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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)

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

OMB No 1545-0047 2009 Open to Public

Form 990 (2009)

ı	<u>A</u>	For the 2009 ca	lendar y	ear, or tax year b	peginning 07/01	/09 and e	ndina 06	/30/1	o 	-	-		~	
 -		Check if applicable	Please	C Name of organiz		<u>, , , , , , , , , , , , , , , , , , , </u>			-		D Emplo	yer identification number	-	
	\prod	Address change use IRS Newtown Community Development Corp												
	\exists	Name change	label or print or	Doing Business							86-	0793043		
	\equiv	type. Number and street (or P.O. box if mail is not delivered to street address). Room/suit										none number	-	
	\sqsubseteq	Initial return	See		Iniversity Dr.							-517-1589		
		Termination	Specific Instruc-		state or country, and ZIP + 4						G Gross rece	0 000 110	5	
	\Box	Amended return	tions.	Tempe	,, <u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>	AZ 852	81				<u> </u>	<u> </u>	_	
	\exists	Application pending	F Name	e and address of p	nncipal officer				_		H(a) Is this	a group return for		
	ш	Application pending		len L. (affiliate		n	
			51	1 West T	Jniversity D	rive, Su	ite 4				H(b) Are all	affiliates		
			1	mpe	•	AZ 852				ļ		attach a list (see instructions)	•	
	ī	Tax-exempt statu	ıs X	501(c) (3) ◀ (insert no)	4947(a)(1) or	527							
		•			ewtowncdc.or			•	_		H(c) Group	exemption number		
	ĸ	Type of organization	X Cor	rporation Trust	Association Othe	r 🕨		L	ear of form			M State of legal domicile A2	Z	
	P	art I Su	umma	ry							•		_	
		1 Briefly de	escribe t	the organization	's mission or most signif	ficant activities:							_	
#	ė	Newt	own'	s mission	is to increas	e the supp	oly of p	ermane	ntly	affor	dable			
201	anc	hous	sing w	while dev	eloping and su	pporting 1	nomebuye	rs thre	ough	innov	ative			
	Ē	prog	grams	and part	nerships.									
	Š	2 Check th	ns box 🕨	▶ 🔲 ıf the orga	inization discontinued its	operations or c	sposed of mo	ore than 25	5% of its	net asse	ets.			
	ಶ				e governing body (Part						3	16		
₹	es	4 Number	of indep	endent voting n	nembers of the governin	g body (Part VI,	line 1b)				4	16	_	
1.	ĭ₹	5 Total nur	mber of	employees (Par	t V, line 2a)	 7					5	5	_	
	Activities & Governance	6 Total nur	mber of	volunteers (esti	mateRe@saWED	1					6	30	_	
	•			lated business r		7a		_						
=		b Net unre	lated bu	ısıness taxable	ricome from 50gm 9901	「, lined#					7b	0	<u> </u>	
SCANNED JAN 1		l		C	DEC 2 0 2010			-		Prior Year		Current Year	_	
Ç	Ę			d grants (Part V) 또		}			,862	1,231,932		
Q.	Revenue				/III. WOODEN, U			}		36	,290	39,447	_	
	Re				dumn (A), lines 3, 4, and	•		}		01.0	664	75		
					(A), lines 5, 6d, 8c, 9c,						713	-338,093		
					ugh 11 (must equal Part), line 12)		-	803	,103	933,361	<u>-</u>	
		13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4)												
					mployee benefits (Part I	2/3	,971	342,840	7					
	enses				art IX, column (A), line 1	243	, 911		<u>-</u>					
	n ec	į.		expenses (Par			 ·	-						
	Exp		_		n (A), lines 11a–11d, 11f		1,17	Ĭ		98	,479	122,739	<u>-</u>	
		11 0010101			7 (must equal Part IX, co	•	E)	ŀ			,450	465,579	_	
					ct line 18 from line 12	numm (A), mie 2	3)	<u> </u>			,653	467,782		
		15 Revende	1033 02	perises. Cubital	ctime to nom line 12	-			Beginnı	ng of Curre		End of Year	-	
	sets	20 Total ass	sets (Pa	rt X, line 16)							,515	4,199,271	Ī	
	t As d Ba	21 Total liab	olities (F	Part X, line 26)						251	,249	1,159,223		
	Net Assets or Fund Balances	22 Net asse	ts or fur	nd balances. Su	btract line 21 from line 2	20			2	,572	,266	3,040,048	3	
	_P	art II Si	gnatu	re Block									_	
		Und	der penal	Ities of perjury, I de	clare that I have examined	this return, includir	g accompanyin	g schedules	and state	ments, an	d to the be	st of my knowledge	_	
		l l	d belief, it	is true, correct, ar	nd complete Declaration of	preparer (other tha	n officer) is bas	ed on all info	ormation o	of which pr	eparer has	any knowledge		
	Sig	ın 📗	<u>X</u>	Me	- /W/C						X	12/15/10	_	
	He	re 🖊	_	re of officer							Date	, , –	_	
			Al	len Carl	son			Execu	tive	Dir	ector	<u>: </u>	_	
	_		Type or	r print name and tit	le								_	
	D-'	Pre	eparer's					Date		Check if		Preparer's identifying number (see instructions)		
	Pai	Sigi	nature	Paul I). Toepel			12/1	4/10	self- employe	ed 🕨 🗌	P00368772		
		eparer's	m's name	e (or yours \	oepel Compa	any, P.C	•				EIN ▶	86-0573885	5	
	US	C C	elf-emplo	• • • •	500 S Power	Rd Ste		_			Phone		- `	
		ado	dress, and	d ZIP + 4	lesa, AZ 852	209					no 🕨	480-833-8300	<u>o`</u> `	
	May	the IRS discus	ss this re	eturn with the pr	eparer shown above? (s	ee instructions)						Yes X No	-	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. DAA

