 COALFIELD W	ATER DEVELOPM	ENT FUND	31-1459992	Page 3
Part VII Investments - Other Securities. Set	Form 990, Part X, line 12			
(a) Description of security or category	(b) Book value	(c) M	ethod of valuation	
(including name of security)	(D) DOOK Value	Cost or er	nd-of-year market value	
Financial derivatives				
Closely-held equity interests				
Other				
HEDGE FUNDS	299,039.		MARKET VALUE	
REAL ESTATE FUNDS	834,639.	END-OF-YEAR	MARKET VALUE	
		·		
T. 1. (0-1/1)	1 122 670	· · · · · · · · · · · · · · · · · · ·		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶ Part VIII Investments - Program Related. Se	1,133,678.			
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line 13		ath and activations	
(a) Description of investment type	(b) Book value		ethod of valuation: nd-of-year market value	
			Id-OI-year market valde	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	 15	·	·	
·	Description	· · · · · · · · · · · · · · · · · · ·	(b) Book valu	e
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)		<u> </u>	
Part X Other Liabilities. See Form 990, Part X,	ine 25.	4.3.4		
1. (a) Description of liability		(b) Amount		
Federal income taxes				
 				
	-			
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)			
2. FIN 48 Footnote In Part XIV, provide the text of the foot		financial statements that -	anorte the organization is link that	
in the terminal and with the provided the text of the loop	to the organization 5	anom statements that h	OPOLIO LITO OFUARIZACION S HADIIITV	IUI

	dule D (Form 990) 2009 COALFIELD WATER DEVELOPMENT					<u> 1459992</u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audite</u>	ed Finan	cial Stat	emen	<u>ts</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		161	,859.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			,927.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-	3			,932.
4	Net unrealized gains (losses) on investments			4		1,331	
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)	•		8			1.
9	Total adjustments (net). Add lines 4 through 8	•	•	9		1,331	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19		10			,055.
Par	t XII Reconciliation of Revenue per Audited Financial Statemer		th Rever	nue per l	Returi		
1	Total revenue, gains, and other support per audited financial statements				1	1,533	.913.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					- 7000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
а	Net unrealized gains on investments	2a	1.33	1,122			
b	Donated services and use of facilities	2b			Ť		
c	Recoveries of prior year grants	2c			7		
ď	Other (Describe in Part XIV)	2d	<5	0,036			
e	Add lines 2a through 2d			<u> </u>	2e	1,281	086.
3	Subtract line 2e from line 1				3		,827.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				-		,027.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b	<9	0,968			
c	Add lines 4a and 4b			<u> </u>	4c	<90	,968.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5	161	,859.
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents W	/ith Expe	nses pe		ırn	<u>, 005.</u>
1	Total expenses and losses per audited financial statements				1		,858.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				<u> </u>		, 0301
_ a	Donated services and use of facilities	2a					
b	Prior year adjustments	2b			1		
c	Other losses	2c			7		
d	Other (Describe in Part XIV.)	2d	9	0,968	_		
e	Add lines 2a through 2d			-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2e	90	,968.
3	Subtract line 2e from line 1				3		,890.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1						, , , , , ,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b	5	0,037			
c	Add lines 4a and 4b			,,,	4c	50	,037.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5		,927.
	t XIV Supplemental Information				1		, , , , ,
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	lines 1	a and 4: Pa	rt IV. lines	1b and	2b. Part V. line	4: Part
	2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl						.,
	T V, LINE 4: THE TERM AND PERMANENT ENDOWM						
ASS	SIST IN THE DEVELOPMENT AND IMPROVEMENT OF	DRI	NKING	WATER	FOR	RESIDE	NTS
IN	THE VIRGINIA COUNTIES OF LEE, SCOTT, WISE,	RUS	SSELL,	BUCH	ANAN	, TAZEWI	ELL.
						,	
ANI	DICKENSON AND THE CITY OF NORTON.						
						· · · · · · · · · · · · · · · · · · ·	
		_					
PAI	RT XI, LINE 8 - OTHER ADJUSTMENTS:						
ROU	UNDING DIFFERENCE: 1.		<u> </u>				

Schedule D (Form 990) 2009 COALFIELD WATER DEVELOPMENT FUND	31-1459992 Page 5
Part XIV Supplemental Information (continued)	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
INVESTMENT FEES NETTED WITH REVENUE ON FINANCIAL STATEMENTS	: -50037.
ROUNDING ADJUSTMENT: 1.	. 3337,
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
LOSSES INCLUDED IN TOTAL REVENUE ON FORM 990: -90968.	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
LOSSES INCLUDED IN TOTAL REVENUE ON FORM 990: 90968.	
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
INVESTMENT FEES NETTED WITH REVENUE ON FINANCIAL STATEMENTS	: 50037.

