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### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Α	For the 20	14 calendar year, or tax year beginning , 2014, and ending			,	
В	Check if applic	able . C Name of organization Rosedale Development Association,	Inc.	D Emplo	yer identifi	cation number
	Address			48-	08864	13
	Name cha		ite		one numbe	
	Initial retu		- 1	(91	3) 67	7-5097
	Final return			,,,,	<u> </u>	
	Amended			G Gross r	receints S	326,886.
	$\vdash$		l(a) Is this a			
			l(b) Are all su If 'No,' at	bordinates	ıncluded?	
	Tax-exemp	t status   X 501(c)(3)   501(c) ( )   ✓ (insert no )   4947(a)(1) or   527	If 'No,' at	ach a list (	(see instruc	tions)
1	Website:		I(c) Group ex	emption ni	ımher 🕨	
<u> </u>	Form of orga	200000201020	<u> </u>			al domicile KS
		Jmmary	1010	1.00		di dominio 1(5)
			ood an	d Com	munit	y Development
_		ough land use planning, crime reduction, public space				T De ter opnere
ဋ		th programming, supporting neighborhood associations				
Ē		istance to residents and businesses for a host of is				 ns.
څ		k this box I if the organization discontinued its operations or disposed of more that				
5	3 Numl	per of voting members of the governing body (Part VI, line 1a)			3	17
S		per of independent voting members of the governing body (Part VI, line 1b)			4	17
Activities & Governance		number of individuals employed in calendar year 2014 (Part V, line 2a)			5	18
흜		number of volunteers (estimate if necessary)			6	400
۲		unrelated business revenue from Part VIII, column (C), line 12			7a 7b	0.
4	b Net u	nrelated business taxable income from Form 990-T, line 34			1 70	0.
	8 Conti	ributions and grants (Part VIII, line pro	Pri	or Year		Current Year
	9 Progr	ram service revenue (Part VIII, line 20)		202,1 55,5		311,084. 15,802.
Devellue	10 Inves	tment income (Part VIII, column (A), lines 34, and 7d)		33,3	50.	15,602.
<u>آ</u> ع	11 Other	revenue (Part VIII, column (A) Ings 5, 6d, 8c, 9c, 10c, and 11e)				
		revenue – add lines 8 through 1 (must equal Part/VIII, column (A), line 12)		257,6	559	326,886.
ㅓ		is and similar amounts paid Part IX, rolumn (A) mes 1-3)		237,0	,,,,,,	3207000.
ĺ	14 Bene	fits paid to or for members (Part IX column (A) line 4)				
		les, other compensation, employee benefits (Part IX, column (A), lines 5-10)		132,3	25	146,021.
ŝ	40 - D6-	ssional fundraising fees (Part & Column (A), line 11e)		1321	,23.	140,021.
ë l	ioa Piole					
lances Expenses	<b>b</b> lotal	fundraising expenses (Part IX, column (D), line 25) ► 6,048.				
-	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		94,4		144,671.
	18 Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		226,7	88.	290,692.
╝	19 Reve	nue less expenses Subtract line 18 from line 12		30,8	71.	36,194.
8			Beginning			End of Year
盲		assets (Part X, line 16)		215,5		256,430.
d Ba	21 Total	liabilities (Part X, line 26)		10,3	88.	15,090.
F	22 Net a	ssets or fund balances. Subtract line 21 from line 20		205,1	46.	241,340.
۰a	rt II Si	gnature Block				
nde	r penalties of pe	erjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best	of my knowled	ige and bel	ief, it is true	e, correct, and
ornp	ere neciaratio	n of preparer (other than officer) is based on all information of which preparer has any knowledge				
		Supplying of officer	<u> </u>	<u> </u>	15	
ig		Signature of officer	Date		`	
eı	re	Dan DeMaria	Board	Treas	surer	<del></del>
		Type or print name and title				
		rint/Type preparer's name Preparer's signature ' Qate	- 1	heck	``"	TIN
ai		olsa A. Glola, CPA (1/01/1	.5 s	elf-employe	ed P	00350492
		Immsname Lisa A. Gloia, CPA				
S	e Only	mm's address 5559 NW Barry Road, Suite 334	F	ırm's EIN	23-2	27 <u>54265</u>
		Kansas City MO 64154-1408	P	hone no	(816)	587-9250
May	the IRS dis	cuss this return with the preparer shown above? (see instructions)	•			X Yes No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