Part III Statement of Program S	ervice Accomplishmer	nts		
1 Briefly describe the organization's mission				-
Newtown's mission is t				
housing while developi		ing homebuyers tl	hrough innova	ative
programs and partnersh	ips.			
2 Did the organization undertake any signific	ant program services during t	he year which were not listed on		
the prior Form 990 or 990-EZ?				Yes X No
If "Yes," describe these new services on S				
3 Did the organization cease conducting, or	make significant changes in h	ow it conducts, any program		
services?				Yes X No
If "Yes," describe these changes on Scheo				
4 Describe the exempt purpose achievemen				
Section 501(c)(3) and 501(c)(4) organization			ount of grants and	
allocations to others, the total expenses, a	nd revenue, it any, for each p	rogram service reported		
4a (Code) (Expenses \$	142,155 including g	rente of C) (Bayanya f	
Community Land Trust -) (Revenue \$, to low-
income first time home				
programs in various ju			unity rand tr	ust
programs in various ju	TISUICCIONS WI	CHIH ALIZOHA.		
4h (Codo) (Evropos ¢	234,397 including g			
4b (Code) (Expenses \$ Home Buyer Assistance:) (Revenue \$)
households, along with				ig to
nouseholds, along with	providing for	eciosure counser.	ing.	
4c (Code) (Expenses \$	23,746 including g	ronte of \$) (Revenue \$	
IDA: Provided assistan				, level opment
accounts established f				reveropmenc
	or nomeowners.	Th down batmenes	•	
	•			
•				
4d Other program services (Describe in Sche	edule O)			
	including grants of \$) (Revenue \$	£	1
4e Total program service expenses ▶	400,298) (increside t	,	
				Form 990 (2009)

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	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	١.	1	x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4		
•	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	1		
•	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,	<u> </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
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; 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		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,			
	VII, 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 related 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	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes N			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		İ	
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			,,
4 ~	to individuals 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			v
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1		v
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	\vdash	<u> </u>
13	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	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	The state of the s		n 990	(2009)
				,

			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> </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> </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			37
.	employees? If "Yes," complete Schedule J	23		<u> </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			v
L	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d		24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24u		
LJa	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	200		
_	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	202		
	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		_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		<u> </u>
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			v
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	24		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34		-
33	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	33		
	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	- 55		<u>- </u>
	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 in Schedule O for Part VI, lines 11 and			
_	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	L
		Forn	990	(2009)

Form 990 (2009) Newtown Community Development Corp 86-0793043

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1				
	U S Information Returns Enter -0- if not applicable	1a				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable	•		1	
	gaming (gambling) winnings to prize winners?	1 1		1 <u>c</u>	ļ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		F			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?			-	X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
٥-	Instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere this return?	а ву				x
h				3a	+	 -^-
b 43	If "Yes," has it filed a Form 990-T for this year? If "No," 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 a	uthorit	v	3b	+	├
4 a	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		у			
	account)?	ariciai		4a	1	x
b	If "Yes," enter the name of the foreign country				1	
-	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	arding				
	Prohibited Tax Shelter Transaction?			5c		<u>l</u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е				
	organization solicit any contributions that were not tax deductible?			6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
_	gifts were not tax deductible?			6b	 	ļ
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 gand services provided to the payor?	jooas				x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7a 7b	+	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	e		7.5	+	
ŭ	required to file Form 8282?	.5		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7a		''		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p					
	benefit contract?			7e	1	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as				
	required?			7h	ļ	X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					
	organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring			<u> </u>	1	
•	organization, have excess business holdings at any time during the year?			8	-	
9	Sponsoring organizations maintaining donor advised funds.				1	
a b	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?			9a	-	╁
10	Section 501(c)(7) organizations. Enter			<u>9b</u>	+	-
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
-	amounts due or received from them)	11ь				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	.]	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
				Fo	m 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.

