Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.com/Form0004-revenue.

2018

Department of the Treasury

Open to Public

Inte	rnal Rever	nue Service	► Go to www.irs.gov/Form990 for instructions and the	latest info	rmation.		Inspection		
A	For the	e 2018 cale	ndar year, or tax year beginning , 2018, and	l ending			, 20		
В	Check if	f applicable	C Name of organization Rosedale Development Association	on, Inc	DE	mploy	er identification number		
	Address	s change	Doing business as	•		8-0	886413		
	Name c	-		loom/suite		E Telephone number			
$\vec{\Box}$	Initial re	_	1403 Southwest Boulevard		Ι ((913)677-5097			
$\vec{\Box}$		rn/terminated	City or town, state or province, country, and ZIP or foreign postal code						
\exists			Kansas City, KS 66103		a c	roce re	eceipts \$ 391,635.		
\exists		ed return	F Name and address of principal officer	· · · · ·			subordinates? Yes No		
ш	Applicat	tion penaing							
			Theresa Reyes-Cummings, 1403 Southwest Blvd, Kansas City, F	<i>4 4 4</i>			s included? Yes No		
Ļ_		mpt status		520			list (see instructions)		
<u>J</u>	Website		osedale.org		H(c) Group exer				
				f formation	1978 M	State	of legal domicile KS		
P	art I	Summ		_					
	1		escribe the organization's mission or most significant activities.						
& Governance		use pla	nning, crime reduction, public space involvement, you	ith prog	ramming, s	uppo	rting neighborhood		
nar		associa	tions and providing assistance to residents and busin	esses f	or a host o	of 18	ssues and concerns		
Š	2	Check th	is box $lacktriangle$ if the organization discontinued its operations or dispo	osed of n	nore than 25	% of	its net assets.		
ĝ	3	Number of	of voting members of the governing body (Part VI, line 1a)		[3	15		
9	4	Number of	of independent voting members of the governing body (Part VI, Iir	ne 1b) .	[4	15		
Activities	5	Total nun	nber of individuals employed in calendar year 2018 (Part V, line 2a	a)	[5	37		
ξ	6	Total nun	nber of volunteers (estimate if necessary)	·	[6	667		
Ą	7a		elated business revenue from Part VIII, column (C), line 12		1	7a	0.		
	Ь		ated business taxable income from Form 990-T, line 38			7b	0.		
	 			Ì	Pnor Year		Current Year		
	8	Contribut	ions and grants (Part VIII, line 1h)		233,2	37	376,413.		
Revenue	9		service revenue (Part VIII, line 2g)	·	8,8		11,321.		
	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)	·	39,4		-1,125.		
æ	11		· ·	·					
	1		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-1,0		-1,690.		
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line	12)	280,3	69.	384,919.		
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)						
	14	•	paid to or for members (Part IX, column (A), line 4)	_					
Expenses	15		other compensation, employee beriefits (Part IX, column (A), lines 5-1		192,4	74.	226,926		
ens	16a		nal fundraising fees (Part IX, column (A), line 11e)	· · · · · ·	er				
ž	b		draising expenses (Part IX, column (D), line 25) ► 41, 46	9.					
ш	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	٠	124,4		125,862.		
	18	Total exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		316,8	79.	352,788.		
	19	Revenue	less expenses. Subtract line 18 from line 12		-36,5		<u>32,131.</u>		
Assets or Balances				Begr	nning of Current	Year	End of Year		
sets	20	Total asse	ets (Part X, line 16) RECEIVED		193,0	71.	225,935		
t As	21	Total liabi	lilities (Part X line 76)		19,7	16.	20,449.		
Net A Fund E	22	Net asset	s or fund balances. Subtract up 21 from line 20,000.		173,3	55.	205,486.		
Pa	art II	Signat	ure Block S NOV 2013 3						
Un	der pena	itie 6 periur	y, I declare that I have examined the return, including accompanying school es an	nd statemen	ts, and to the be	est of n	ny knowledge and belief, it is		
tru	e, correc	t, and comple	ete peclaration of preparer (other handofficer) is based on all information of which p	oreparer has	any knowledge				
		16/1	/h 1 1 1 / a () 1 / C				- 10		
Sig	ın	Signa	ature of officer		Date	7/-	13-17		
He		lan 🎽			•	, ,	. •		
. , .		 	eresa Reyes-Cummings, President or print name and title						
		1_/		Date			- PTIN		
Pa		m. ~	W 1 A 1710 1 3)		heck [X if		
Pro	epare		A. Gioia, CPA	10/2			loyed P00350492		
Us	e Onl	Y Firm's na	ame ▶ Lisa A. Gioia, CPA				23-2754265		
		i <u>,</u> Firm's ac	ddress ▶ 5559 NW Barry Road, Suite 334, Kansas City, MO	64154-1	1408 Phone no	s (8)			
Ma	y the IF	RS _r discuss	this return with the preparer shown above? (see instructions)		<u> </u>	<u></u>	🛛 Yes 🗌 No		
For	Panery	vork Beduc	ction Act Notice, see the separate instructions. BAA	REV 05/	20/19 PRO		Form 990 (2018)		

Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Neighborhood and Community Development through land
	use planning, crime reduction, public space involvement, youth programming, supporting neighborhood
	associations and providing assistance to residents and businesses for a host of issues and concerns.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 171,818. including grants of \$ 0.) (Revenue \$ 0.)
	Rosedale Healthy Kids - community based collaborative effort to support healthy living in the Rosedale neighborhood. Accomplishments include: organized community events including a bike-in movie, RISE, International Walk to School Day and Healthy Community; sent 74 students to weeklong overnight summer camp; operated community bike workstation for free bike repairs to community; maintained 4 miles of natural surface walking trail (Rozarks); supported access to healthy food through 4 community gardens and the Rosedale Farmers Market. Collaborated with Healthy Communities Wyandotte Initiative. Expanded participation in youth programs, community gardens and community walking club.
4b	(Code:) (Expenses \$ 18,187. including grants of \$ 0.) (Revenue \$ 0.)
	Youth Programs - Provided services and education for over 1,080 area youth through programs and events. Programs included Summer Youth Employment, Excellence in Education, Youth Sports leagues, Walking School Buses, and healthy cooking classes and community gardens.
4c	(Code) (Expenses \$ 63,012. including grants of \$ 0.) (Revenue \$ 11,321.)
	Community Outreach - provided a variety of resources to over 14,000 of the area's residential business and institutional community members including social services, crime reduction, improvement of housing stock and urban planning. Responded to dozens of crime and code related issues, development issues and thousands of calls, emails and social media interactions and messages requesting service/information. Provided minor home repairs to 21 families and referred additional families to other agencies for major home repairs. Organized monthly meetings of Rosedale Leadership Council and provided technical assistance to neighborhood groups. Served 35 families through the Feed a Family program, which provides baskets of food, household supplies and winter children's clothing to area families. Recruited over 660 volunteers who gave over 4,000 hours of community service.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses > 253, 017

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Form 9 9	$U_{0(2018)}$		i	Page
Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	×	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4	×	
5	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	5		×
6	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, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	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 services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		×
11	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
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 in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	j	×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	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)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18	×	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	**		
	If "Yes," complete Schedule G, Part III	19 20a		×
4	=== ======= one on those hoopital admined. If red, complete deligation is			

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

domestic government on Part IX, column (A), line 1? [4] (Yes 20/16 page) lete Schedule I, Parts I and II .

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

20b

21

Part	Checklist of Required Schedules (continued)			
			Yes	No
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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .	24b	-	-
c d	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 24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u> 24u</u>		\vdash
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
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		×
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		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
С	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		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
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		×
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		×
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	! 	×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "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		×
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	ı	×
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	×	
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> </u>		
.a.			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. 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?	1c		

Part	V. Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			History
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 37			-Birth
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	Semble Nation 2
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		Witt	Zieni.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b		
4a	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)?	4a		×
b	If "Yes," enter the name of the foreign country. ▶	ر الأوالور	1300A	Fig.
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	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?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	r 4m (0 Z.).	92-C82-VS
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?	7a	×	<u> </u>
, D	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u>×</u>	
,c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year			×
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		×
. ' g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		×
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		×
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		W.	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	C. P. L.	No.	SEA SE
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	2/4 % 1	
10	Section 501(c)(7) organizations. Enter			
· а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources 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?	12a		-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			5.00
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		域域	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	i. n.basan.	p196:239694
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			J
_	the organization is licensed to issue qualified health plans		is in	4
C	Enter the amount of reserves on hand		APSTA.	対抗薬で
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		×
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		×
	If "Yes," see instructions and file Form 4720, Schedule N.		划掛除	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	1.2013222	×
. .	If "Yes," complete Form 4720, Schedule O.		400	202
			. n. 1694. 3	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.	See in:	struct	ions
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
Secti	ion A. Governing Body and Management		ı	
4	Entenths worth and the control of th	74 c · 46	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 15			4.4
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.	9		0.1
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 15	14.0		松
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		
4	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		×
6	Did the organization have members or stockholders?	6		×
7a	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?	7a		×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	XXX.	1748	1
	the year by the following:	1.10	د م دم عاد س	4.28
a	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C		
10a	Did the organization have local aboutors because as affiliated?	40-	Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a		<u>×</u>
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	" .33
b 12a	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	3 311575		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	×	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
,	describe in Schedule O how this was done	12c	×	
13	Did the organization have a written whistleblower policy?	13	×	
14	Did the organization have a written document retention and destruction policy?	14	×	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b	X	1001.1001
	, If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	本知识 以接致	(X) (2) (X) (4) (4) (X) (4) (4)	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×
b	If "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?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-7 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)	(Sec	tion 5	01(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest i	ooliev	. and
	financial statements available to the public during the tax year.	J. 550	- O.I.O.y	,
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	>	
	Organization 1403 Southwest Blad Kansas Cata KS 66103 (013) 677-5007			

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

- 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 no	or any relate	d org	anız	atic	n c	ompo	nsa	ted any curren	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office individua	unles	Pos ieck is pe	rson	e than of the state of the stat	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Courtney Brooks Board Member	1.00	×						0.	0.	0.
(2) Eric Borisouth Board Member	1.00	×						0.	0.	0.
(3) Layne Feldman Board Member	1.00	×						0.	0.	0.
(4) Mary Gonzales Board Member	1.00	×						0.	0.	0.
(5) Pastor Ruth Harder Board Member	1.00	×						0.	0.	0.
(6) Grace Lamberton Board Member	1.00	×						0.	0.	0.
(7)Ally Mabry Board Member	1.00	×						0.	0.	0.
(8) Scott Martens Board Member	1.00	×						0.	0.	0.
(9) Pastor Tom VanDuzer Board Member	1.00	×						0.	0.	0.
(10) Dr. Amanda Vega-Mavec Board Member	1.00	×						0.	0.	0.
(11)Charita Vine Board Member	1.00	×						0.	0.	0.
(12) Robert Spaniol Treasurer	2.00	×		×				0.	0.	0.
(13) Pete Cashen Vice-President	2.00	×		×				0.	0.	0.
(14) Rebecca Garza Secretary	2.00	×		×				0.	0.	0.