		lopment Association, Inc.	48-088641	3 Page 2
Par		Service Accomplishments		
_	Check if Schedule O contains	a response or note to any line in this Part III	<u> </u>	
1	Briefly describe the organization's mis	sion'		
	Neighborhood and Commu	nity Development		
	through land use plann	ing, crime reduction, public	space involvement,	
	See Form 990, Page 2, Part III, Line 1	(continued)	- <b>-</b>	<b></b>
	<del></del>			
2		gnificant program services during the year which	•	
				Yes X No
	If 'Yes,' describe these new services of			
3		g, or make significant changes in how it conducts,	, any program services?	Yes X No
	If 'Yes,' describe these changes on So			
4	Describe the organization's program s Section 501(c)(3) and 501(c)(4) organ and revenue, if any, for each program	ervice accomplishments for each of its three larg- izations are required to report the amount of gran service reported	est program services, as measured by ex its and allocations to others, the total exp	penses enses,
4 a	(Code: ) (Expenses \$	124,266. including grants of \$	0.)(Revenue \$	0.)
		- community based collaborative	<del></del>	
		ments include: organized 8 commu		
		is Carnival, Play Street, RISE, Ro	- <b></b>	
		School Day and Healthy Hallow		
		operated community bike work	<del>-</del>	
		and opened 2.3 miles of natur	<b>-</b>	
		althy food through community	<del></del>	. 7.7022277
		rs Market. Collaborated with	<del>-</del>	
		participation in youth progra	<del></del>	
		ro by Salud America! by the R	<b>-</b>	: <b></b> -
		twork to Prevent Obesity Amon	<b>-</b>	
		endin ed lievene obesity imon	9_1141110_01111410111	
4 b	(Code ) (Expenses \$	17,160. including grants of \$	0.)(Revenue \$	0.)
	Youth Programs - Provide	ded leadership and community	volunteer programs for o	ver
		gh 18 programs and events. P		
		t, Excellence in Education, Y		
	the Noble Prentis Garde			
4 c	(Code ) (Expenses \$	104,800. including grants of \$	0.)(Revenue \$	10,000.)
		rovided a variety of resource	<del></del>	<del></del>
		and institutional community me		71 24 3
		ion, improvement of housing s		
		me and code related issues, 20 de		de of calle
		a interactions and messages re		
		ers to 4 families and referred 4		
		ocacy effort with Rosedale Ric		
		ment assistance to 95 families ar		ore care WCr
		nized Rosedale 101 monthly educated Rosedale 101 monthly educated		
		Leadership Academy. Led succ	essiul campaign for new b	ons Tive
	See Form 990, Page 2, Part III, Line 4	c (continued)		
	Other program continue (Describer	Pahadula O V		
4 a	Other program services. (Describe in \$	•	) (Daysana C	,
	(Expenses \$  Total program service expenses >	including grants of \$	) (Revenue \$	
BAA	Total program service expenses	246,226. TEEA0102 05/28/14		Form <b>990</b> (2014)
		1 L L A U 1 U 2 U 3 I 2 O I 4		,=-··/

### Form 990 (2014) Rosedale Development Association, Inc. Page 3 48-0886413 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . . . Χ 3 Χ 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes, 'complete Schedule D, Χ 6 7 Χ Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Χ 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Χ services? If 'Yes,' complete Schedule D, Part IV . . . . 9 Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule 11 a Χ Χ 11 b Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Χ Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X . . . . 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Χ the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X . . . 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Χ 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Х if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional . . . . . . . . . 12b Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . . . . . . Χ 14a 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Х 15 Х 16

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19 X Х 20

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

20 b 

Form 990 (2014)

Χ

Х

17

18

18

# Form 990 (2014) Rosedale Development Association, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
c	I Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	_25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes', complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
	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)			37
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	_	X
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	_	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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	of Yes' to line 35a, 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,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (2	2014)

# Form 990 (2014) Rosedale Development Association, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V		· · ·	<u>. П</u>			
			Yes	No			
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable						
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c					
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return						
b	olf at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X			
ь	olf 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b					
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х			
b	olf 'Yes,' enter the name of the foreign country		.				
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Χ			
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c					
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х			
b	of Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х			
b	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х			
	I If 'Yes,' indicate the number of Forms 8282 filed during the year						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		Х			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring		1				
_	organization have excess business holdings at any time during the year?	8	-				
9	Sponsoring organizations maintaining donor advised funds.						
	Did the sponsoring organization make any taxable distributions under section 4966?	9 a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b					
	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII. line 12						
			1				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ļ				
	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders						
			1				
	against amounts due or received from them.)	12a					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	124		<del></del>			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		[				
	Is the organization licensed to issue qualified health plans in more than one state?	13 a	l				
-	Note. See the instructions for additional information the organization must report on Schedule O.						
h	Enter the amount of reserves the organization is required to maintain by the states in		ļ				
	which the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?	14 a	İ	Х			
	of Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b					
AA			990 (2	2014)			