Sec	tion A. Governing Body and Management			
	•		Yes	No
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent 1b 16	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7		
	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 or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	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 members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	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 reached			
	at the 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			
	venue Code.)			
-			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		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 arrangement			
	with a taxable entity during the year?	16a	Ì	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b]	
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ AZ			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization Newtown Community Development Corp 511 W University Drive #4			
_ T	empeAZ 85281	•		

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

(A) Name and Title	Posi	tion (C) k all i	hat ap	(vlac	(D) Reportable	(E) Reportable	(F) Estimated	
	Average hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Nick Miner										
Chairman	2.00	X		X				0	0	
Barbara Boone						li				
Vice Chair	2.00	X		X		Ш		0	0	
Pen Johnson										
Secretary	2.00	X		_		Щ		0	0	
Linda Spears										
Treasurer	2.00	X		X				0	0	
Mike Patten										
Past-Chair	2.00	X						0	0	(
Sherry Ahrentzen						1				
Director	2.00	X						0	0	
Donna Aguilar										
Director	2.00	X						0	0	(
Clara Ali										
Director	2.00	X						0	0	
Luis Almanza		1								
Director	2.00	X		<u> </u>				0	0	
Phil Amorosi										
Director	2.00	X						0	0	
Robin Arredondo-S										
Director	2.00	X		X				0	0	
Alana Chavez-Lang	,									
Director	2.00	X						0	0	
Pam Goronkin										
Director	2.00	X						0	0	(
Debbie Rahn										
Director	2.00	X						0	0	(
Michelle Wood										
Director	2.00	X	L	L				0	0	(
Greg Wessel									<u> </u>	
Director	2.00	X	L	L				0	0	
Donna Ybarra										
Director	2.00	X						o	0	(

Par	t VII Section A. Officers	, Directors, Tru	stee	s, Ke	y Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)		_		
	(A) Name and Title	(B) Average hours per			chec	_	hat a		(D) Reportable compensation	(E) Reportable compensation		(F) Estima	ited	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		othe ompens from t organiz and rel	r sation he ation ated	
			ee 	stee			nsated				°	organiza	itions	
	llen Carlson	40.00						-	74.011					
Exe	cutive Dir	40.00	-		X				74,911	0	 			Q
											-			
		<u> </u>								-	<u> </u>			
		-												
											<u> </u>	_		
		+												
		1	_	-										
		<u> </u>												
1b 2	Total Total number of individuals (in	actuding but not i	ımıte	ed to	thos	e lis	ted a	hov	a) who received more than	\$100,000 ip	<u> </u>			
	reportable compensation from	_							C) Who received more than	——————————————————————————————————————		-		
3	Did the organization list any fo	ormer officer, dir	ecto	r or t	ruste	e, k	ey ei	mplo	oyee, or highest compensat	ted	1		Yes	No
4	employee on line 1a? If "Yes," For any individual listed on lin								n and other compensation	from		3		X
	the organization and related of individual	rganizations gre	ater	than	\$15	0,00	0? If	"Ye	s," complete Schedule J fo	r such		4		x
5	Did any person listed on line a services rendered to the organ									r		5		x
Sect	tion B. Independent Contract Complete this table for your fi		0000	stad	ındo	2000	lont d		ractors that received more	than \$100,000 of				
<u>.</u>	compensation from the organ	ızatıon		aleu	inue	Jeno		T					(C)	
	Name and	(A) I business address						<u> </u>	Dеѕспр	(B) luon of services		Co	(C) mpensat	ion
								<u> </u>						
												_		
							_							<u>_</u>
2	Total number of independent						ed to	tho	se listed above) who receiv	ved				_
	more than \$100,000 in compe	ensation from the	org	<u>anız</u> a	ation			_				0		