Par	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	yees		nd H	lighe	st C	ompensated E	mployees (ontinu	ed)
	(A) Name and title	(B) Average hours per	Position (do not check more than box, unless person is bot officer and a director/trus						(D) Reportable compensation	(E) Reportable compensation from related		(F) Estimated amount of
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		other compensation from the organization and related organizations
	heresa Reyes-Cummings resident	2.00	×		×				0.		0.	0.
(16) E	rin Stryka	40.00			×							
	xecutive Director				^				41,802.		0.	3,709.
(18)												· · · · · · · · · · · · · · · · · · ·
(21)			*******									
(22)												
(23)	*									-		
(24)												
(25)												
1b c	Sub-total	VII. Sectio	n A				•	>	41,802.		0.	3,709.
d 2	Total (add lines 1b and 1c)	t not limited		ose	lıst		_	►) wi	41,802. no received mo	ore than \$10	0.	3,709. of
)				· -	Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete of	ficer, direct Schedule J	tor, o for su	r tru ich i	uste Indi	e, I vidu	key e al .		loyee, or high	est comper	sated	3 ×
4	For any individual listed on line 1a, is the organization and related organizations individual											4 ×
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indi	vidual	
Section	on,B. Independent Contractors									•		
1	Complete this table for your five highest compensation from the organization. Repyear											
(A) Name and business address									(B) Description of se	ervices	((C) Compensation
								_				
2	Total number of independent contractor received more than \$100,000 of compens							the	ose listed abo	ve) who	,	

Form 990 (2018) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (C) Unrelated (B) Related or Revenue excluded from tax exempt function under sections 512-514 Grants Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns 1a Membership dues 0 1b Fundraising events . 13,875 1c Related organizations . . 1d 0 Government grants (contributions) 1e 76,313. All other contributions, gifts, grants, and similar amounts not included above 1f 285,942 Noncash contributions included in lines 1a-1f. \$ 5,942 Total. Add lines 1a-1f 376,413. Program Service Revenue **Business Code** Community room/rental 900009 9,550. 9,550. 2a b Garden and other program fees 531390 1,771. 1,771. 0. All other program service revenue. Total. Add lines 2a-2f. Investment income (including dividends, interest, 3 and other similar amounts) Income from investment of tax-exempt bond proceeds ▶ 5 Royalties (i) Real (II) Personal 6a . Gross rents b Less rental expenses Rental income or (loss) Net rental income or (loss) (i) Securities (II) Other 7a . . Gross amount from sales of assets other than inventory b ! Less. cost or other basis and sales expenses 1,125 c · Gain or (loss) . -1,125Net gain or (loss) -1,125. -1,125.Other Revenue Gross income from fundraising events (not including \$ 13,875. of contributions reported on line 1c). See Part IV, line 18 3,901 Less direct expenses . 5,591 c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 Less direct expenses c Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold . þ Net income or (loss) from sales of inventory. Miscellaneous Revenue **Business Code** 11a

384,919.

C

12

All other revenue

Total. Add lines 11a-11d.

Total revenue. See instructions

Part X Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b. 7b. (B) Program service (A) Total expenses (C) Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 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 Compensation of current officers, directors, trustees, and key employees . 35,363. 10,851. 1,116. 47,330. 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 6.778. 159,121. 123,709. 28,634. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 2,334. 1,411. 123. 800. 9 Other employee benefits 2,400. 2,319. 75. 6. 10 2,362. Payroll taxes . . . 15,741. 12,050. 1,329. 11 Fees for services (non-employees) Management b Legal . . 25,642 Accounting . 25,642. 0. Lobbying **对的一种的一种的一种的一种的一种** Professional fundraising services. See Part IV, line 17 Investment management fees . . Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule () 1,849. 12,307. 8,483. 1,975. 12 Advertising and promotion 13 18,575. 4,089. 3,080. Office expenses . . 25,744. 14 Information technology 15 Royalties 16 Occupancy 12,665. 9,751. 1,067. 1,847. 17 Travel 2,407. 2,406. 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 300. 684. 65. 1,049. 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization . 4,407. 3,397. 365. 645. 23 1,005. Insurance 7,467. 5,008. 1,454. 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.) 28,545. Program supplies/expense 28,545. а b C All other expenses