Sec	tion A. Governing Body and Management			
			Yes	No
1 a	In Enter the number of voting members of the governing body at the end of the tax year			
	authority to an executive committee or similar committee, explain in Schedule O			
	Denter the number of voting members included in line 1a, above, who are independent   1b   17   27   28   29   29   29   29   29   29   29			ĺ
2	officer, director, trustee, or key employee?	2		х
,		-		<del></del>
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 governing documents	_		
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7 a		X
Ł	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7 b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	_ 8 a	X	
b	Each committee with authority to act on behalf of the governing body?	8 b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		odo l	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	Yes	No
40.5	Did the organization have local chapters, branches, or affiliates?	10 a	163	X
IUa	of Yes, did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their			<u> </u>
E.	operations are consistent with the organization's exempt purposes?	10 b		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	1
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
		12 b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	X	
13	_ · · · · · · · · · · · · · · · · · · ·	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		ï	
а	The organization's CEO, Executive Director, or top management official	15 a	X_	
b	Other officers or key employees of the organization	15 b	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х
b	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sec	tion C. Disclosure			
	List the states with which a copy of this Form 000 is required to be filed by			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply			
	Own website			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	Organization 1403 Southwest Blvd Kansas City KS 66103 (91	.3) (	577 <u>-</u> 5	50 <u>9</u> 7

Page 7

## 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

- 1 a 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
- 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, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any rel	ated organı	zatio	n coi	mpe	ensa	ted ar	ny d	current officer, dire	ctor, or trustee	
	(C)									
(A) Name and Title	(B) Average hours per	than c erage is l		Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D)  Reportable compensation from the organization	(E)  Reportable  compensation from related organizations	(F) Estimated amount of other compensation
	week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Dan DeMaria	1.00				}					
Board Member		Х						0.	0.	0.
(2) Zach Flanders	1.00									
Board Member		Х	<u> </u>					0.	0.	0.
(3) John Hornbeck	[1.00	,,						_	_	
Board Member		Х						0.	0.	0.
_(4)_Mark_Mohler	1.00	۱							_	
Board Member		X						0.	0.	
_(5) Robert Roddy	1.00	l								_
Board Member		X						0.	0.	0.
(6) Charles Stewart	1.00	١	]							
Board Member		Х						0.	0.	<u> </u>
_(7)_Gretchen_Patch	1.00									
Board Member		Х			<u> </u>			0.	0.	0.
(8) Cheryl Gibson	[1.00		[ [							
Board Member		X						0.	0.	0.
(9) Bob Spaniol	1.00									
Board Member		Х	_					0,	0.	
(10) Monica Mendez	1.00									
Board Member		X						0.	0.	0.
(11) Daniel Serda	1.00	_								
Board Member		X						0.	0.	0.
(12) Theresa Reyes-Cummings  Board Member	1.00	Х						0.	0.	0.
(40) 7 7 7	1.00	_					_			
Board Member	. [	Х						0.	0.	0.
(14) Phil Gardos	2.00		H				_			
President	[	Х		Х				0.	0.	0.
	'_				-	<del></del>				F 000 (0044)

Part VII   Section A. Officers, Directors, Trus	(B)	Ley			bye C)	es,	anı	d riigilest Coll	ipensated Emp	loyee	<b>S</b> (соп	inuea)
(A) Name and title	Average hours per week (list any	box	, unle	Pos heck ss pe	ition more erson i	than both structure that short the short temployee	an ee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	amou com fr orga and	(F) stimated int of oth pensatio om the enization d related enization	n I
(15) Carroll O'Neal	1 00	_			_	8						
Vice-President	1.00	Х		Х				0.	0.			0.
(16) Karen Johnson	1.00	ı		,,				_				
Secretary (17) John P. Kornhaus	1.00	Х	_	X				0.	0.			0.
Treasurer		Х		Х				0.	0.			0.
(18) Heidi Holliday	40.00	Γ						10.010				
Executive Director (19)		X		X				43,260.	0.		1,2	298.
(10)						<u> </u>						
(20)												
(21)		-					-			<del></del> -		
(22)							-					
							L					
(23)					ļ							
(24)												
(25)												
1 b Sub-total					Ļ		<b> </b>	43 260	0.	<del></del> -	1 2	298.
c Total from continuation sheets to Part VII, Section							<b>-</b>	43,260.	0.		1,2	.90.
d Total (add lines 1b and 1c)	. <u></u>				<u> </u>		<u> </u>	43,260.	0.			298.
2 Total number of individuals (including but not limited to from the organization ► ∩	o those	listed	abo	ove)	who	rece	eive	d more than \$100,0	000 of reportable cor	npensat	ion	
from the organization = 0											Yes	No
3 Did the organization list any former officer, director, o										2		v
on line 1a? If 'Yes,' complete Schedule J for such indi										. 3		X
4 For any individual listed on line 1a, is the sum of repo the organization and related organizations greater that such individual	ın \$150,I	2007	If 'Y	'es'	com	olete	Sch	nedule J tor		. 4		X
5 Did any person listed on line 1a receive or accrue cor												
for services rendered to the organization? If 'Yes,' cor Section B. Independent Contractors	nplete S	ched	ule .	J for	suc	h per	rson	· · · · · · · · · · · · · · · · · · ·	<u></u>	.  5		X
Complete this table for your five highest compensated compensation from the organization. Report compensation.	indepe	nden	t cor	ntrac	ctors	that	rec	eived more than \$1	00,000 of			
(A)	ation ioi	ше	Cale	ilua	yea	ir en	Jing	(B)	<del></del>		 >)	
Name and business addres	s 							Description of	f services	Compe	nsatio	n ———
					_		-					
						_						
2 Total number of independent contractors (including bi	ut not lim	ited	to th	ose	liste	d ab	ove	) who received mor	e than			
\$100,000 of compensation from the organization	0							· 				
RAA				05.00						Form	990 (C	20141