Pa	FL V	ni Staten	<u>lent of Reve</u>	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
ts	1a	Federated can	npaigns	1a	***************************************					
Program Service Revenue Contributions, gifts, grants and other similar amounts	h	Membership d		1b						
₽Ę		•								
fts	С.	Fundraising ev		1c						
iĝi	d	Related organi	zations	1d						
sir	е	Government grants (•	1e	1,	022,102				
atic er	f	All other contribution]						
ēέ		and similar amounts	not included above	1f		209,830				
ă P	g	Noncash contribution	ns included in lines 1a-	-1f \$	3	22,500				
ĕĞ	h	Total. Add line	s 1a–1f			▶]	1,231,932			
Te l			-		•	Busn. Code				
len/	2a	Consult	ing fees				39,447	39,447		
Re.	b	V					2.7, 2.5.			
ဗ	٥								,	
Ž										
Š	a									
ra.	е									
<u> </u>	f	All other progra	am service reve	nue		L				
	g	Total. Add line	s 2a-2f			>	39,447			
	3	Investment inc	ome (including	dıvıden	ds, intere	st, and				
		other similar a	mounts)			> [75			75
	4	Income from in	nvestment of tax	c-exemp	ot bond p	roceeds >				_
	5	Royalties				▶ [-		
			(ı) Real		(II) P	ersonal				
	6a	Gross Rents	26	, 486		-				
	b	Less rental exps								
	_	Rental inc or (loss)	26	, 486						
	ر د			, 400			26,486			26,486
	d 7a	Net rental inco	<u>'</u>		()	Other	20,400			20,400
		sales of assets	(i) Securities	S	(11)	Other				
		other than inventory	_							
	b	Less cost or other								
		basıs & sales exps								
	С	Gain or (loss)								
	ď	Net gain or (lo	ss)	_		>				
d)	8a	Gross income fro	om fundraising eve	ents						
Ž		(not including \$								
Š			eported on line 1c)						
Other Revenue		See Part IV, line		a a						
þ	h	Less direct ex		ь						
ŏ			(loss) from fund		evente					
				г	events					
	Ja		om gaming activitie	- 1						
		See Part IV, line		a						
		Less direct ex		b[· ·	
			(loss) from gam		ivities					
	10a		finventory, less							
		returns and all	owances	a		068,500				
	b	Less cost of g	joods sold	ь	1,	433,079				
	С	Net income or	(loss) from sale	s of inv	entory		-364,579	-364,579		
			ellaneous Revenue			Busn. Code				
	11a									
	b					· · · · ·			· · · · · · · · · · · · · · · · · · ·	
	c						<u>-</u>			
	d d	All other reven	NI IO							
	_	Total. Add line								
	42					!	022 261	_22E 120	^	26 561
	12	iotal Revenu	e. See instructio	ons .			933,361	-325,132	0	26,561

Statement of Functional Expenses Part IX

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	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,				
	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	308,886	257,751	51,135	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	"			
10	Payroll taxes	33,954	28,101	5,853	
11	Fees for services (non-employees)			-,-35	
а	Management				
b	Legal				
c	Accounting	14,646	13,155	1,491	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g g	Other				
12	Advertising and promotion				
13	Office expenses	54,900	51,499	2,231	1,170
14	Information technology	31/300	02/133	2,232	
15	Royalties				
16	Occupancy	28,236	25,833	2,403	- · · · ·
17	Travel	20,230	23,033	2,403	
18	Payments of travel or entertainment expenses			+	 · · · · · · · · · · · · · · · · · ·
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,550	3,550		
20	Interest	3,330	3,330		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,667	9,039	628	
23	Insurance	11,650	11,354	296	
23	lisurance	11,000	11,334	290	
24	Other expenses Itemize expenses not			***************************************	
24	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	`			
_	Other Expenses	90	16	74	
a	other nybenses	90	Τ.0	/4	
b					
C					
d					
e	All alban avanana				
f	All other expenses	A C E E E E E E E E E E E E E E E E E E	400 000		4 4 5 4
25	Total functional expenses. Add lines 1 through 24f	465,579	400,298	64,111	1,170
26	Joint costs. Check here ▶ if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation	L			

P	art X	Balance Sheet		-	
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing	241,504	1	432,438
	2	Savings and temporary cash investments	57,282	2	16,970
	3	Pledges and grants receivable, net	29,790	3	184,152
	4	Accounts receivable, net	4,100	4	81,483
	5	Receivables from current and former officers, directors, trustees, key	•		
		employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	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		6	
Assets	7	Notes and loans receivable, net	20,924	7	25,083
SS	8	Inventories for sale or use	, , , , , , , , , , , , , , , , , , , ,	8	643,163
ä	9	Prepaid expenses and deferred charges		9	
		Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 2,912,687			
	h	Less accumulated depreciation 10b 98,693		10c	2,813,994
	11	Investments—publicly traded securities	= 7 200 7 200	11	2,020,001
	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	625	15	1,988
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,823,515	16	4,199,271
	17	Accounts payable and accrued expenses	15,200	17	22,446
	18	Grants payable	13,200	18	349,356
	19	Deferred revenue		19	262,421
	20	Tax-exempt bond liabilities		20	202,421
S	21	Escrow or custodial account liability Complete Part IV of Schedule D	11,049	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	11,043		
Ξ	22	employees, highest compensated employees, and disqualified			
<u>ia</u>		persons Complete Part II of Schedule L	i	22	
_	23	Secured mortgages and notes payable to unrelated third parties	225,000	23	
	24	Unsecured notes and loans payable to unrelated third parties	223,000	24	525,000
	25	Other liabilities Complete Part X of Schedule D		25	323,000
	26	Total liabilities. Add lines 17 through 25	251,249	26	1,159,223
·s	20	Organizations that follow SFAS 117, check here ▶ 🗓 and	231,243	20	1,100,220
ce		complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	1,242,962	27	1 399 512
3al	28	Temporarily restricted net assets	1,329,304	28	1,399,512 1,640,536
ᄝ	29	Permanently restricted net assets	1,323,301	29	2/010/330
Fund Balances		Organizations that do not follow SFAS 117, check here ▶		<u> </u>	
гF		and complete lines 30 through 34.			
s or	30	Capital stock or trust principal, or current funds	ĺ	30	
ets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	-
SS	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets	33	Total net assets or fund balances	2,572,266		3,040,048
Š	34	Total liabilities and net assets/fund balances	2,823,515		4,199,271
	5	rotal nashitos and not assets/rang balances		J-4	1 -12-77-12

