Form, 990-PF

# Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545 0047

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs gov/Form990PF for instructions and the latest information

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For cal	endar year 2019 or tax year beginning	, 2019	, and ending	51	<del> </del>
BUCK	RAPIDS AREA DEVELOPMENT FOU	INDATION: CF	IVED	Employer identification nul 42-1293260	mber
411	IST AVENUE P.O. BOX 403	MDAT TOWN	IOI IR	Telephone number (see insi	tructions)
	RAPIDS, IA 51246-0403	ا ما	1201	712-472-4585	
	1111 220, 211 022 10 0 100	9208 APR 2	6 2021 G	If exemption application is	nonding check have
G Che	eck all that apply Initial return	Initial return of a form	Soc public charts		
G Cite	Final return	Amended @@DE	ner publication D	1 Foreign organizations, cher	ck here 🕨 📘
	Address change	Name change	-111	2 Foreign organizations mee	ling the 85% test, check
H Che		1(c)(3) exempt private f	foundation AA	here and attach computation	
n Cile	Section 4947(a)(1) nonexempt charitable		foundation ()4.   private foundation   E	If provide foundation status	Lune terminated
1 Fair				If private foundation status under section 507(b)(1)(A)	
	n Part II, column (c), line 16)	counting method XC	<b>□</b>		
► s	· · · · · · · · · · · · · · · · · · ·	column (d), must be on	rash hasis 7   F	If the foundation is in a 60 under section 507(b)(1)(8)	
Part I	Analysis of Revenue and	Column (a), mast be on t	Casir basis /	Index section 307(b)(1)(b)	<u> </u>
Tarti	Expenses (The total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
	Expenses (The total of amounts in columns (b), (c), and (d) may not	expenses per books	income	income	purposes
	necessarily equal the amounts in				(cash basis only)
	column (a) (see instructions))  1 Contributions, grits, grants, etc., received (attach schedule)	129,436.			<del> </del>
	2 Check ► If the foundation is not required to attach Sch B				<u> </u>
	in the restriction is not required to attach sell b			<del> </del>	,
	3 Interest on savings and temporary cash investments.	6,048.	6,048.		
	4 Dividends and interest from securities				
	5 a Gross rents b Net rental income 1 0 0 1 0	20,793.	20,793.		
	or (loss) 19,010.				
d)	6 a Net gain or (foss) from sale of assets not on line 10. b Gross sales price for all				
Revenue	assets on line 6a				
<u>ā</u>	7 Capital gain net income (from Part IV line 2) 8 Net short term capital gain				
ยู	9 Income modifications				
Œ	10 a Gross sales less				1
	returns and allowances				!
	b Less Cost of goods sold				
	C Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	SEE STATEMENT 1	-1,042.	-16,752.		<b> </b>
	12 Total Add lines 1 through 11	155, 235.	10,089.	0.	· · · · · · · · · · · · · · · · · · ·
	13 Compensation of officers, directors trustees, etc	0.			
χχ	14 Other employee salaries and wages				
<b>K</b>	15 Pension plans employee benefits  16a Legal (ses (attach schedule) SEE ST 2				
Expenses	100 cogo roos (arrocaro)	600.	450.		150.
û	b Accounting fees (attach sch)				
Š	C Other professional fees (attach sch)	06 010	00.104		6 700
É	17 Interest 18 Taxes (attach schedule)/see instrs) SEE STM 3	26, 912.	20,184.		6,728.
Ë	18 Taxes (attach schedule)(see instrs) SEE SIM 3 19 Depreciation (attach	4,666.	3,500.		1,166
·돌	schedule) and depletion				
<b>'</b> Ē	20 Occupancy		<u> </u>		<del></del>
₫	21 Travel, conferences, and meetings				
þ	22 Printing and publications				.,
ᇤ	23 Other expenses (attach schedule)	7 155	4 100		1 073
ğ	SEE STATEMENT 4	7,155.	4,198.		1,073
Operating and Administrative	24 Total operating and administrative expenses Add lines 13 through 23	39,333.	28,332.		9,117.
<u>8</u>	25 Contributions, gifts, grants paid	33,333.	20,002.		3,227.
ğ	26 Total expenses and disbursements				
<u> </u>	Add lines 24 and 25	39,333.	28,332	0.	9,117
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	115,902.			į
	b Net investment income (if negative, enter 0)	110,502.	0.	-	<del></del> 1
	C Adjusted net income (if negative, enter 0)	· ··	<u> </u>	0	<u> </u>
		L	<u> </u>		<u> </u>

BAA For Paperwork Reduction Act Notice, see instructions.

