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Form **990-EZ****Short Form
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)

- Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
- The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury
Internal Revenue Service

OMB No 1545-1150

2010**Open to Public****Inspection****A For the 2010 calendar year, or tax year beginning , and ending****B Check if applicable**

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization**COON RAPIDS DEVELOPMENT GROUP**

Number and street (or P O box, if mail is not delivered to street address)

PO BOX 226

Room/suite

City or town, state or country, and ZIP + 4

COON RAPIDS**IA 50058****D Employer identification number****42-1493044****E Telephone number****712-999-2734****F Group Exemption Number****G Accounting Method** ☒ Cash ☐ Accrual Other (specify) ►**I Website:** ► **WWW.COONRAPIDSOWA.COM****H Check** ☐ if the organization is not required to attach Schedule B**J Tax-exempt status** (check only one) — ☐ 501(c)(3) ☒ 501(c) (**4**) (insert no) ☐ 4947(a)(1) or ☐ 527

(Form 990, 990-EZ, or 990-PF)

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,**

line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

► \$ **53,556****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	15,000
	2	Program service revenue including government fees and contracts	2	1,078
	3	Membership dues and assessments	3	26,230
	4	Investment income	4	211
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
	c	Less direct expenses from gaming and fundraising events	6c	
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances	7a	11,000
	b	Less cost of goods sold	7b	10,987
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	13
	8	Other revenue (describe in Schedule O)	8	37
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	42,569
Net Assets	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	620
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	25,487
	17	Total expenses. Add lines 10 through 16	17	26,107
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	16,462
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	98,802
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	115,264

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990-EZ** (2010)

95

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Part II Balance Sheets. (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☒

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	31,112	22	57,574
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	67,690	24	57,690
25 Total assets	98,802	25	115,264
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	98,802	27	115,264

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☒

What is the organization's primary exempt purpose?

SEE SCHEDULE O

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28 EXPENDITURES WERE MADE IN ORDER TO PROVIDE ATTRACTIVE AND AFFORDABLE SITES FOR RESIDENTIAL DEVELOPMENT.		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	694
29 TO ASSIST IN THE ECONOMIC DEVELOPMENT OF COON RAPIDS, IA AND THE SURROUNDING AREAS. THIS SERVES TO ENHANCE AND PROMOTE THE COMMUNITY AS AN ATTRACTIVE AND PROSPEROUS PLACE TO LIVE AND DO BUSINESS.		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	5,098
30 SEE SCHEDULE O		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	5,904
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	9,953
32 Total program service expenses (add lines 28a through 31a)	32	21,649

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MARK THOMAS 131 290TH STREET COON RAPIDS IA 50058	PRESIDENT 10.00	0	0	0
BRAD HONOLD 123 HICKORY LANE COON RAPIDS IA 50058	VICE PRES 1.00	0	0	0
ELIZABETH GARST 1313 FIG AVENUE COON RAPIDS IA 50058	TREASURER 2.00	0	0	0
RON BROWER 616 3RD AVENUE COON RAPIDS IA 50058	DIRECTOR 0.00	0	0	0
ROGER CLAYBURG 889 5TH AVENUE COON RAPIDS IA 50058	DIRECTOR 0.00	0	0	0
CHAD LEIGHTY 728 6TH AVENUE COON RAPIDS IA 50058	DIRECTOR 0.00	0	0	0
CHARLES NIXON 304 GILBERT STREET COON RAPIDS IA 50058	DIRECTOR 0.00	0	0	0
JOEL ROETMAN 30435 335TH STREET COON RAPIDS IA 50058	DIRECTOR 0.00	0	0	0
JOHN WADDLE 30531 335TH STREET COON RAPIDS IA 50058	DIRECTOR 0.00	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V)Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 40a , section 4912 40a , section 4955 40a		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40c		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 40d		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41 List the states with which a copy of this return is filed 41		
42a The organization's books are in care of MARK THOMAS Telephone no 712-684-7771		
131 290TH STREET		
Located at COON RAPIDS IA ZIP + 4 50058		
b 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)?		X
If "Yes," enter the name of the foreign country 42b		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U S ?		X
If "Yes," enter the name of the foreign country 42c		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
c Did the organization receive any payments for indoor tanning services during the year?		X
d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d		

- 45** Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?
- a** Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)
- 46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
45		X
45a		X
46		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization a section 527 organization?
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

	Yes	No
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 **▶** _____

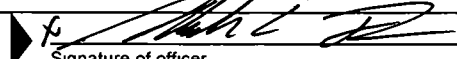
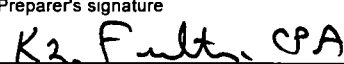
- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 **▶** _____