Form **990** (2009)

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3b X Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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

2009

Open to Public Inspection

Employer identification number

Newtown Community Development Corp 86-0793043 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c | Type III–Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

Since August 17, 2006, has the organization accepted any gift or contribution from any of the

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(ı)		
11g(iı)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	ın col (i) lı	organization sted in your document?			organizat	zed in the	(vii) Amount of support
		(Yes	No			Yes	No	
									
									·
					_				
otal				1					

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

g

Page 2	-0793043	Corp 86-	elopment (unity Dev	town Comm	edule A (Form 990 or 990-EZ) 2009 New	Sche
						art II Support Schedule for Or	
						(Complete only if you che	
						tion A. Public Support	
(f) Total	(e) 2009	(d) 2008	(c) 2007	(b) 2006	(a) 2005	lendar year (or fiscal year beginning in) ▶	Cal
940,839	209,380	128,086	141,633	192,670	269,070	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1
						Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	2
63,800	11,000	13,200	13,200	13,200	13,200	The value of services or facilities furnished by a governmental unit to the organization without charge	3
1,004,639	220,380	141,286	154,833	205,870	282,270	Total. Add lines 1 through 3	4
						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	5
468,873						shown on line 11, column (f)	_
535,766					<u> </u>	Public support. Subtract line 5 from line 4	<u>6</u>
		40.000			4) 0005		
(f) Total	(e) 2009	(d) 2008	(c) 2007	(b) 2006	(a) 2005	lendar year (or fiscal year beginning in) ▶	
1,004,639	220,380	141,286	154,833	205,870	282,270	Amounts from line 4	7
7,843	75	664	4,711	1,415	978	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8
	0					Net income from unrelated business activities, whether or not the business is regularly carried on	9
						Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	10
1,012,482			<u> </u>			Total support. Add lines 7 through 10	11
1,107,947	12				` '	Gross receipts from related activities, etc	12
	c)(3)	as a section 501(th, or fifth tax year	second, third, four	=	First five years. If the Form 990 is for the	13
<u> </u>						organization, check this box and stop here	<u> </u>
						tion C. Computation of Public Su	
52.92%	14		ı (f))	•	• • • •	Public support percentage for 2009 (line 6,	14
64.40%	15					Public support percentage from 2008 Sche	15
▶ [ਓ]	heck this box	3 1/3 % or more, c	3, and line 14 is 33			33 1/3 % support test—2009. If the organi	l6a
► X				-		and stop here. The organization qualifies a	
▶ □	ore, cneck this	is 33 1/3 % or mo				33 1/3 % support test—2008. If the organi	b
	14 := 100/ ==	or 16h and be - 4		• • •			17~
					=		ı i d
▶ □		-					
				•		-	b
	rt IV how the	ere. Explain in Par ported organizatio	pox on line 13, 16a, his box and stop he s as a publicly sup	n did not check a laces" test, check the rganization qualifie	9. If the organization octs-and-circumstar tances" test The o	box and stop here. The organization qualif 10%-facts-and-circumstances test—2009 more, and if the organization meets the "fa organization meets the "facts-and-circumst 10%-facts-and-circumstances test—2009	l7a b