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orm 990-PF (2019)



Par	t   Balance Sneets column should be for end of year		Attached schedules and amounts in the description column should be for end of year amounts only			End of year		
1 41		Datatice Officers	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash — non-interest	-bearing	346,851.	487,722	2. 487,722.		
	2	Savings and tempor	ary cash investments					
	3	Accounts receivable	<b>&gt;</b>			•		
		Less allowance for	doubtful accounts					
	4	Pledges receivable	<b></b>					
		Less allowance for	doubtful accounts •					
	5	Grants receivable			_			
	6	Receivables due from offic disqualified persons (attac	ers, directors, trustees, and other ch schedule) (see instructions)					
	7	Other notes and loans rec	ervable (attach sch)			•		
		Less allowance for	doubtful accounts		-			
	8	Inventories for sale	or use					
	9	Prepaid expenses a	nd deferred charges					
Assets	10 a	a Investments – U S. obligations (attach s	and state government chedule)					
Š	l t	o Investments — corporate	stock (attach schedule)					
~		: Investments — corporate	· ,					
	11	Investments – land, equipment basis	<b>-</b> 1,306,243.		•			
		Less accumulated deprec (attach schedule)	SEE STMT 5 -	654,023.	1,306,243	3. 1,915,280.		
	12	Investments - morto	gage loans					
	13	Investments - other	(attach schedule)					
	14	Land, buildings, and			· · · · · · · · · · · · · · · · · · ·	· ·		
		Less accumulated deprect (attach schedule)	<b>•</b>					
			be ► SEE STATEMENT 6	1,032,051.	728,521	728,521.		
	16		completed by all filers — Also, see page 1, item I)	2,032,925.	2,522,486	3,131,523.		
	17	Accounts payable ar	nd accrued expenses			1		
	18	Grants payable						
83	19	Deferred revenue		·		l l		
<u>:2</u>	20	Loans from officers, direct	ors, trustees, & other disqualified persons		-			
Liabilities	21	Mortgages and other notes	payable (attach schedule)	632,004.	1,005,663	3.		
Ξ.	22	Other liabilities (desc	cribe • ) [			<u> </u>		
	23	Total liabilities (add		632,004.	1,005,663	3.		
ances		Foundations that fol and complete lines 2	low FASB ASC 958, check here ► X 24, 25, 29, and 30.					
3alaı	24	Net assets without d	onor restrictions	872,455.	1,008,611	.		
豆	25	Net assets with dono	r restrictions	528,466.	508,212	2.		
Net Assets or Fund Bal		Foundations that do rand complete lines 2	not follow FASB ASC 958, check here P		•			
ō	26	•	rincipal, or current funds					
윙	27		or land, bldg , and equipment fund					
SS	28		plated income, endowment, or other funds			. 1		
£ A	29	Total net assets or f	und balances (see instructions)	1,400,921.	1,516,823	3.		
$\frac{2}{2}$	30		net assets/fund balances			1		
Dar	  -	(see instructions)	ges in Net Assets or Fund Balance	2,032,925.	2,522,486	)		
		-						
1			alances at beginning of year – Part II, colui I on prior year's return)	mn (a), line 29 (must aq	gree with	1,400,921.		
2		r amount from Part I,	, ,					
		increases not included in hi			-4			
		lines 1, 2, and 3						
		ases not included in line 2 (	itemize) 🟲					
			lances at end of year (line 4 minus line 5)	- Part II, column (b). I				
DAA			, , , , , , , , , , , , , , , , , , , ,			F 000 PF (2010)		

(a) List and describ	d Losses for Tax on Investmen be the kind(s) of property sold (for examp warehouse, or common stock, 200 sh	le, real estate, (b	P — Purchase D — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A			5 5011011011		
b					
С					
d					
e				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or ((e) plus (f) m	
<u>a</u>					
b		· · · · · · · · · · · · · · · · · · ·			<del></del>
d					
e				<del></del>	
	ving gain in column (h) and owned by the	foundation on 12/31/69		40.0	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(I) Gains (Col ain minus col (k), b an -0 ) or Losses (fr	ut not less
a				<del></del> -	
b					
С					
d					
е					
2 Capital gain net income or (	(net capital loss) — If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain	or (loss) as defined in sections 1222(5)	) and (6)			
If gain, also enter in Part I, in Part I, ine 8	line 8, column (c) See instructions If	(loss), enter -0-	3		
Part V Qualification Und	der Section 4940(e) for Reduce	d Tax on Net Investme	nt Income		
If 'Yes,' the foundation doesn't qu	e this part blank section 4942 tax on the distributable at alify under section 4940(e). Do not cor in each column for each year, see the ins	mplete this part	·	Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset		<b>(d)</b> Distribution (col (b) divided	
2018	224,517.	2,763,	685		0.081238
2017	163,443.	2,529,			0.064622
2016	216,511.	2,964,			0.073039
2015	881,706.	2,547,	245.	•	0.346141
2014	134,306.	1,769,	984.		0.075880
2 Total of line 1, column (d)			2		0 640000
• • • • • • • • • • • • • • • • • • • •					0 640920
3 Average distribution ratio for t number of years the founda	he 5-year base period — divide the total o tion has been in existence if less than	n line 2 by 5 0, or by the 5 years	3		0.128184
4 Enter the net value of nonch	naritable-use assets for 2019 from Part	X, line 5	4	3	,077,301.
5 Multiply line 4 by line 3			5		394,461.
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		394,461.
8 Enter qualifying distributions	s from Part XII, line 4		8		706,408.
If line 8 is equal to or greater					