Total functional expenses. Add lines 1 through 24e 5,629. 1,700. 3,869. 60. 58,302. 41,469. 253,017. 25 352,788. Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Check if Schedule O contains a response or note to any line in this Part X	ÇΡ	art X	Balance Sheet	············		
Cash—non-interest-bearing	74			art X		
2 Savings and temporary cash investments 2 4 Accounts receivable, net 7 670.				" (A)		
3 Pledges and grants receivable, net 49,015 3 41,942. 4 Accounts receivable, net 7,455 7,455 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 6 Loans and other receivables from other disqualified persons (as defined under section 4956/(I)), persons described in section 4956/(I), persons described in section 4956/(I), persons described in the section 4956/(I), persons d		1	Cash—non-interest-bearing	95,653.	1	92,399.
A Accounts receivable, net 7, 453. 4 7, 670.		2	Savings and temporary cash investments		2	
tustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4558(f)), person described in section 4558(f)), person described in section 4558(f)), person described in section 4558(f), person described in section 4558(f), person described in section 4558(f)), person described in section 4558(f), person described in section 4558(f), person described in section 4558(f)), person described in section 4558(f), person described in 4564(f), person desc		3	Pledges and grants receivable, net	49,015.	3	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(I)II), persons described in section 4958(I)(S)(B), and contributing employers and sponsoring organizations of section 501(S)(B) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part IV of Schedule D 10b 59, 262. 11 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17, 472. 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 20 Total liabilities including federal income tax, payables to related third parties. 21 Unrestricted net assets 22 Total liabilities including federal income tax, payables to related third parties. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities including federal enables income tax, payables to related third parties. 26 Total liabilities including federal enables income tax, payables to related third parties. 27 Unrestricted net assets 28 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Total income tax politics. 32 Total lia		4	Accounts receivable, net	7,453.	4	7,670.
4958(f)(1), persons described in section 4958(c)(3)(8), and contributing employers and sponsorom organizations of section 501c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L		5	trustees, key employees, and highest compensated employees.		5	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 11 Investments – publicly traded securities 12 Investments – publicly traded securities 13 Investments – publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Loans and other payables to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties) 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 20 Capanizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 29 Permanently restricted net assets 20 Capanizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Pad-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Total liabilities and let assets/fund balances 31 Total liabilities and net assets/fund balances 31 Pad-in or capital surplus, or land, building, or equipment fund 32 Pad-in or capital surplus, or land, building, or equipment fund 31 Total liabilities and net assets/fund balances 32 Pad-in or capital surplus, or land, building, or equipment fund 31 Total liabilities and net assets/fund balances	ts	6	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		6	THE PERMIT
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 11 Investments – publicly traded securities 12 Investments – publicly traded securities 13 Investments – publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Loans and other payables to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties) 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 20 Capanizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34. 29 Permanently restricted net assets 20 Capanizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Pad-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 31 Total liabilities and let assets/fund balances 31 Total liabilities and net assets/fund balances 31 Pad-in or capital surplus, or land, building, or equipment fund 32 Pad-in or capital surplus, or land, building, or equipment fund 31 Total liabilities and net assets/fund balances 32 Pad-in or capital surplus, or land, building, or equipment fund 31 Total liabilities and net assets/fund balances	se	7	Notes and loans receivable, net		7	
10a	As	8		1,960.	8	0.
ther basis. Complete Part VI of Schedule D b Less: accumulated depreciation . 10b 59, 262. 388, 232. 10c 83, 115. 11 Investments—publicly traded securities . 11 Investments—publicly traded securities . 11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . 12 13 Investments—program-related. See Part IV, line 11 . 13 14 Intangble assets . 14 15 Other assets. See Part IV, line 11 . 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . 193, 071. 16 225, 935. 17 Accounts payable and accrued expenses . 17, 472. 17 19, 449. 18 Grants payable . 18 19 Deferred revenue . 2, 244. 19 1,000. 20 Tax-exempt bond liabilities . 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 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 . 19, 716. 26 20, 449. 27 Unrestricted net assets . 95, 280. 28 82, 341. 28 Temporarily restricted net assets . 95, 280. 28 82, 341. 29 Permanently restricted net assets . 95, 280. 28 82, 341. 30 Capital stock or trust principal, or current funds . 30 31 Pad-in or capital surplus, or land, building, or equipment fund . 31 32 Retained earnings, endowment, accumulated income, or other funds . 31 31 Total liabilities and net assets/fund balances . 173, 355. 33 205, 486. 34 Total liabilities and net assets/fund balances . 193, 071. 34 225, 935.		9	Prepaid expenses and deferred charges	758.	9	809.
11 Investments — publicly traded securities 11 Investments — other securities. See Part IV, line 11 12 Investments — program-related. See Part IV, line 11 13 Intangible assets 14 Intangible assets 14 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Intangible assets 16 Other assets. Add lines 1 through 15 (must equal line 34) 193, 071. 16 225, 935. 17 Accounts payable and accrued expenses 17, 472. 17 19, 449. 18 Grants payable 18 Intangible assets 19, 449. Intangible assets 19, 449. Intangible assets 17, 472. 17 19, 449. Intangible assets 19, 449. Intangible assets 17, 472. 17 19, 449. Intangible assets 18 Intangible assets 19, 449. Intangible asse		10a				
12		ь	Less: accumulated depreciation , . 10b 59, 262.	38,232.	10c	83,115.
13		11	Investments—publicly traded securities			
14		12				
15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 193,071 16 225,935 17,472 17 19,449 18 Grants payable and accrued expenses 17,472 17 19,449 18 19 Deferred revenue 2,244 19 1,000 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 26 20, 449 Unsecured notes and loans payable to unrelated third parties 26 20, 449 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 26 20, 449 Unsecured notes and loans payable to unrelated third parties 27 28 29 29 25 27 23, 145 29 29 29 29 29 29 29 2		13	· -			. <u></u>
16 Total assets. Add lines 1 through 15 (must equal line 34) 193,071. 16 225,935. 17 Accounts payable and accrued expenses 17,472. 17 19,449. 18 Grants payable 2,244. 19 1,000. 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 20 21 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 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 26 20,449 Unsecured notes and there 25 26 20,449 Unsecured notes and there 26 27 27 27 27 27 27 27			<u>~</u>			
17		1				205 205
18 Grants payable					_	
19 Deferred revenue 2,244. 19 1,000.			· · · · · · · · · · · · · · · · · · ·	17,472.		19,449.
Tax-exempt bond liabilities		_		2 244		1 000
Escrow or custodial account liability. Complete Part IV of Schedule D. 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. Secured mortgages and notes payable to unrelated third parties. Unsecured notes and loans payable to unrelated third parties. 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. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34. 10 Unrestricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment funds Total net assets or fund balances Total net assets or fund balances 173,355, 33 205,486. 173,355, 33 205,486. 173,071, 34 221 221 222 23 24 24 25 19,716, 26 20,449. 25 19,716, 26 20,449. 25 19,716, 26 20,449. 25 27 19,716, 26 20,449. 27 28 29 29 29 29 29 29 29 29 29				2,244.		1,000.
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			·			
trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	w			district francis of allegation	21 42745	
25 Secretary intrograges and hotes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 . 26 Total liabilities. Add lines 17 through 25	bilitie	22	trustees, key employees, highest compensated employees, and			
24 Unsecured notes and loans payable to unrelated third parties	Lia	23	· · · · · · · · · · · · · · · · · · ·			
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. 26 Total liabilities. Add lines 17 through 25		l .				
Total liabilities. Add lines 17 through 25		25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24) Complete Part X		25	
Organizations that follow SFAS 117 (ASC 958), check here		26	Total liabilities. Add lines 17 through 25	19,716.		20,449.
34 Total liabilities and net assets/fund balances	ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗵 and			
34 Total liabilities and net assets/fund balances	an	27	Unrestricted net assets	78,075.	27	123,145.
34 Total liabilities and net assets/fund balances	Bal	28	Temporarily restricted net assets	95,280.	28	82,341.
34 Total liabilities and net assets/fund balances	or Fund	29	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and		29	
34 Total liabilities and net assets/fund balances	sts	30				
34 Total liabilities and net assets/fund balances	SS	f				
34 Total liabilities and net assets/fund balances	it A	Ī				005
	Ž					
		34	Total liabilities and net assets/fund balances	193,071.	34	225, 935. Form 990 (2018)