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

<u>Sec</u>	tion A. Public Support						
Cal	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 include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513						
4	Tax revenues levied for the organization'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						
7a	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						
С	Add lines 7a and 7b						
8 —	Public support (Subtract line 7c from line 6)						
	tion B. Total Support			T	· · · · · · · · · · · · · · · · · · ·		
	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6			-			
10a	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						
С	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)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	-	st, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	▶ □
Sec	tion C. Computation of Public Su		ntage				
15	Public support percentage for 2009 (line 8	, column (f) divide	ed by line 13, colun	nn (f))		15	%
16	Public support percentage from 2008 Sch	, ,	•	.,,		16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2009 (I			3, column (f))		17	%
18	Investment income percentage from 2008	Schedule A, Part	III, line 17			18	%
19a	33 1/3 % support tests—2009. If the orga			e 14, and line 15 i	s more than 33 1/3	%, and line	
	17 is not more than 33 1/3 %, check this b						▶ [
b	33 1/3 % support tests—2008. If the orga	inization did not cl	heck a box on line	14 or line 19a, and	d line 16 is more th	an 33 1/3 %, and	
	line 18 is not more than 33 1/3 %, check t	his box and stop I	here. The organiza	tion qualifies as a	publicly supported	organization	▶ [
20	Private foundation. If the organization did	I not check a box	on line 14, 19a, or	19b, check this bo	x and see instruct	ions	<u>.,</u> ▶ │

Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009

Open to Public Inspection

Name of the organization Employer identification number Newtown Community Development Corp 86-0793043 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