BAA		For	m 990	PE (2)	0191
10 Did any persons become substantial contributors during the tax year? If 'Yes,' all and addresses	tach a schedule listing their names		10	Ì	Х
9 Is the foundation claiming status as a private operating foundation within t for calendar year 2019 or the tax year beginning in 2019? See the instruct	ions for Part XIV If 'Yes,' complete f	+942(J)(5) Part XIV	9		X
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990 PF to the Attor (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation	•		8 Ь	Х	<u></u>
IA					
Ba Enter the states to which the foundation reports or with which it is registered. Se	, , , , , ,	}	<del>'.</del> +	_X	<u> </u>
with the state law remain in the governing instrument?  7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete		}	6 7	X	
By state legislation that effectively amends the governing instrument so that n	o mandatory directions that conflict			-,,	
<ul> <li>6 Are the requirements of section 508(e) (relating to sections 4941 through 4</li> <li>By language in the governing instrument, or</li> </ul>	+945) satistied either		-		
If 'Yes,' attach the statement required by <i>General Instruction T</i> 6. Are the requirements of section 508(a) (relating to sections 4941, through to sections 4941).	1045) caticfied aither				1
Was there a liquidation, termination, dissolution, or substantial contraction during the year?		ļ	5		<u>X</u>
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		[	4 b	N	
4 a Did the foundation have unrelated business gross income of \$1,000 or mo-	re during the year?		4 a		X
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a	conformed copy of the changes	ļ	3		<u>X</u>
If 'Yes,' attach a detailed description of the activities  3 Has the foundation made any changes, not previously reported to the IRS, in its	governing instrument articles				
2 Has the foundation engaged in any activities that have not previously been	reported to the IRS?	ļ	2		X
e Enter the reimbursement (if any) paid by the foundation during the year for polit foundation managers ►\$  0.	ical expenditure tax imposed on				
(1) On the foundation $\Rightarrow$ 0. (2) On foundation		0.			
<ul> <li>c Did the foundation file Form 1120-POL for this year?</li> <li>d Enter the amount (if any) of tax on political expenditures (section 4955) in</li> </ul>	posed during the year	-	1 c		X
or distributed by the foundation in connection with the activities	copies of any materials paolished	_			
See the instructions for the definition  If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and	copies of any materials published		1 b		<u> </u>
b Did it spend more than \$100 during the year (either directly or indirectly) for poli	tical purposes?	}			
1 a During the tax year, did the foundation attempt to influence any national, sparticipate or intervene in any political campaign?	state, or local legislation or did it		1 a	Yes	No X
Part VII-A   Statements Regarding Activities					
11 Enter the amount of line 10 to be Credited to 2020 estimated tax	Refunded ►	11		·	
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>-</b>	10			_ <u></u> -
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			0.
_	form 2220 is attached	8			<del></del>
7 Total credits and payments Add lines 6a through 6d		7			0.
d Backup withholding erroneously withheld	6 d				- 1
c Tax paid with application for extension of time to file (Form 8868)	6 c				1
b Exempt foreign organizations — tax withheld at source	66				
6 Credits/Payments a 2019 estimated tax pymts and 2018 overpayment credited to 2019	6a				
5 Tax based on investment income. Subtract line 4 from line 3. If zero or le	ss, enter -0-	5			0
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for	. ,,	4			0.
3 Add lines 1 and 2		3			0
foundations only, others, enter -0-)		2			0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	_				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	Part I, line 12, col (b)				
check here. $\blacktriangleright$ $\boxed{X}$ and enter 1% of Part I, line 27b	`'	<del>'</del>			<del>- '                                   </del>
Date of ruling or determination letter (attach copy of letter if nece b Domestic foundations that meet the section 4940(e) requirements in Part		1			^
<b>□</b>	L				
Part VI Excise Tax Based on Investment Income (Section 4940 1 a Exempt operating foundations described in section 4940(d)(2), check here	(a), 4940(b), 4940(e), or 4948 — see i	nstruction:	s)		<del></del>
Part VI - I EVOICO TOV ROCCE ON INVOCEMENT INCOMO 10					

TEEA0304L 08/22/19

Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application.  Website address	7 13	Х	
14		2- <u>472-2</u>	<u>669</u>	-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here and enter the amount of tax-exempt interest received or accrued during the year	N/A	<u> </u>	N/A
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.			
Par	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1.	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X	No		'
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $X$	No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\overline{X}$	No		•
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X	No	,	
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )  Yes	No		
t	b If any answer is 'Yes' to 1a(1)—(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance, check here			1
c	buld the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )		•	
ā	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?  If 'Yes,' list the years > 20 _ , 20 _ , 20 _ , 20	No		
	<del></del>			
t	o Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer 'No' and attach statement — see instructions.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	2 b	N.	/A
	► 20 , 20 , 20			
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X	No	,	
t	of If 'Yes,' did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to	_		
,	determine if the foundation had excess business holdings in 2019 )	3 b	N	/ A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Χ
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4 b		X
			لـــــا	<u></u>