REV 05/20/19 PRO

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Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	84,9	919.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	52,7	88.
3	Revenue less expenses. Subtract line 2 from line 1	3		32,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	73,3	355.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior 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	2	05,4	86.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			
				Yes	No
1	Accounting method used to prepare the Form 990 🗌 Cash 🗵 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O			1.00	YW.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	V044.1.14	X
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or		2	A SE
	reviewed on a separate basis, consolidated basis, or both		- A		3.4
	Separate basis Consolidated basis Both consolidated and separate basis		18.	11861	3, 1, 3, 4
b	The state of the s		2b	X	J.Sa.) July S.ze
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis			11.2.3.5.	40.50
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent accounts.		2c	X	c 15%
	If the organization changed either its oversight process or selection process during the tax year, exchedule O.	oplain in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		

Form **990** (2018)

SCHEDULE A (Form 990 or 990-EZ)

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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. OMB No 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

		organization					Zinpioyer identification				
_		Development Assoc					48-0886413				
Par		Reason for Public Cha						ons.			
1 2 3 4	_ A _ A _ A	zation is not a private founda church, convention of church school described in section hospital or a cooperative ho medical research organization pspital's name, city, and state	thes, or associati 1 70(b)(1)(A)(ii). Ispital service org on operated in co	ion of churches descr (Attach Schedule E (F ganization described i	ibed in s e form 990 n sectio i	ection 17 or 990-E n 170(b)(1	0(b)(1)(A)(i). Z).) I)(A)(iii).	(iii). Enter the			
5	☐ Ar	n organization operated for ection 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned c	r operate	ed by a government	al unit described in			
6 7											
8	□ A	community trust described	n section 170(b))(1)(A)(vi). (Complete	Part II.)						
9	or	n agricultural research organ university or a non-land-gra iiversity:									
10											
11		n organization organized and	•	•	-		* * * *				
12	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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.										
а		Type I. A supporting organithe supported organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	yority of t					
b		Type II. A supporting orga control or management of organization(s). You must	the supporting o	organization vested in	the same						
С		Type III functionally integits supported organization						ally integrated with,			
d		Type III non-functionally that is not functionally inte requirement (see instructional see instructions).	grated. The orga	nızation generally mu	st satisfy	a distribu	ition requirement an				
е		Check this box if the organ functionally integrated, or						e II, Type III			
f	Ente	er the number of supported	organizations .					[
g	Prov	vide the following informatio	n about the supp	orted organization(s).							
	(ı) Nan	ne of supported organization	(II) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
(A)		-									
(B)											
(C)	-,., -										
(D)											
(E)	•										