Part VIII Statement of Revenue  Check if Schedule O contains			48-0886413	P:
Check if Schedule O contains a response or n	ote to any line in this Part VIII	<i></i>		
	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from under section
b Membership dues	360.	10.000		512-514
F c Fundraising events 1c	0.			{
d Related organizations 1 d	0.			
e Government grants (contributions) . 1e 3	4,553.		1	
f All other contributions, gifts, grants, and similar amounts not included above . 1f 37				
g Noncash contributions included in lines 1a-1f \$	6,171.			
h Total. Add lines 1a-1f	0.			
l p				
2a Consulting fees - health care enrollment 531390	10,000.	10.000		
b Community room/rental 531390	5,802.	10,000. 5,802.	0.	
d		J, 602.	0.	
e				
f All other program service revenue				
3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	15.00			
13 Investment income (including				
Income from investment of tax-exempt bond proceed Royalties	ds			
(i) Real (ii) Poss	•			
6 a Gross rents	NOTAL TOTAL			
b Less: rental expenses	<del></del>	1		
c Rental income or (loss)			1	
d Net rental income or (loss)	>		1	
7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other	ner			
b Less cost or other basis and sales expenses				
c Gain or (loss)			l	
d Net gain or (loss)	· . •			
8 a Gross income from fundraising events (not including \$			<del></del>	
of contributions reported on line 1c).				
See Part IV, line 18			1	
b Less. direct expenses				
c Net income or (loss) from fundraising events				
a Gross income from gaming activities. See Part IV, line 19				
b Less: direct expenses b				
c Net income or (loss) from gaming activities			1	
a Gross sales of inventory localist	··· <del>•</del>		j	
and anowances				
b Less' cost of goods sold b			1	
C Net income or (loss) from sales of inventory		1	l	
Business Cod				
b			1	
All other revenue				
Total Rodd lines 11a-11d	. •			
	· 1	1		

Part IX Statement of Functional Expenses 

	Check if Schedule O contains a res	<u> </u>		(c)	(D)
	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				.,
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	44,558.	35,000.	6,530.	3,028.
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	88,640.	77,467.	9,623.	<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,411.	833.	441.	137.
9	Other employee benefits				
	Payroll taxes	11,412.	9,817.	1,265.	330.
• •	Fees for services (non-employees)			1	
	Management				
	Legal				
	Accounting	11,225.	0	11,225.	0.
	Lobbying				
	Professional fundraising services See Part IV, line 17 .				
	Investment management fees				
•	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	33,377.	33,018. 150.	359. 178.	0.
	Advertising and promotion	328.	12,200.	1,695.	562.
13	Office expenses	14,457.	1,076.	85.	23.
14	Information technology	1,184.	1,0/6.	03.	
15	Royalties	14 705	13,932.	640.	133.
16	Occupancy	14,705.	13,932.	040.	
17	Travel		<u> </u>		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,269.	394.	875.	
20	Interest	<del></del>			
21	Payments to affiliates		0.040	364.	99.
22	Depreciation, depletion, and amortization	3,311.	<u>2,848.</u> 5,131.	722.	170.
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	6,023.	5,131.	122.	170.
a	Program supplies/expense	53,661.	53,661.	0.	
t					
c	:				
C	 			4 416	1.6
e	All other expenses	5,131.	699.	4,416.	16. 6,048.
25	Total functional expenses Add lines 1 through 24e	290,692.	246,226.	38,418.	0,040.
26	the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here   X if following		0.	0.	0 .
DAA	SOP 98-2 (ASC 958-720)	0.		<u>.                                      </u>	Form <b>990</b> (2014)
BAA	<b>L</b>	TEEA0110 05/	28/14		(==)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	155,907.	1	117,759.
	2	Savings and temporary cash investments	133,307.	2	
	3	Pledges and grants receivable, net	3,182.	3	72,513.
	4	Accounts receivable, net	15,930.	4	20,915.
	_				
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	2,343.	8	4,943.
Ä	9	Prepaid expenses and deferred charges	544.	9	3,426.
	10 a	Land, buildings, and equipment cost or other basis  Complete Part VI of Schedule D			
	b	Less accumulated depreciation	37,628.	10 c	36,874.
	11	Investments — publicly traded securities		11	
	12	Investments — other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	<del></del>	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	215,534.	16	256,430.
	17	Accounts payable and accrued expenses	7,630.	17	14,481.
	18	Grants payable		18	
	19	Deferred revenue	2,758.	19	609.
	20	Tax-exempt bond liabilities		20	
e S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	10,388.	26	15,090.
		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete			
စ္က		lines 27 through 29, and lines 33 and 34.			•
and	27	Unrestricted net assets	121,695.	27	94,078.
3a	28	Temporarily restricted net assets	83,451.	28	147,262.
<u> </u>	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
e	33	Total net assets or fund balances	205,146.	33	241,340.
Z	34	Total liabilities and net assets/fund balances	215,534.	34	256,430.
BA	A				Form <b>990</b> (2014)