Form 990-PF (2019) ROCK RAPIDS AREA I Part VII-B   Statements Regarding Activit			42- uired (continue	129326 d)	0	Page 6	
5 a During the year, did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt	•	in (section 4945(e))?	Yes	X No	Yes	No I	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registro	ation drive?	•	Yes	X No			
(3) Provide a grant to an individual for travel,	•	, ,	Yes	X No			
in section 4945(d)(4)(A)? See instructions	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions  Yes						
(5) Provide for any purpose other than religio educational purposes, or for the prevention	on of cruelty to children	or animals?	Yes	X No			
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a See instructions			ptions	_	5b N	N/A	
Organizations relying on a current notice rega	irding disaster assistant	ce, check here	•				
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reqi	sibility for the grant?	•	N/A Yes	No			
6 a Did the foundation, during the year, receive at on a personal benefit contract?		• •	rs Yes	ΧNο			
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	efit contract?		6 b	X	
7 a At any time during the tax year, was the found				XNo			
<ul><li>b If 'Yes,' did the foundation receive any procee</li><li>8 Is the foundation subject to the section 4960 tax of</li></ul>	•			N/A	7 b	+ 1	
or excess parachute payment(s) during the ye	ear?		Yes	ΧNο			
Part VIII Information About Officers, D and Contractors				d Emplo	oyees,		
1 List all officers, directors, trustees, and found	(b) Title, and average	(c) Compensation. See	(d) Contributions	to T			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee bene plans and deferr compensation	fit (e) E	xpense aco ther allowa		
SEE_STATEMENT 7							
		0.		o.		0.	
2 Compensation of five highest-paid employees (or		on line 1 – see instructio					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee bene plans and deferr compensation	fit (e)E	xpense aco ther allowa	count, ances	
NONE							
Total number of other employees paid over \$50,000	)		<u> </u>	•		0	

697,291

Form 990-PF (2019)

Total. Add lines 1 through 3

BAA

Part X   Minimum Investment Return (All domestic foundations must complete this part F see instructions )	oreign fo	oundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1 a	
b Average of monthly cash balances	1 b	480,362.
c Fair market value of all other assets (see instructions)	1 c	2,643,801.
d Total (add lines 1a, b, and c)	1 d	3,124,163.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	)	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	3,124,163.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	46,862.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,077,301.
6 Minimum investment return. Enter 5% of line 5	6	153,865
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here ► and do not complete this part.)		ındations
1 Minimum investment return from Part X, line 6	1	153,865.
2 a Tax on investment income for 2019 from Part VI, line 5		
b Income tax for 2019 (This does not include the tax from Part VI)	-	
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	153,865
4 Recoveries of amounts treated as qualifying distributions	4	100,000
5 Add lines 3 and 4	5	153,865
6 Deduction from distributable amount (see instructions)	6	133,003
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	153,865.
		133,603.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1 a	9,117.
b Program-related investments — total from Part IX-B	1 b	697,291.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	706,408
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	706,408.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the figure qualifies for the section 4940(e) reduction of tax in those years	oundation	

BAA

# Part XIII Undistributed Income (see instructions)

			(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1	Distributable amount fo	r 2019 from Part XI,				150.055
2	line 7 Undistributed income, if any,	as of the end of 2010				153,865.
	Enter amount for 2018	i			0.	
	Total for prior years 20	· ·		0.	0.	<u> </u>
	Excess distributions carryover			<u> </u>		
	From 2014	, ii dily, to 2013				]
	From 2015	753,726.				1
	From 2016	68,563.				1
-	From 2017	36,981.				
	From 2018	86,333.				
f	Total of lines 3a through		945,603.			
	Qualifying distributions	L	313,003.			j
	XII, line 4 > \$	706,408.				Ì
	Applied to 2018, but no				0.	
	• •	-				j
В	Applied to undistributed (Election required - se			0.		
С	Treated as distributions (Election required — se		0.			
d	Applied to 2019 distribu	ıtable amount				153,865.
е	Remaining amount dist	ributed out of corpus	552,543.			
	Excess distributions carryover (If an amount appears same amount must be	in column (d), the	0.			0.
6	Enter the net total of ea	ach column as				
а	Corpus Add lines 3f, 4c, and	4e Subtract line 5	1,498,146.			
	Prior years' undistribute	ed income Subtract		0		_
	Enter the amount of pre	or years' undistributed		<u> </u>		
	income for which a noti been issued, or on which tax has been previously	ce of deficiency has the section 4942(a)		0.		
d	Subtract line 6c from linamount – see instruction			0.		
	Undistributed income for 2018 line 2a Taxable amount — se				0.1	
	10 011100111 00				0.	
	Undistributed income fo 4d and 5 from line 1 Tl distributed in 2020					0.
	Amounts treated as dis					<del></del>
	corpus to satisfy requiren section 170(b)(1)(F) or 49 may be required – see	942(g)(3) (Election	0.			
	Excess distributions car	· · · · · · · · · · · · · · · · · · ·		·		i
	applied on line 5 or line		0			
	Excess distributions ca Subtract lines 7 and 8 f	rom line 6a	1,498,146.			
	Analysis of line 9					1
	Excess from 2015	753,726.				
	Excess from 2016	68,563.				·
	Excess from 2017	36,981.				
	Excess from 2018	86,333.				
ę	Excess from 2019	552,543.				