Total

Part							
	(Complete only if you checked t						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	<u> </u>
	on A. Public Support			1			
_	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017.	(e) 2018	(f) Total
1	Gifts, grants, contributions, and	,	_ '				
•	membership fees received. (Do not include any "unusual grants.")	211 004	7	,	233,237.	276 412	1,474,417.
٠,		311,084.	258,274.	295,409.	233,237.	3/6,413.	1,4/4,41/.
2	Tax revenues levied for the organization's benefit and either paid				٠,	*	
	to or expended on its behalf	, ,,,,,			,		,
3 .	The value of services or facilities				-		, .
_	furnished by a governmental unit to the				. 1		· .
	organization without charge						
. 4	Total. Add lines 1 through 3	311,084.	258,274.	295,409.	233,237.	376,413.	1,474,417:
5	The portion of total contributions by			A POWER	e de la company de la comp		•
	each person (other than a						
1	governmental unit or publicly			and the state of the		projectivity (c.	• • •
.,	supported organization) included on						, ,
•	line 1 that exceeds 2% of the amount shown on line 11, column (f)						04 436
6	Public support. Subtract line 5 from line 4	本作的 的情况				archerolameter	94,436. 1,379,981.
	on B. Total Support	RECOMMENDATION OF S		William Mark Assertant	THE THE SHE STREET	Constitute at meate	1,3/3,301.
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
· 7	Amounts from line 4	311,084.	258,274.	295,409.	233,237.		1,474,417.
8	Gross income from interest, dividends,	, , , , , , ,	,	•	· ·		
	payments received on securities loans,	,	•		, ,		t
	rents, royalties, and income from			•	,		
	sımilar sources	<u>,</u> 0.	0.	0.	0.	. 0.	. 0.
9	Net income from unrelated business			,	~	•	 ,
	activities, whether or not the business	,					
40	is regularly carried on		•		<u> </u>	•	
- 10	Other income. Do not include gain or loss from the sale of capital assets			•		•	
	(Explain in Part VI.)	, ,	0.	14,376.	39,422.	٠.٥.	53,798.
11	Total support. Add lines 7 through 10	State Company		TENONE CONTRA	THE REPORT OF THE		1,528,215.
12	Gross receipts from related activities, etc			- · · · · · ·	* * * *	12	(=,,
13	First five years. If the Form 990 is for the	he organization	ı's fırst, secon	d, third, fourth	, or fifth tax ye	ear as a section	on 501(c)(3)
	organization, check this box and stop he	re					▶ 🗆
<u>Secti</u>	on C. Computation of Public Suppo		_		* `	· · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2018 (line		_	1, column (f))		14	90.3 <u>%</u>
15	Public support percentage from 2017 Sci					15	90.64 %
16a	331/3% support test—2018. If the organ				nd line 14 is 30	31/3% or more,	
h	box and stop here. The organization qua 33 ¹ / ₃ % support test—2017. If the organi	•	• • •	_	o and line 15	in 221 mg/ or m	► 🛛
. b	this box and stop here. The organization					IS 33./370 OF II	iore, check
170		, -		_			d lina 14 is
17a `	10%-facts-and-circumstances test—2 10% or more, and if the organization me						
•	Part VI how the organization meets the '						
	organization						▶ □
b	10%-facts-and-circumstances test—2	017. If the org	anization did n	ot check a bo	x on line 13. 1	6a, 16b. or 17	a, and line
-	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization r						
•	supported organization						. ▶ □
18	Private foundation. If the organization de	id not check a	box on line 13	, 16a, 16b, 17a	ı, or 17b, chec	k this box and	see
•	instructions						🕨 📋

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

O4:	in the organization rails to quality	under the te	sis listed bei	ow, piease ci	omplete Fart	11.)	/
	on A. Public Support		# N 0015		1 1 0 0 0 1 7	4.) 0040	(0 T-4-1
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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						
3	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513			1			
4	Tax revenues levied for the		,			 / 	
4	organization's benefit and either paid to	1					
	or expended on its behalf	,				1	
5	The value of services or facilities	 	-			_	
Ū	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5				/		
7a	Amounts included on lines 1, 2, and 3			,	/ *	_	 -
•	received from disqualified persons .						
b	Amounts included on lines 2 and 3			1			
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		1	1			_
8		PART DAYS		1. 新斯斯斯斯 · 医克斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯	TORKER	Missing 3	
	line 6.)	WHE TO A STELL THE		CALL TO BE SEED OF	THE REAL PROPERTY.		
	on B. Total Support				·		· · · · ·
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6		/				
10a	Gross income from interest, dividends,	/	1				
	payments received on securities loans, rents, royalties, and income from similar sources.	. /					
h	•				•	 	<u> </u>
b	Unrelated business taxable income (less section 511 taxes) from businesses						,
	acquired after June 30, 1975						
С	Add lines 10a and 10b	/		}	 		<u> </u>
11	Net income from unrelated business	//			1		
••	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.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he						🕨 🔲
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line 8						%_
16	Public support percentage from 2017 Sch			<u> </u>		16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2018 (•			%_
18	Investment income percentage from 2017						%
19a	331/3% support tests—2018. If the organ						
	17 is not more than 331/3%, check this box	•	-				
b	331/3% support tests—2017. If the organiz						
	line 18 is not more than 331/3%, check this l		_	-			
20 /	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions ► 🗌

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b 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 Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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 **Part VI** 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
- 5a 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 **Part VI**, 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).
- **b** 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 73 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a 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.**
 - **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) 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.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** 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.)