Form	n 990 (2014) Rosedale Development Association, Inc. 48-	-08864	413 _	Pa	age <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
_	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u> .	<u></u>	$\cdot \Box$
1	Total revenue (must equal Part VIII, column (A), line 12)	1		326,8	<u>88</u> 6.
2	Total expenses (must equal Part IX, column (A), line 25)	2		290,6	692.
3	Revenue less expenses Subtract line 2 from line 1	3		36,	194.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		205,	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		241,3	<u>340.</u>
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. $\square$
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both	ı			
	Separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis		1		
ŀ	Were the organization's financial statements audited by an independent accountant?		2	b X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate			7	
	basis, consolidated basis, or both				
	X   Separate basis				
C	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auditorial review, or compilation of its financial statements and selection of an independent accountant?	nt, • • • • •	2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3:	a	Х
Ł	f 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	b	<u> </u>
BAA	· · · · · · · · · · · · · · · · · · ·		For	m <b>990</b> (	2014)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Schedule A (Form 990 or 990-EZ) 2014

Name of the organization Employer Identification number Rosedale Development Association, Inc. 48-0886413 Part I 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 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 4 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 5 170(b)(1)(A)(iv). (Complete Part II) ĸ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) 7 X 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 9 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s) (vi) Amount of other (i) Name of supported organization (iii) Type of organization (described on lines 1-9 above or IRC section (IV) is the organization listed (v) Amount of monetary support (see instructions) support (see instructions) your governing document? (see instructions)) Yes No (C) (E) Total

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

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale: begir	ndar year (or fiscal year nning in) ►	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	228,324.	235,753.	185,295.	202,109.	311,084.	1,162,565.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	228,324.	235,753.	185,295.	202,109.	311,084.	1,162,565.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						93,581.
6	Public support. Subtract line 5 from line 4						1,068,984.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year nning in) ►	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	228,324.	235,753.	185,295.	202,109.	311,084.	1,162,565.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	235.	0.	0.	0.	0.	235.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10				,		1,162,800.
12	Gross receipts from related activiti	es, etc (see instruc	ctions)			12	179,661.
13	First five years. If the Form 990 is organization, check this box and s	s for the organization	on's first, second, t	hırd, fourth, or fifth	tax year as a sec	tion 501(c)(3)	▶ 🗍
Sec	tion C. Computation of Pu	blic Support F	Percentage				<del></del>
14	Public support percentage for 201	4 (line 6, column (f	) divided by line 11	, column (f))		14_	91.93 %
15	Public support percentage from 20						
16 a	33-1/3% support test — 2014. If and stop here. The organization of	the organization di qualifies as a public	d not check the boo cly supported organ	x on line 13, and the state of	he line 14 is 33-1/3	3% or more, check	this box ► X
t	33-1/3% support test — 2013. If t and stop here. The organization	he organization did qualifies as a publi	d not check a box o cly supported organ	on line 13 or 16a, a nization	and line 15 is 33-1/	3% or more, check	this box
17 a	10%-facts-and-circumstances to or more, and if the organization m the organization meets the 'facts-a	acts the feets and	circumetaneae' tas	t chack this hay s	and <b>cion nere</b> in Yi	niain in Pari vi nuv	, —
	o 10%-facts-and-circumstances to or more, and if the organization m organization meets the 'facts-and-	eets the 'facts-and circumstances' tes	-cırcumstances' tes t The organizatıon	st, check this box a i qualifies as a pub	and <b>stop nere.</b> Exp plicly supported org	ganization	v tne ▶ 🔲
18	Private foundation. If the organiz	zation did not checl	k a box on line 13,				ons