BAA

Form 990-PF (2019) ROCK RAPIDS AREA	DEVELOPMENT	FOUNDATION		42-129,3260	) Page <b>10</b>
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or det is effective for 2019, enter the date of the	ruling .	, ,			
<b>b</b> Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for each year listed	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	
<b>b</b> 85% of line 2a					
<ul> <li>Qualifying distributions from Part XII, line 4, for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c 'Support' alternative test - enter		_			
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(8)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during the	ne year – see in	part only if the structions.)	foundation had :	\$5,000 or more	ın
1 Information Regarding Foundation Mana a List any managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more th	an 2% of the total co than \$5,000) (See s	ntributions received by section 507(d)(2) )	y the foundation befo	ore the
<b>b</b> List any managers of the foundation who ow	n 10% or more of the	stock of a corporation	or an equally large	portion of the owner	ship of
a partnership or other entity) of which the NONE	foundation has a 10	0% or greater intere	st		·
2 Information Regarding Contribution, Grant,	Gift Loan Scholarsh	in etc Programs:			
Check here  ☐ If the foundation only m requests for funds. If the foundation make	akes contributions to	preselected charitable	_		
2a, b, c, and d See instructions  a The name, address, and telephone number of	or email address of the	nerson to whom and	nlications should be a		
a the hame, address, and telephone humber to	or critain address or the	s person to whom app	oncations should be at	30103300	
SEE STATEMENT 9					
<b>b</b> The form in which applications should be	submitted and infor	mation and material	s they should include	e	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geograp	nical areas, charitab	ole fields, kinds of in	stitutions, or other	factors
SEE STATEMENT FOR LINE 2A					

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		N/A Amount		
Name and address (home or business)	or substantial contributor	recipient	SS. III I DUILOIT			
Name and address (home or business)  a Paid during the year	or substantial contributor	recipient	CONTIDUTION			
Total			► 3a			
b Approved for future payment  Total			▶ 3b			

	XVI-A   Analysis of Income-Producin			_		
Enter	gross amounts unless otherwise indicated	Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)
1	Drogram convers roversus	(a) Business code	<b>(b)</b> Amount	(c) Exclu	<b>(d)</b> Amount	Related or exempt function income (See instructions)
	Program service revenue			code		
a						<del>-</del>
b c				<del></del>		
ď						
e						
f				+		
ď	Fees and contracts from government agencies			+		
	Membership dues and assessments					·
	Interest on savings and temporary cash investments			14	6,048.	
	Dividends and interest from securities			1 1	0,040.	
5	Net rental income or (loss) from real estate					
а	Debt-financed property					
ь	Not debt-financed property			16	19,818	
6	Net rental income or (loss) from personal property				<u> </u>	
7	Other investment income			18	-16,752.	
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events			1	13,826	
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					•
а						
b <sub>.</sub>						
c .						
d <sub>.</sub>					-	
		I I				
12 e	Subtotal Add salumas (b) (d) and (a)	+ +			00.040	
12	Subtotal Add columns (b), (d), and (e)				22,940	22 040
12 13	Total. Add line 12, columns (b), (d), and (e)	ations )			22,940	22,940.
12 13 (See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated		shment of Exem		13 -	22,940.
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to t	he Accompli		pt Purpo	oses	
12 13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to t	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemption of the second in the s	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the No. Explain below how each activity for which	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemption of the second in the s	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemption of the second in the s	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemption of the second in the s	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemptions.	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
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12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemptions.	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemptions.	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
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12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemptions.	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
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12 13 (See Part	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B   Relationship of Activities to to No.   Explain below how each activity for which accomplishment of the foundation's exemption of the second s	he Accompli	orted in column (e) of	pt Purpo	DSes A contributed important	v to the
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# Form 990-PF (2019) ROCK RAPIDS AREA DEVELOPMENT FOUNDATION 42-1293260 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