		Yes	No
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h	9b		#32.03 #32.03
fit	9c		
n d	10a		
о	10b		

Part	Supporting Organizations (continued)		1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
b	A family member of a person described in (a) above?	11b		
С	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.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			N.
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			ri an
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	24775 24129		
	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, applied to such powers during the tax year.			
	organizations and what conditions of restrictions, if any, applied to such powers during the tax year.	1	en nene	20 C S 4985
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u> </u>	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations		14	
		Stant St.	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	4	200.00	<u> </u>
Secti	ion D. All Type III Supporting Organizations	<u> </u>		l
0000	on S. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	West of the	望.他感	B. A.S.
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the		2.74 i	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	فملكة خباته	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	100		in all
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			AND S
	significant voice in the organization's investment policies and in directing the use of the organization's		学时	
	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		
Secti	ion 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	instru	ctions	s).
а	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.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see ın:		
2	Activities Test. Answer (a) and (b) below.	President aus	Yes	No
а	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.		MER 2	Primi
_	•	2a	\$12241 H4F	Property Life and
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	2.5		
_	activities but for the organization's involvement.	2b	a Regraphica	SEE STAIN
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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.	3a	yanış əle diri	114 th 25080
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.	3b		

1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organizations.			
Section A-Adjusted Net Income		(A) Prior 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		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).	-		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	·	
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	1	FERREL TO F FARISH, PERC D
e 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		
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		
Section C-Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	y in	tegrated Type III supporting	g organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)	
Sect	ion D-Distributions		ł	Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	anizations	
4	Amounts paid to acquire exempt-use assets		······································	
5	Qualified set-aside amounts (prior IRS approval required)		······································	
	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	ch the organization is res	sponsive	
9	Distributable amount for 2018 from Section C, line 6	***************************************		
10	Line 8 amount divided by line 9 amount	T		
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2 ·	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.		PROTESSOR OF THE PROTES	The second secon
3	Excess distributions carryover, if any, to 2018			
a	From 2013			Cont. of Physical Reported Street, Physical Physical Street, Physical Physi
b	From 2014	TO THE PARTY OF TH		BURNESS OF THE STATE OF THE STA
c d	From 2015	read a state of the state of th		
е	From 2017			And the second s
f	Total of lines 3a through e	G-MARIE AND		2020 SIVANSE 1 22 SP 16 22 SP
. '	Applied to underdistributions of prior years		######################################	10 APP 18 SEASY SEE THE APP 18 CONTROL OF TH
<u> </u>	Applied to 2018 distributable amount .	SHATE OF THE LITTER PARTY		-
i	Carryover from 2013 not applied (see instructions)	A STATE OF THE PERSON OF THE P		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		## 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
4	Distributions for 2018 from		27 1 20 1 20 1 20 1 20 1 20 1 20 1 20 1	
	Section D, line 7 ⁻ \$			
а	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2018 distributable amount	Parish Committee of the	C. C. Salako Pari Pari Banan maka bana	
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.		28.25. 3.15. 22.25.38.25. do	A Million and Control
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
···	Part VI. See instructions.	President and profit that the brook shruter		
7	Excess distributions carryover to 2019. Add lines 3 _j and 4c.			
8	Breakdown of line 7.		A CONTRACTOR OF THE CONTRACT O	
а	Excess from 2014	THE PARTY OF THE P	PERSONAL PROPERTY.	
b	Excess from 2015	THE REPORT OF THE PARTY OF THE		THE WAR STATE
С	Excess from 2016	AMODERA AND SERVICE STATES		WINE ZONE TO THE THE
d	Excess from 2017			SW 100 COOK CO. SEC. Sec. 100
	Excess from 2019	SERVICE STREET,	HEROTE BUILDING FEET BOOK SOUTH	MATTER COMMISSION OF THE PARTY

Schedule A (Form 990 or 990-EZ) 2018

Part VI	III, line B, lines 3a, and	12; Pa s 1 and d 3b; Pa	rt IV, S 2; Par art V, I	Sectiont IV, Sine 1;	n A, Iı Sectic Part	nes 1 on C, V, Se	I, 2, 3 line 1 ection	b, 3c ; Part B, lin	, 4b, 4c IV, Sec e 1e; Pa	, 5a, 6, 9 tion D, li art V, Se	a, 9b, 9c, nes 2 and	11a, 11b 13; Part I nes 5, 6,	, and 11 V, Sectional and 8; a	lc; Part on E, lin nd Part	or 17b; Part IV, Section es 1c, 2a, 2b V, Section E,
Pt II L	n 10:	Other	Inco	ome E	Part	II,	Lın	e 10	Descr	ıption	: Sale	of land	held	for	
related	activ	rities	2014	1: 0.	201	.5:	0. 2	016:	14376	. 2017	: 39422	. 2018:	0.		·····
			•••••												
	·														
	·	·													
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2018

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

	see separate instructions), t				
• S	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	of organization			Employer ide	ntification number
	edale Development			48-0886	
Pari	I-A Complete if th	e organization is exempt und	er section 501	(c) or is a section 527	organization.
1	Provide a description o	f the organization's direct and in	direct political ca	ampaign activities in Par	t IV. (see instructions for
	definition of "political car				
2	Political campaign activity	ty expenditures (see instructions)			\$
3	Volunteer hours for politi	cal campaign activities (see instruc	ctions)		
		e organization is exempt und			
1		excise tax incurred by the organiza			\$
2		excise tax incurred by organization			\$
3		ed a section 4955 tax, did it file Fo	rm 4/20 for this y	/ear?	
4a b	Was a correction made? If "Yes," describe in Part				. Yes No
		e organization is exempt und	or coation FO1	(a) avant anation E01	1/0\/2\
					1(0)(3).
1	activities	ly expended by the filing organiz			2
2		filing organization's funds contrib			
2	527 exempt function acti		· · · · ·	_	
3	•	expenditures. Add lines 1 and 2			,
Ŭ		· · · · · · · · · · · · · · · · · · ·			
4		n file Form 1120-POL for this year			Yes No
5		ses and employer identification nur			
	organization made payme	ents. For each organization listed,	enter the amount	paid from the filing organ	ization's funds. Also enter
	the amount of political co	ontributions received that were pro-	mptly and directly	y delivered to a separate p	political organization, such
	as a separate segregated	fund or a political action committee	e (PAC). If additio	nal space is needed, provi	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
		z .			political organization
					If none, enter -0-
(1)					
(2)					
					· · · · · · · · · · · · · · · · · · ·
(3)					
(4)					
(5)					
(6)		l		1	