- 52** Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A **▶** ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer 		Date 5/9/11	
	Type or print name and title MARK THOMAS		PRESIDENT	
Paid Preparer Use Only	Print/Type preparer's name KARLA L FULTON		Preparer's signature 	Date 05/09/11
	Firm's name OLSEN, MUHLBAUER & CO., L.L.P.		Check <input type="checkbox"/> if self-employed	PTIN P00076368
	Firm's address P.O. BOX 545 CARROLL, IA 51401		Firm's EIN 42-0950074	Phone no 712-792-4314

May the IRS discuss this return with the preparer shown above? See instructions **▶** ☐ Yes ☐ No

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010**Open to Public
Inspection**

Name of the organization

COON RAPIDS DEVELOPMENT GROUP

Employer identification number

42-1493044**FORM 990-EZ, PART I, LINE 8 - OTHER REVENUE**

DESCRIPTION	AMOUNT
MISCELLANEOUS	\$ 37
TOTAL	\$ 37

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES

DESCRIPTION	AMOUNT
SALE OF SUBDIVISION LOTS	
PROPERTY TAXES	\$ 694
	\$ 0
COMMUNITY BEAUTIFICATION	
ADVERTISING	\$ 38
CONTRACTED SERVICES	\$ 4,500
HWY 141 SIGNAGE	\$ 5,415
	\$ 0
COMMUNITY SPIRIT	
ADVERTISING	\$ 1,734
ART PROJECT EXPENSES	\$ 838
COMMUNITY PROMOTION	\$ 1,835
DONATION - 4TH OF JULY	\$ 300
DONATION - WHITEROCK	\$ 250
ORGANIZATION MEMBERSHIP	\$ 100
POSTAGE & FREIGHT	\$ 29
SUPPLIES & MATERIALS	\$ 818
	\$ 0

Name of the organization

COON RAPIDS DEVELOPMENT GROUP

Employer identification number

42-1493044**ECONOMIC DEVELOPMENT**

ORGANIZATION MEMBERSHIP	\$	500
LOCAL BUSINESS GRANT	\$	1,726
PRINTING	\$	1,909
WEB SITE HOSTING	\$	875
WEB SITE CALENDAR	\$	88

EXPENSES

BOOKKEEPING EXPENSE	\$	941
LIABILITY INSURANCE	\$	792
OFFICE SUPPLIES	\$	73
POSTAGE & FREIGHT	\$	52
PO BOX RENTAL	\$	56
STAFF SUPPORT	\$	1,413
TELEPHONE/FAX	\$	511
TOTAL	\$	25,487

FORM 990-EZ, PART II, LINE 24 - OTHER ASSETS

DESCRIPTION	BEG. OF YEAR	END OF YEAR
INVENTORIES FOR SALE OR USE	\$ 67,690	\$ 57,690
TOTAL	\$ 67,690	\$ 57,690

FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE

CRDG HAS BEEN ORGANIZED TO ASSIST IN ECONOMIC DEVELOPMENT OF COON RAPIDS, IA AND SURROUNDING AREAS. FUNDS ARE USED TO PROMOTE THE COMMUNITY AND MAKE IT AN ATTRACTIVE AND PROSPEROUS PLACE TO LIVE AND DO BUSINESS.

TO FURTHER THEIR GOALS, CRDG IS PROVIDING ATTRACTIVE, AFFORDABLE SITES FOR RESIDENTIAL DEVELOPMENT; PROVIDING FOR COMMUNITY BEAUTIFICATION; AND

Name of the organization

COON RAPIDS DEVELOPMENT GROUP

Employer identification number

42-1493044

PROMOTING COMMUNITY SPIRIT THROUGH VARIOUS EVENTS AND PROJECTS THROUGHOUT THE YEAR.

FORM 990-EZ, PART III, LINE 30 - THIRD ACHIEVEMENT

PROMOTION OF COMMUNITY SPIRIT THROUGH VARIOUS ANNUAL EVENTS AND PROJECTS.

THESE INCLUDE HOLIDAY CELEBRATIONS (EASTER, 4TH OF JULY, CHRISTMAS, ETC.);

ART FAIR; GOLF OUTING; COMMUNITY WIDE GARAGE SALE; FARMERS MARKET; RUN/WALK

COMPETITION; BUS TOURS; WELCOME WAGON & OTHER COMMUNITY CELEBRATIONS.

FORM 990-EZ, PART III, LINE 31 - ALL OTHER ACHIEVEMENTS

PROVIDE FOR COMMUNITY BEAUTIFICATION IN ORDER TO PROMOTE THE COMMUNITY AND

MAKE IT AN ATTRACTIVE PLACE TO LIVE AND DO BUSINESS.

Federal Statements**Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments**

<u>Description</u>	<u>Amount</u>
MEMBERSHIP DUES	\$ <u>26,230</u>
TOTAL	\$ <u><u>26,230</u></u>