	<del></del>								
describe	organization directly or in ed in section 501(c) (other to political organizations	er than section 50	in any of the following	with any o or in section	ther organizatio on 527,	ก		Yes	No
-	rs from the reporting four		haritable exempt organ	uzation of					
(1) Cas		modition to a more	maritable exempt organ				1 a (1)		<u>X</u>
` '	er assets						1 a (2)		_ <u>^</u> _
	ansactions						14 (2)		
	es of assets to a nonchar	ritable exempt or	ganization				1 b (1)		X
	chases of assets from a	•	=				1 b (2)		X
` ' _	tal of facilities, equipmen						1 b (3)		X
, ,	nbursement arrangemen	•	•				1 b (4)		X
` '	ns or loan guarantees						1 b (5)		X
	formance of services or r	membership or fu	ndraising solicitations				1 b (6)	Х	
` '	of facilities, equipment,	•	•	ovees			1 c	X	
<b>d</b> If the ar the good any tran	nswer to any of the above s, other assets, or services saction or sharing arran	e is 'Yes,' comple s given by the repo gement, show in	ete the following schedu orting foundation If the fo column (d) the value of	ile Columi oundation re the goods	n <b>(b)</b> should alw eceived less than s, other assets,	vays show the fair r n fair market value in or services receive	narket val		
(a) Line no	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d)	Description of tran	sfers, transactions, and	sharing arrar	gement	<u> </u>
1B(6)	0.R.I	R. DEVELOPM	ENT CORP.	THE R	RADF AND I	RRDC OPERATE	FROM 1	THE	
						CE, BOTH ORG			
				ARE A	BLE TO UT	ILIZE THE TA	LENTS C	F T	HE
				CITY'	S ECONOMIC	C DEVELOPMEN'	T DIREC	CTOR	
						ry office equ		_	
						COST AND BO			
			·	1		OVERSEEN BY D		ALL	<u>Y</u>
						OF DIRECTOR:			
1C	0.R.I	R. DEVELOPM	ENT CORP.		RESPONSE A	AS TO LINE N	<u>UMBER</u>		
				<u>1B(6)</u>					
		<del> </del>							
				<del> </del>					
describe	undation directly or indirect d in section 501(c) (other complete the following s	er than section 50	or related to, one or more 11(c)(3)) or in section 52	tax exemp 27?	nt organizations		XYes		No
	Name of organization	Jeriodale	(b) Type of organization	on	(c	) Description of rela	ationship		
SEE STATE	•		<u></u>			,	•		
		-							
				-		<del></del>			
Under p	enalties of perjury, I declare that and complete. Declaration of pre-	I I have examined this	return including accompanying	schedules an	d statements, and to	the best of my knowledge	e and belief, i	is true	
Sign Here	and complete occuration of pre	eparer (other than taxp			PRESIDENT	icoge	May the I this return preparer See instru	n with thi shown b	e
Signa	ture of officer or trustee		Date	Tı	tle		X	Yes	No
	Print/Type preparer's name		Preparer's signature		Date	Check	PTIN		
Paid	RUSSELL FORRES	T			9/10/20	self employed	P01916	641	
Preparer	Firm's name DE N			PC		Firm's EIN ► 20-3	310024		
Jse Only	Firm's address 121	S STORY ST							
	ROCK	K RAPIDS, I	A 51246			Phone no 712-	472-254		
BAA							Form <b>99</b> 0	)-PF (	2019)

#### Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www irs gov/Form990 for the latest information.

OMB No 1545 0047

Employer identification number

2019

ROCK RAPIDS AREA DEVELOPMENT FOUNDATION 42-1293260  Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
Form 990-PF	527 political organization						
	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
•	ered by the <b>General Rule</b> or a <b>Special Rule</b> .  ), (8), or (10) organization can check boxes for both the General Rule and a S	special Rule See instructions					
Special Rules							
under sections 509(a) received from any or	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, linguistic contributor, during the year, total contributions of the greater of (1) \$5,000 line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	ne 13, 16a, or 16b, and that					
during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recest contributions of more than \$1,000 exclusively for religious, charitable, scient prevention of cruelty to children or animals. Complete Parts I, II, and III						
during the year, con \$1,000 If this box is charitable, etc., purp	described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that receitributions exclusively for religious, charitable, etc., purposes, but no such conscienced, enter here the total contributions that were received during the year pose. Don't complete any of the parts unless the <b>General Rule</b> applies to this issively religious, charitable, etc., contributions totaling \$5,000 or more during the second secon	tributions totaled more than or for an <i>exclusively</i> religious, organization because					

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF,

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of org			Employer identification	number
	RAPIDS AREA DEVELOPMENT FOUNDATION		42-1293260	
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional s	pace is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	Type of	(d) contribution
1	JAMES W. AND ELLA B. FORSTER TRUST	-	Person Payroll	X
	C/O FRONTIER BANK PO BOX 551	\$70	<u>, 345</u> Noncash	
	ROCK RAPIDS, IA 51246	_		Part II for ontributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	Type of	(d) contribution
2	ROCK RAPIDS MUNICIPAL UTILITIES	-	Person Payroll	X
	310 S 3RD AVENUE	\$5	<u>,000</u> . Noncash	
	ROCK RAPIDS, IA 51246	-	(Complete noncash c	Part II for ontributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	Type of	(d) contribution
3	ROCK RAPIDS DEVELOPMENT CORPORATION	-	Person Payroll	X
	411 MAIN ST.	\$53	,991. Noncash	
	ROCK RAPIDS, IA 51246	-	(Complete noncash c	Part II for ontributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	Type of	(d) contribution
	 		Person Payroll	
		\$	Noncash	
		-	(Complete	Part II for ontributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	Type of	(d) contribution
	<del></del>	-	Person Payroll	
		\$	Noncash	
			(Complete noncash co	Part II for ontributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	Type of	(d) contribution
			Person	
			Payroll	
		-	Noncash	
		]	(Complete	Part II for ontributions )