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			·····			
	ndar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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	, , ,	-					
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support						
Calen	ndar year (or fiscal yr beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
	a Gross income from interest, dividends, payments received on securities loans, rents, royallies and income from similar sources						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				,		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11 and 12.)			<u> </u>			
	First five years. If the Form 990 is organization, check this box and s	top here	<u></u>				
Sec	tion C. Computation of Pul					<del> </del>	
15	3	, , , , , , , , , , , , , , , , , , , ,	•				
	Public support percentage from 20				· · · · · · · · · · · · · · · · · · ·	16	ol
	tion D. Computation of Inv						,
17	Investment income percentage for	•	• •	, ,	-	<del></del>	왕
18	, ,						9
	33-1/3% support tests — 2014. If is not more than 33-1/3%, check the	nis box and stop he	e <b>re.</b> The organizat	ion qualifies as a p	ublicly supported	organization	▶ 📙
	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%, c	check this box and	<b>stop here.</b> The or	ganızatıon qualifies	s as a publicly sup	ported organizatio	n ▶ 🔲
20	Private foundation. If the organization	ation did not check	a box on line 14,	19a, or 19b, check	this box and see i	nstructions	

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3 a	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		
ŀ	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination	3b		
(	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4 8	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
k	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	_	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the chantable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7	:	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)	8_		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in Part VI	9a		
k	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9с	i	
10 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below	10a		
t	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		

	nedule A (Form 990 or 990-EZ) 2014 Rosedale Development Association, Inc. 48-0886413		F	age
Pa	art IV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?	$\dashv$	Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	1a		
	b A family member of a person described in (a) above?	1b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	1c		
<u>Se</u>	ction B. Type I Supporting Organizations			
1	or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	1	Yes	No
	that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the		:	
Sec	ction D. All Type III Supporting Organizations			
		<u></u>	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	<u>,  </u>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
	The organization satisfied the Activities Test Complete line 2 below			
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions.	.)		
		, _		
2	Activities Test Answer (a) and (b) below.		/es	No
4	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	!a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
á	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	а		
ı	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	ь		

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Sch	edule <b>A</b> (Form 990 or 990-EZ) 2014 Rosedale Development Associatio	n I	Inc. 48-09	386413 <b>Pa</b> ge
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga			000413 1490
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nother Type III non-functionally integrated supporting organizations must complete Sec	lovem	ber 20, 1970 See instru	uctions. All
Sec	tion A — Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		·	
- 2	Average monthly value of securities	1 a		
ŀ	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c		
-	Total (add lines 1a, 1b, and 1c)	1 d		
-	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	<u></u> ,	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

3

5

3 Minimum asset amount for prior year (from Section B, line 8, Column A) . . . . . . . .

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

BAA

Schedule A (Form 990 or 990-EZ) 2014

	nedule A (Form 990 or 990-EZ) 2014			Page
	art V Type III Non-Functionally Integrated 509(a)(3) Section D – Distributions	upporting Organiz	ations (continued)	<del>,</del>
1				Current Year
	in excess of income from activity	<u>.</u>		
3	Administrative expenses paid to accomplish exempt purposes of support	orted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
	Total annual distributions. Add lines 1 through 6	· · · · · · · · · · · · · · · · · · ·		
	Distributions to attentive supported organizations to which the organization Part VI) See instructions.	tion is responsive (provi	de details	
9	Distributable amount for 2014 from Section C, line 6			<del></del>
10	Line 8 amount divided by Line 9 amount			· <del></del> -
<b>~</b> -		(i)	(ii)	(iii)
Sec	tion E – Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
_1	Distributable amount for 2014 from Section C, line 6		<del></del>	
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:	••••••••••••••••••••••••••••••••••••••		
а				
b				
С	3			
d	:			
е	From 2013			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			<del></del>
	Carryover from 2009 not applied (see instructions)	T		
i	Remainder Subtract lines 3g, 3h, and 3i from 3f	<u> </u>		
4	Distributions for 2014 from Section D,			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
	Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			<del></del>
8	Breakdown of line 7			
a		<u> </u>		<u>.</u>
b				
С				
d	Excess from 2013			
_	Excess from 2014			
		1		

BAA

Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and it instructions is at www.irs.gov/form990.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

### If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

•	Section 501(c)(4), (5), or (6) org	ganizations Complete Part III			
	e of organization	<u> </u>		Employer identific	ation number
Ro.	sedale Development	Association, Inc.		48-088641	.3
Pa	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organ	ization.
1	Provide a description of the o	rganization's direct and indirect political camp	aign activities in Part I	V.	
2	Political expenditures				S
3					
Pa	rt I-B   Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excis	se tax incurred by the organization under sect	on 4955		S
2	Enter the amount of any excis	se tax incurred by organization managers und	er section 4955		S
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for this	year?		· · · · Yes No
4					
	b If 'Yes,' describe in Part IV				
Pa	rt I-C Complete if the o	rganization is exempt under secti	on 501(c) , excer	t section 501(c)(3)	
1		ended by the filing organization for section 52			
2		organization's funds contributed to other orga			
_					S
3	Total exempt function expend	itures Add lines 1 and 2. Enter here and on F	orm 1120-POL,		
				· ·	
4	Did the filing organization file	Form 1120-POL for this year?			· · · · LYes LNo
5		and employer identification number (EIN) of al			
	amount of political contribution	For each organization listed, enter the amounts received that were promptly and directly de	elivered to a separate	põlitical organization, sud	ch as a separate
	segregated fund or a political	action committee (PAC) If additional space is	i needed, provide info	rmation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing	(e) Amount of political
	•		, ,	organization's funds If	contributions received and promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)					
	·				
(2)					
(3)					
(4)					
(5)					
(3) ——					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2014