sche	dule D (Form 990) 2009 Newtown Co	mmunity Deve	robment C	orp	86-07	93043			Page <u>Z</u>
Pa	rt III Organizations Maintaining (Collections of Art, F	listorical Trea	sures,	or Other	Similar Ass	sets (conti	nuec	<u>i) </u>
3									
а	Public exhibition	d Loan or	exchange program	ns					
b	Scholarly research	e Other	3-7-3						
С	Preservation for future generations					·	_		
4	Provide a description of the organization's colle Part XIV.	ections and explain how th	ey further the orga	anızatıon':	s exempt pu	ırpose ın			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be	eceive donations of art, h	storical treasures,	or other	simılar		\Box	/es [¬ No
Pa	art IV Escrow and Custodial Arrar	•				"Yes" to Fo			
	IV, line 9, or reported an amo				110110100	100 1010	1111 330, 1	art	
1a	Is the organization an agent, trustee, custodian		· · · · · · · · · · · · · · · · · · ·		ts not				
	included on Form 990, Part X?	or other intermediary for	CONTRIBUTIONS OF OR	1161 03361	13 1101			es [No
h	If "Yes," explain the arrangement in Part XIV ar	ad complete the following	table:					es [
	ii res, explain the allangement in Fall XIV al	id complete the following	lable				Amou	nt	
_	Beginning balance					1-1-	Allioc	111	
						1c			
	Additions during the year Distributions during the year					1d			
	Ending balance					1e 1f			
22	Did the organization include an amount on Forr	m 000 Bort V line 212					TT.	. [
	If "Yes," explain the arrangement in Part XIV	11 990, Part A, line 217					□ '	es [No
	ert V Endowment Funds. Comple	te if organization an	ewered "Vee"	to Form	000 Pa	rt IV line 1	^		
	Lindowinent i dilds. Comple	(a) Current year	(b) Prior year		years back	(d) Three years		ur vooi	s back
1-	Reginning of year halance	(a) content year	(b) i noi year	(6) 1110	years back	(d) Three years	back (c) i c	ui yeai	3 Dack
	Beginning of year balance Contributions			 					
	Net investment earnings, gains,			 					
·	and losses								
ч	Grants or scholarships			 					
	Other expenditures for facilities			 					
ę									
£	and programs Administrative expenses	-		 					
	End of year balance			 					
2	Provide the estimated percentage of the year e	and halange hold as		1		<u> </u>			
	Board designated or quasi-endowment								
	Permanent endowment > %	%							
	Term endowment ▶ %								
	Are there endowment funds not in the possess	ion of the organization the	st are held and adn	ninistoros	t for the				
Ja	organization by	ion of the organization the	it are neid and adi	minstered	i lor ule			Yes	No
	(i) unrelated organizations						3a(i		-
	(ii) related organizations						3a(i		+
h	If "Yes" to 3a(II), are the related organizations li	isted as required on Sche	dula B2				3b		
4	Describe in Part XIV the intended uses of the o						_ 35		
~~~~	art VI Investments—Land, Buildin			0 Part	X line 1	n		_	
<u>`</u>	Description of investment	(a) Cost or other basis	(b) Cost or ot			cumulated	( <b>d</b> ) Boo	k valu	
		(investment)	basis (other			eciation	(0) 50.		
1a	Land	2,741,500	<u> </u>	<u> </u>	<del></del>		2 -	741	500
	Buildings	_,,,,,,,,,	<u> </u>				-,		,
	Leasehold improvements		106	,319		53,160		53	,159
	Equipment			,868		45,533			335
	Other			,,,,,,,,		,	<del>-</del> -	_=	
	I. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X, colu	ımn (B), line 10(c)	)		<b>•</b>	2,8	313	994
			, , , _ \-/			-			

Part VII Investments—Other Securities. See Form 990, Part X, line 12.  (a) Description activatives (closely-neidequity interests Other  Total. (Column (b) must equal Form 990, Part X, cot (6) line 13) Part VIII Investments—Program Related. See Form 990, Part X, line 13.  (b) Book value  (c) Method of valuation Cost or end-of-year market value  Total. (c) Investments—Program Related. See Form 990, Part X, line 13.  (c) Method of valuation Cost or end-of-year market value  Total. (c) Investments—Program Related. See Form 990, Part X, line 13.  (d) Description of investments type  (e) Book value  (f) Method of valuation Cost or end-of-year market value  Cost or end-of-year market value  (e) Book value  (f) Method of valuation Cost or end-of-year market value  Cost or end-of-year market value  (e) Book value  (f) Method of valuation Cost or end-of-year market value  (e) Book value  (f) Method of valuation Cost or end-of-year market value  (e) Book value  (f) Method of valuation Cost or end-of-year market value  (e) Book value  (f) Method of valuation Cost or end-of-year market value  (e) Book value  (f) Method of valuation Cost or end-of-year market value  (g) Method of valuation Cost or end-of-year market value  (g) Method of valuation Cost or end-of-year market value  (h) Book value (h) Book value (h) Book value  (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book value (h) Book va	Schedule D (Form 990) 2009 Newtown Community Dev		86-0793043	Page 3
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		anization's financial statemen	ats that reports the	
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	dule D (Form 990) 2009 Newtown Community Development			Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	933,361
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	465,579
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	467,782
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV )		8	· · · · · · · · · · · · · · · · · · ·
9	Total adjustments (net) Add lines 4 through 8		9	467 700
10 D	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	Mark D	10	467,782
	Reconciliation of Revenue per Audited Financial Statement	s with Revenue per Rei	urn	2 266 440
1	Total revenue, gains, and other support per audited financial statements	}	_1_	2,366,440
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	ا		
a	<u> </u>	2a		
D	<del> </del>	2b		
		2c 1 422 070		
	` ,	2d 1,433,079		1 422 070
	Add lines 2a through 2d	}	2e	1,433,079
3	Subtract line 2e from line 1	1	3	933,361
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	.		
a		4a		
b	,	4b		
_	Add lines 4a and 4b	ļ	4c	022 261
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	As Mids Francisco	5	933,361
	art XIII Reconciliation of Expenses per Audited Financial Statemen	its with Expenses per N	tetur	
1	Total expenses and losses per audited financial statements		-1-	1,898,658
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_ 1		
a	<del>-</del>	2a		
D	· · · · · · · · · · · · · · · · · · ·	2b		
C		2c   1,433,079		
a		2d   1,433,079		1 422 070
_	Add lines 2a through 2d	}	2e	1,433,079
3	Subtract line 2e from line 1		3	465,579
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	.		
	· · · · · · · · · · · · · · · · · · ·	4a		
	· · · · · · · · · · · · · · · · · · ·	4b		
	Add lines 4a and 4b	ŀ	4c	4.CE E7.O
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	465,579
	art XIV Supplemental Information	· · · · · · · · · · · · · · · · · · ·		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines			
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines	s 2d and 4b Also complete		
•	part to provide any additional information	043		
_ ₽	art XI, Line 8 - Reconcilation of Changes	Otner		
_ C	ost of properties sold	\$		1,433,079