1 Page **2** 

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

ROCK RAPIDS AREA DEVELOPMENT FOUNDATION

1 1 Pa

42-1293260

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
ВАА	Sche	dule B (Form 990, 990-EZ	, or 990-PF) (2019)

Employer identification number

Part III*	Exclusively religious, charitable, e		nizations	42 1293200				
<u>i arting</u>	or (10) that total more than \$1,000 for t	he year from any one contrib	hutor Comple	described in Section 501(c)(/), (8),				
	the following line entry For organizations c	ompleting Part III, enter the tot:	al of exclusive	ely religious, charitable, etc				
	contributions of \$1,000 or less for the year	(Enter this information once S	ee instruction	ns) \$N/A				
	Use duplicate copies of Part III if additional	space is needed	00 111511 401101	~				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	N/A							
		{						
		{- <b></b>						
		{- <b></b>						
		(e)	-					
		(e) Transfer of gift						
	Transferee's name, addres	ss, and ZIP + 4	Rela	ationship of transferor to transferee				
	L							
	<b></b>	· <del></del>	<b></b>	<del></del>				
(a)	_ (b)	(c) Use of gift		(d)				
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held				
, 4111		-						
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				<del></del>				
	<b> </b>							
		(2)						
		(e) Transfer of gift						
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee					
	<del></del>	·						
(a)	(b)	(c)		(d)				
(a) No. from	(b) Purpose of gift	(c) Use of gift		Description of how gift is held				
Part I								
	<b></b>							
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			<b></b> .	<b></b>				
		(e) Transfer of gift						
	Transferee's name, addres		Rela	itionship of transferor to transferee				
	<u> </u>		<b>-</b>					
	<u> </u>							
	<b></b>		<b></b>					
(a)	(b)	(c)		(q)				
(a) No. from	Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
Part I								
	<b> </b>	<del>-</del>		<b></b>				
		<b></b>						
	L							
		<u></u>		<u> </u>				
		(e) Transfer of gift						
	Transferee's name, addres		Rela	itionship of transferor to transferee				
	Transfered 5 frame, dudies		11,010					
	<b> </b>							
	<b></b>	<b>-</b>	<b></b>					

2019	FEDERAL STATEMENTS	PAGE 1						
CLIENT 10350	ROCK RAPIDS AREA DEVELOPMENT FOUNDATION							
9/10/20 STATEMENT 1 FORM 990-PF, PART I OTHER INCOME	, LINE 11	01 27PM						
INCOME FROM SPECI. OTHER INVESTMENT		(C) ADJUSTED NET INCOME						
STATEMENT 2 FORM 990-PF, PART I LEGAL FEES	, LINE 16A							
LEGAL FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME  \$ 600. \$ 450.  TOTAL \$ 600. \$ 450. \$ 0	(D) CHARITABLE PURPOSES  \$ 150. \$ 150.						
STATEMENT 3 FORM 990-PF, PART I TAXES	, LINE 18							
PROPERTY TAXES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME  \$ 4,666. \$ 3,500.  TOTAL \$ 4,666. \$ 3,500. \$ 0.	\$ 1,166						
STATEMENT 4 FORM 990-PF, PART I OTHER EXPENSES	, LINE 23							
BANK FEE  DEVELOPMENT EXPEN: FILING FEES INSURANCE RENTAL EXPENSES REPAIRS & MAINTEN: SPECIAL EVENT EXP	22. 17. 933. 700. 975. 975. ANCE 3,336. 2,502. ENSES 1,884.	(D) CHARITABLE PURPOSES  \$ 1 5. 233. 834 \$ 1,073.						

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# **FEDERAL STATEMENTS**

PAGE 2

**CLIENT 10350** 

#### **ROCK RAPIDS AREA DEVELOPMENT FOUNDATION**

42-1293260

9/10/20

01 27PM

STATEMENT 5 FORM 990-PF, PART II, LINE 11 INVESTMENTS - LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		BASIS	 ACCUM. DEPREC.	_	BOOK VALUE	 AIR MARKET VALUE
IMPROVEMENTS LAND		\$ 514,501 791,742.	\$ 0.	\$	514,501. 791,742.	\$ 0. 1,915,280
	TOTAL	\$ 1,306,243.	\$ 0.	\$	1,306,243.	\$ 1,915,280.

STATEMENT 6 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

BUSINESS ASSISTANCE - NOTE RECEIVABLE COMMERCIAL BUILDINGS - CONTRACTS RECEIV. R R. HOUSING INCENTIVE- NOTES RECEIVABLE

	BC	OK VALUE	FA	IR MARKET VALUE
T ( T ( T ( T ) T ( T ) T ( T )	\$	496,008. 232,513.	\$	496,008. 232,513.
TOTAL	\$	728,521.	\$	728,521.