<u> </u>		Veropillent Assoc		40-000	
Part II-A Complete if section 501	the organizatio (h)).	n is exempt under s	section 501(c)(3) and	d filed Form 5768 (e	lection under
A Check ► If the filin	ig organization belon	gs to an affiliated group (a	and list in Part IV each affili	ated group member's nam	ne,
address,	EIN, expenses, and	share of excess lobbying	expenditures)		
B Check ► If the film	ig organization check	ked box A and 'limited con	trol' provisions apply.		
(The term	Limits on Lobbyi 'expenditures' mea	ing Expenditures ans amounts paid or inc	urred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	•			0.	
<b>b</b> Total lobbying expenditu				0.	
c Total lobbying expenditu	•	•		0.	
d Other exempt purpose e				290,692.	
e Total exempt purpose ex	spenditures (add lines	s 1c and 1d)		290,692.	-
f Lobbying nontaxable am both columns	ount Enter the amou	unt from the following table	e in	58,138.	
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxab	le amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	1,000,000	\$100,000 plus 15% of the exce	ess over \$500,000		
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the exc			
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the exces	ss over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% of	line 1f)		14,535.	
h Subtract line 1g from line	·			0.	
i Subtract line 1f from line	1c If zero or less, er	nter -0		0.	<u></u>
j If there is an amount othe section 4911 tax for this	er than zero on eithei year?	r line 1h or line 1ı, did the	organization file Form 4720	D reporting	Yes X No
(Som	e organizations tha		Under Section 501(h) election do not have to c ctions for lines 2a throug		
			ng 4-Year Averaging Peri		
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
2 a Lobbying non-taxable amount		0. 0	. 0.	0.	0.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					0.
c Total lobbying expenditures		0. 0	. 0.	0.	0.
d Grassroots nontaxable amount		0.	. 0.	0.	0.
e Grassroots ceiling amount (150% of line 2d, column (e))					0.
f Grassroots lobbying expenditures		0. 0	. 0.	0.	0.
BAA				Schedule C (Form	990 or 990-EZ) 2014

48-0886413

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(crostion arraor cootion conting).					
_		(a	1)	(	b)	
of .	r each 'Yes' response to lines 1a through 1ı below, provide in Part IV a detailed description the lobbying activity.	Yes	No	Am	ount	
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
	a Volunteers?					
	<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	c Media advertisements?					
	d Mailings to members, legislators, or the public?					
	e Publications, or published or broadcast statements?					
	f Grants to other organizations for lobbying purposes?					
	g Direct contact with legislators, their staffs, government officials, or a legislative body?					
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	i Other activities?					
	j Total Add lines 1c through 1	_				
:	2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		İ			
	<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912					
	c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		Ī			
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
P	art III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or			
	section 501(c)(6).	` , ` ,				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1_		
2	2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	B Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
P	(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5) Part	, or s III-A,	ection 5 line 3, is	01(c)	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	a Current year		2 a			
	<b>b</b> Carryover from last year		2 b			
	<b>c</b> Total		2 c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
	5 Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>		

### Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	Rosedale Development Assoc	iation, Inc.		48-0886413				
Pa	Organizations Maintaining Done	or Advised Funds or C	Other Similar Fu		_			
	Complete if the organization answ	vered 'Yes' to Form 990	, Part IV, line 6.					
		(a) Donor advise	ed funds	(b) Funds and other accounts				
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)	•						
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor are the organization's property, subject to the organization's	rganızatıon's exclusive legal co	ontrol?	Yes No				
6	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?							
Pa	Conservation Easements. Complete if the organization answ	vered 'Yes' to Form 990,	, Part IV, line 7.					
1	Purpose(s) of conservation easements held by t	the organization (check all tha	t apply)					
	Preservation of land for public use (e g , rec	creation or education)	Preservation of	of a historically important land area				
	Protection of natural habitat		Preservation of	of a certified historic structure				
	Preservation of open space		_					
2	Complete lines 2a through 2d if the organization	nheld a qualified conservation	contribution in the fe	orm of a conservation easement on the				
	last day of the tax year			Hald sade - Fred state Ton Va-				
	Total months of a contract			Held at the End of the Tax Yea	<u>г</u>			
	Total number of conservation easements							
	Total acreage restricted by conservation easeme							
	Number of conservation easements on a certifie		` ,	2c				
	Number of conservation easements included in structure listed in the National Register	(c) acquired after 8/17/06, and	d not on a historic	2 d				
3	Number of conservation easements modified, tratax year ►	ansferred, released, extinguis	hed, or terminated b	y the organization during the				
4	Number of states where property subject to cons	servation easement is located	<b>▶</b>					
5	Does the organization have a written policy rega and enforcement of the conservation easements							
6	Staff and volunteer hours devoted to monitoring,	, inspecting, and enforcing col	nservation easemen	its during the year				
7	Amount of expenses incurred in monitoring, insp ▶\$	pecting, and enforcing conserv	vation easements du	uring the year				
8	Does each conservation easement reported on I and section 170(h)(4)(B)(II)?	line 2(d) above satisfy the req	uirements of section	1770(h)(4)(B)(ı) Yes No				
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to the conservation easements	ts conservation easements in the organization's financial sta	its revenue and exp itements that describ	ense statement, and balance sheet, and bes the organization's accounting for				
Pai	Organizations Maintaining Colle Complete if the organization answ	ections of Art, Historic ered 'Yes' to Form 990,	al Treasures, o Part IV, line 8.	r Other Similar Assets.				
1 :	If the organization elected, as permitted under S art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its financia	neld for public exhibition, educ	ation, or research in	tatement and balance sheet works of furtherance of public service, provide,				
ı	If the organization elected, as permitted under S historical treasures, or other similar assets held t following amounts relating to these items	for public exhibition, education	n, or research in furt	herance of public service, provide the				
	(i) Revenue included in Form 990, Part VIII, line							
	(ii) Assets included in Form 990, Part X							
2	If the organization received or held works of art, amounts required to be reported under SFAS 11	historical treasures, or other s 16 (ASC 958) relating to these	similar assets for fina items	ancial gain, provide the following	-			
6	Revenue included in Form 990, Part VIII, line 1 -	<b></b> .		<b>&gt;</b> \$				
	Assets included in Form 990, Part X			▶ \$				

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land		4,516.		4,516.
<b>b</b> Buildings	1	68,192.	36,917.	31,275.
c Leasehold improvements		0.	0.	0.
d Equipment		14,724.	14,724.	0.
e Other		1,500.	417.	1,083.
Total. Add lines 1a through 1e. (Column (d) must equa	36,874.			

BAA

Schedule **D** (Form 990) 2014

Total. (Column (b) must equal Form 990, Part X, column (B) line 25) . . . . 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain 

(11)

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	326,886
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains (losses) on investments	1	
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	326,886
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII )		
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<del></del>	326,886
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	290,692
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	290,692
4 Amounts included on Form 990, Part IX, line 25, but not on line 1.		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses Add lines 3 and 4c (This must equal Form 990 Part I line 18)	5	290.692

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

The Association accounts for uncertain tax positions in accordance with the provisions of FASB Codification topic Income Taxes. Income Taxes clarifies the accounting for uncertainty in income taxes and requires the Association to recognize in the financial statements the impact of a tax position taken or expected to be taken in a tax return, if that position is more likely than not to be sustained under audit, based on the technical merits of the position. Management has assessed the tax positions of the Association and determined that no positions exist that require adjustment or disclosure in the financial statements. The Association is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Association believes it is no longer subject to income tax examinations for years prior to 2011.

Pt X, Line 2

Part XIII | Supplemental Information.

Schedule **D** (Form 990) 2014

### SCHEDULE O (Form 990 or 990-EZ)

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.

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Pt VI, Line 11b

➤ Attach to Form 990 or 990-EZ.
➤ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Rosedale Development Association, Inc.

48-0886413

Employer identification number

A copy of the Form 990 was distributed to all members of the Board of Directors prior to filing. Members of the Board of Directors were asked to confirm receipt of the Form 990 and to provide comments and questions to the Executive Director, Treasurer and CPA. Members of the Board of Directors approved filing of the Form 990 at a board meeting prior to filing.

The organization's staff maintains forms completed by members of the Board of Directors of potential conflicts and updates this information

Board of Directors of potential conflicts and updates this information throughout the year. If questions related to a potential conflict arise, a discussion of such is held at the next meeting of the Board of Directors before any financial decisions are made or related activity

Pt VI, Line 12c begins.

Compensation of the Executive Director is discussed by the Board of Directors as part of the annual budgeting process. During the meeting, proposed compensation is compared to similarly situated employees at comparable not-for-profit organizations using salary surveys and Form 990s. The Executive Director's credentials and performance evaluations are also considered. Discussions and decisions are documented.

Pt VI, Line 15a

Compensation for key employees is set based on comparison to similarly situated employees at comparable not-for-profit organizations using salary surveys. Experience and credentials are considered. Decisions are documented in personnel files.

Pt VI, Line 15b

The organization's annual Form 990 is available at guidestar.org. The organization's financial statements, governing documents, and conflict of interest policy are provided upon request for business purposes as approved by the Executive Director.

Pt VI, Line 19