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

COALFIELD WATER DEVELOPMENT FUND

Employer identification number 31-1459992

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND LOCAL INVESTMENTS IN WATER, AND ADDRESS PUBLIC HEALTH PROBLEMS
RELATED TO THE QUANTITY AND QUALITY OF WATER.
FORM 990, PART VI, SECTION A, LINE 3: THE ORGANIZATION WILL PAY A
QUARTERLY FEE TO THE MOUNTAIN EMPIRE COMMUNITY COLLEGE FOUNDATION, WHICH
WILL SERVE AS THE ADMINISTRATIVE AGENT FOR THE ORGANIZATION. THE MECC
FOUNDATION WILL PROVIDE THE FOLLOWING TYPES OF SERVICES AMONG OTHERS:
1. MAINTAIN FINANCIAL RECORDS IN COLLABORATION WITH AUDIT FIRM
2. PROPOSE BUDGETS
3. REPORT ON STATUS OF ACCOUNTS AND GRANT PROJECTS
4. SERVE AS SPOKESPERSON BETWEEN THE ORGANIZATION AND OTHER INTERESTED
PARTIES
5. SERVE AS LIASON WITH THE INVESTMENT MANAGER FOR THE CWDF IN
IMPLEMENTING THE INVESTMENT AND SPENDING POLICIES OF THE BOARD
OF DIRECTORS.
6. ASSIST THE PLANNING DISTRICT COMMISSION IN ANNOUNCING THE SOLICITATION
OF GRANT APPLICATIONS ON AN ANNUAL BASIS
7. COMPLETE ANNUAL REPORTS FOR FUNDING RECEIVED
8. SERVE AS LIASON TO THE PROVIDERS OF PROFESSIONAL SERVICES
9. COMPLETE 10 GRANT APPLICATIONS TO OUTSIDE ORGANIZATIONS AND
INDIVIDUALS
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE COMMITTEE REVIEWS
FORM 990 BEFORE IT IS SUBMITTED TO THE IRS.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

COALFIELD WATER DEVELOPMENT FUND 31-1459992 FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST STATEMENTS FROM ALL BOARD MEMBERS ARE OBTAINED AT THE FALL BOARD OF DIRECTORS MEETING EACH YEAR. FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE UPON REQUEST SCHEDULE A, PART II EXPLANATION OF GOVERNMENT GRANTS THE COALFIELD WATER DEVELOPMENT FUND RECEIVED AN INTEREST FREE LOAN OF \$10,000,000 FROM THE VIRGINIA WATER SUPPLY REVOLVING FUND, ACTING BY AND THROUGH THE VIRGINIA RESOURCES AUTHORITY. A PUBLIC BODY CORPORATE AND A POLITICAL SUBDIVISION OF THE COMMONWEALTH OF VIRGINIA. PROCEEDS WERE INVESTED AND ARE HELD IN TRUST FOR THE BENEFIT OF THE VIRGINIA WATER SUPPLY REVOLVING FUND. THE LOANS ARE SECURED AND COLLATERALIZED BY THE INVESTMENT ACCOUNT. ALL EARNINGS ARE TO BE USED TO EXTEND GRANTS TO ASSIST IN THE FINANCING OF NEW DRINKING WATER FACILITIES IN THE COALFIELD REGION OF VIRGINIA. THE VIRGINIA WATER SUPPLY FUND ALLOWS USE OF THE INVESTMENT EARNINGS

EACH YEAR BY THE COALFIELD WATER DEVELOPMENT FUND. THE COALFIELD WATER DEVELOPMENT FUND MAKES GRANTS FROM THE INVESTMENT EARNINGS IN ACCORDANCE WITH THE GUIDELINES OF THE VIRGINIA WATER SUPPLY REVOLVING FAILURE TO MAKE GRANTS IN ACCORDANCE WITH THE STATE GUIDELINES FUND. WILL CAUSE THE COALFIELD WATER DEVELOPMENT FUND TO DEFAULT ON THE LOAN AND THE INVESTMENTS WILL REVERT BACK TO THE VIRGINIA WATER SUPPLY

REVOLVING FUND AS PART OF THE COLLATERALIZD SECURITY AGREEMENT.

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COALFIELD WATER DEVELOPMENT FUND

Employer identification number 31-1459992

INVESTMENT EARNINGS ARE DEEMED TO BE AN ANNUAL REVOLVING GRANT FROM THE
VIRGINIA WATER SUPPLY REVOLVING FUND. THEREFORE, THESE EARNINGS ARE
REPORTED AS GRANT REVENUE RECEIVED FROM A GOVERNMENTAL UNIT.