# STATEMENT 7 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	BUTION TO	
TAMI MURRAY 301 S. UNION STREET ROCK RAPIDS, IA 51246	DIRECTOR 0 50	\$ 0.	\$ 0.	\$ 0.
BRAD RYPKEMA 502 S 2ND AVENUE #4 ROCK RAPIDS, IA 51246	PRESIDENT 1.00	0.	0.	0.
LARRY VEON 710 1ST AVENUE ROCK RAPIDS, IA 51246	DIRECTOR 0.50	0.	0.	0.
DAVE FOLTZ 1350 HARDING AVENUE ROCK RAPIDS, IA 51246	VICE PRESIDENT 1.00	0.	0.	0.
BRENT BOSCH 103 DAVIS CT. ROCK RAPIDS, IA 51246	DIRECTOR 0.50	0.	0.	0.
BLAIR METZGER 104 RIVERVIEW DRIVE ROCK RAPIDS, IA 51246	DIRECTOR 0.50	0.	0.	0.

## 2019

# FEDERAL STATEMENTS

PAGE 3

**CLIENT 10350** 

#### **ROCK RAPIDS AREA DEVELOPMENT FOUNDATION**

42-1293260

9/10/20

01 27PM

# STATEMENT 7 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION		CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
TOM MENAGE 411 1ST AVENUE P.O. BOX 403	DIRECTOR 0.50	\$	0.	\$ 0.	\$ 0.
LISA DIEREN 411 1ST AVENUE P.O. BOX 403	DIRECTOR 0.50		0	0.	0.
JORDAN KORDAHL 501 S. 3RD AVENUE ROCK RAPIDS, IA 51246	SECRETARY/TREAS 1.00		0.	0.	0
	TOTAL	\$	0.	\$ 0	\$ 0.

# STATEMENT 8 FORM 990-PF, PART IX-A, LINE 1 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

DIRECT CHARITABLE ACTIVITIES **EXPENSES** THE FOUNDATION IS WORKING IN CORRELATION WITH THE ROCK RAPIDS Ś 9,117. DEVELOPMENT CORPORATION TO STIMULATE COMMERCIAL GROWTH AND JOB OPPORTUNITIES FOR CITIZENS OF THE CITY OF ROCK RAPIDS. THE FOUNDATION HAS BEEN ACQUIRING DESIRED PROPERTY AND CONTRUCTING COMMERCIAL SPEC BUILDINGS. UPON COMPLETION, THE FOUNDATION IS SELLING THE BUILDINGS AT A REASONABLE PRICE TO AN EXISTING BUSINESS FOR RELOCATION OR EXPANSION OR A NEW BUSINESS TO THE COMMUNITY.

#### STATEMENT 9 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM: NAME:

ROCK RAPIDS BUSINESS DEVELOPMENT PROGRAM ROCK RAPIDS AREA DEVELOPMENT FOUNDATION

CARE OF:

STREET ADDRESS:

411 1ST AVENUE P.O. BOX 403

CITY, STATE, ZIP CODE:

ROCK RAPIDS, IA 51246

TELEPHONE:

E-MAIL ADDRESS:

712-472-4585

FORM AND CONTENT:

CHAMBER@ROCKRAPIDS.COM

ANYONE INTERESTED IN OBTAINING ASSISTANCE WITH BUSINESS DEVELOPMENT (NEW START UP, EXPANSION, RELOCATION, ETC) WITHIN THE CITY OF ROCK RAPIDS SHOULD CONTACT MICAH FREESE

TO OBTAIN INFORMATION ON HOW TO SUBMIT A

REQUEST/APPLICATION.

SUBMISSION DEADLINES:

N/A

LIMITED TO COMMERCIAL ACTIVITIES WITHIN THE CITY OF ROCK RESTRICTIONS ON AWARDS:

RAPIDS, IOWA.

## 2019

# **FEDERAL STATEMENTS**

PAGE 4

**CLIENT 10350** 

**ROCK RAPIDS AREA DEVELOPMENT FOUNDATION** 

42-1293260

9/10/20

01 27PM

STATEMENT 10 FORM 990-PF, PART XVII, LINE 2B ORGANIZATION AFFILIATED WITH TAX EXEMPT ORGANIZATION(S)

(A)
NAME OF ORGANIZATION

(B) TYPE OF ORGANIZATION

(C) \_\_DESCRIPTION\_OF\_RELATIONSHIP

R.R. DEVELOPMENT CORP.

501 (C) (6)

THE FOUNDATION AND THE DEVELOPMENT CORPORATION HAVE SIMILAR GOALS OF IMPROVING THE QUALITY OF LIFE IN ROCK RAPIDS, IA. THE FOUNDATION AND THE DEVELOPMENT CORPORATION HAVE A SIMILAR BOARD OF DIRECTORS SO THERE CAN BE BETTER COMMUNICATION BETWEEN THE NON-PROFITS IN ORDER TO BE ABLE TO WORK MORE COHESIVELY TOWARD ACCOMPLISHING THE ESTABLISHED GOALS. THE FOUNDATION'S PLAN IS TO HELP PROVIDE GRANTS TO THE DEVELOPMENT CORPORATION TO ASSIST IN RETAINING AND EXPANDING QUALITY JOBS FOR CITIZENS.