_c	osts of properties sold			1,433,079
_B	ook / Tax Depreciation Difference			4
_B	ook / Tax Depreciation Difference	\$		-4
		· <b>-</b> ·		
		<del></del> .		
_P	art XII, Line 2d - Revenue Amounts Included	in Financials	_0 <u>t</u>	her

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#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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

OMB No 1545-0047

Newtown Community Development Corp

Employer identification number 86-0793043

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 Form 990 is reviewed by the Treasurer and Executive Director before it is filed.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Policy is provided to and signed by all officers, directors, and employees.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Board conducts annual review and approval of all compensation.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Other organization documents publicly available. All are available upon request.

## Form **4562**

Department of the Treasury Internal Revenue Service (9

#### **Depreciation and Amortization**

(Including Information on Listed Property)

ed Property)

OMB No 1545-0172 2009

Attachment Sequence No 6

Name(s) shown on return

► See separate instructions.

Newtown Community Development Corp

Attach to your tax return.

Identifying number 86-0793043

	ess or activity to which this form related ndirect Deprecia									
	ert I Election To Expe	ense Certain Proper any listed proper			u com	nlete P	art I			_
1	Maximum amount See the instr			'	u con	ipicio i	<u>art 1.</u>	1	250,00	0
2	Total cost of section 179 proper	•		00000				2	200/0	_
3	Threshold cost of section 179 pi		·	instructions)				3	800,00	00
4	Reduction in limitation Subtract							4	000/0	<u> </u>
5	Dollar limitation for tax year Subtract		•		see instr	uctions		5		—
6		tion of property	. 1000, 011101	(b) Cost (business us			lected cost			—
7	Listed property Enter the amou	nt from line 29			7					
8	Total elected cost of section 179		ts in column (c) lir	nes 6 and 7				8		
9	Tentative deduction Enter the s	• •	, , ,	ioo o and i				9		—
10	Carryover of disallowed deduction						,	10		—
11	Business income limitation Enti	•		ss than zero) or line	5 (500	ınstri ictior	ne)	11		_
12	Section 179 expense deduction		•	,	000)		,	12		—
13	Carryover of disallowed deduction			_	13					
	: Do not use Part II or Part III bele				_1					
		ation Allowance a			ot inc	ude list	ed prope	ertv )	(See instr.)	_
<u></u>	Special depreciation allowance				_	uuo not	od prop	5117.7	(CCC IIICII.)	—
•	during the tax year (see instruct		and that hoted pr	oporty) placed in ee				14		
15	Property subject to section 168(	•						15		—
16	Other depreciation (including AC							16	9,6	71
		ation (Do not incl	ide listed pror	erty ) (See inst	ructio	ns )			3 / 3	_
·············				ion A		10.7				_
17	MACRS deductions for assets p	laced in service in tax	vears beginning bi	efore 2009				17		0
18	If you are electing to group any asset				accounts	check her	<b>▶</b> □			<del></del>
		-Assets Placed in Se						stem		
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investmonly–see instruc	ent use	y (e) C	onvention	(f) Met	nod	(g) Depreciation deducti	on
19a	3-year property									
b	5-year property									
С	7-year property									
d	10-year property									
е	15-year property									
f	20-year property						_			
g	25-year property			25 yrs			S/L			
h	Residential rental			27 5 yrs		MM	S/L			_
	property			27.5 yrs	1	MM	S/L			_
i	Nonresidential real			39 yrs		MM	S/L	_		_
	property				1	MM	S/L			_
	Section C—	Assets Placed in Serv	rice During 2009	Tax Year Using the	Alterna	tive Depr	eciation S	Systen	n	_
20a	Class life						S/L			_
	12-year			12 yrs	1		S/L			_
	40-year			40 yrs	1	MM	S/L			_
	art IV Summary (See in	nstructions.)		, ,	•					_
21	Listed property Enter amount fr							21		_
22	Total. Add amounts from line 12		ines 19 and 20 in	column (o), and line	21. En	ter here			· · · · · · · · · · · · · · · · · · ·	_
-	and on the appropriate lines of	<del>-</del>						22	9,6	11
23	For assets shown above and pla	·	· · · · · · · · · · · · · · · · · · ·						- 7 -	_
	portion of the basis attributable	-	can one your, o		23					
F	Description A -4 No.		•• .				-		- AECO 10	

# Form 8868

(Rev April 2009)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

<ul><li>If you are</li></ul>	filing for an Automatic 3-Month Extension, complete only Part I and check this box		► X
	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this fo	rm)	
	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed		88
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed	<del>d</del> ).	
A corporation Part I only	required to file Form 990-T and requesting an automatic 6-month extension—check this box and comple	te	<b>▶</b> □
	rations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an element ax returns	xtension	of
Electronic Fil	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of	of time to	
	rns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form		
electronically	f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 88	370, grou	
returns, or a c	emposite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2	(Part II) o	f Form
8868 For mor	e details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Non	profits	
Type or print	Name of Exempt Organization	Employ	ver identification number
File by the	Newtown Community Development Corp	86-0	793043
due date for filing your	Number, street, and room or suite no If a P.O box, see instructions 511 W University Dr. #4		
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions  Tempe AZ 85281		
Check type of	return to be filed (file a separate application for each return):		
<b>X</b> Form 99			Form 4720
Form 99	·		Form 5227
Form 99			Form 6069
Form 99			Form 8870
Telephone  If the orga  If this is fo for the whole galist with the radius  I reques until 0. for the o	razation does not have an office or place of business in the United States, check this box r a Group Return, enter the organization's four digit Group Exemption Number (GEN) roup, check this box  If it is for part of the group, check this box ames and EINs of all members the extension will cover an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 2/15/11, to file the exempt organization return for the organization named above. The extension ganization's return for calendar year or ax year beginning 07/01/09, and ending 06/30/10		▶ □
3a If this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	<del> </del>	
	nonrefundable credits. See instructions	3a	<u>.</u> s
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		
	s made Include any prior year overpayment allowed as a credit	3b	\$
	Due. Subtract line 3b from line.3a Include your payment with this form, or, if required,		<del>-</del>
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment		
	See instructions	3с	s
	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88		<del>La X</del>
<del>-                                    </del>	et and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Rev 4-2009)