Scne	edule C (Form 990 or 990-EZ) 2018					Page 🗷				
Pa	rt II-A Complete if the organization section 501(h)).	is exempt ι	ınder section 5	01(c)(3) and file	d Form 5768 (el	ection under				
A	Check ► ☐ if the filing organization belong	s to an affiliate	ed group (and list	in Part IV each aff	liated group memi	per's name,				
	address, EIN, expenses, and s				5 1	•				
В	Check ► ☐ if the filing organization checking	ed box A and "	'limited control" pi	rovisions apply.						
	Limits on Lobby				(a) Filing	(b) Affiliated				
	(The term "expenditures" me			3	organization's totals	group totals				
1:	a Total lobbying expenditures to influence		<u> </u>	<u> </u>	250.					
	b Total lobbying expenditures to influence				0.	•				
	c Total lobbying expenditures (add lines 1a	-		9/ • • •	250.					
	d Other exempt purpose expenditures	u ,			352,538.					
	e Total exempt purpose expenditures (add	lines 1c and 1	 d)		352,788.					
	f Lobbying nontaxable amount. Enter t		•		332,700.					
	columns.	ne amount n	om the lonowing	g table in both	70,558.					
	If the amount on line 1e, column (a) or (b) is:	The lebbying	nontaxable amoun	• ia:	ENNISH EXPERSE					
	Not over \$500,000		nount on line 1e	t 15.						
	Over \$500,000 but not over \$1,000,000		15% of the excess	over \$500,000	44-24-4-7	and the second				
	Over \$1,000,000 but not over \$1,500,000		10% of the excess							
	Over \$1,500,000 but not over \$17,000,000		5% of the excess of							
	Over \$17,000,000	\$1,000,000.	370 Of the excess o	ver w1,500,000.						
	g Grassroots nontaxable amount (enter 259					ALK LESS LANGUES COME LA LA				
	h Subtract line 1g from line 1a. If zero or les	•			17,640.					
i	Subtract line 1f from line 1c. If zero or les	•			0.					
i	i If there is an amount other than zero			· · · · · · · · · · · · · · · · · · ·						
•	reporting section 4911 tax for this year?			-		Yes No				
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)									
	Lobbying	Expenditures	During 4-Year Av	veraging Period	·					
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total				
2	a Lobbying nontaxable amount	0.	0.	63,376.	70,558.	(133,934.				
t	Lobbying ceiling amount (150% of line 2a, column (e))					200,901.				
	Total lobbying expenditures	0.	0.	67.	250.	317.				
,	d Grassroots nontaxable amount									

33,484.

50,226.

317.

17,640.

250.

67.

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Schedu	uje C (Form 990 or 990-EZ) 2018					Page
Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 5768	3	
For (each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)		(b)	
	ription of the lobbying activity.	Yes	No	A	moun	t
1	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?	ļ				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?	-		34335 44613"	50 a 1113	KIN.
ч С						
d	Mailings to members, legislators, or the public?		-			
e f	Grants to other organizations for lobbying purposes?			 		
	Direct contact with legislators, their staffs, government officials, or a legislative body?		1			
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>	 		
i	Other activities?			 		
i	Total. Add lines 1c through 1i	# 13.5°	i die il.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	4444	in 11=11.	X 200	-last 1	الأو في الأ
b	If "Yes," enter the amount of any tax incurred under section 4912	,3:	· 11;	<u>^</u>		er in
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	170	12 C			
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ملئشة	الهاوم أو الماركة الأماركي أماركا	<u> </u>) dhai
	Complete if the organization is exempt under section 501(c)(4), section 501(c)	:1(5).	or se			
	501(c)(6).	7,-7,				
1,	Were substantially all (90% or more) dues received nondeductible by members?			1 2	Yes	No
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes.")(5), d)R (b)	or se Pari	ction III-A,	line	3, is
1	Dues, assessments and similar amounts from members		1			
2 a	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). Current year	of	2a			
b	Carryover from last year		2b			
С	Total		2c			
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	the ying	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Part			J			
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	un list	۱۰ Par	† II_Δ I	ines 1	anc
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
	\$,					

Schedule C (Form	990 or 990-EZ) 2018	age 4
Part IV	Supplemental Information (continued)	
	······································	
**-*		
	·	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	if the organization		Employer identification number
Ros	edale Development Association, Inc.		48-0886413
	t I Organizations Maintaining Donor Adv		nds or Accounts.
F	Complete if the organization answered		
		(a) Donor advised 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		– –
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or f	or any other purpose
	conferring impermissible private benefit?	<u> </u>	· · · · · · · Yes 🗌 No
Par	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recrea	-	f a historically important land area
	Protection of natural habitat	•	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribute	on in the form of a conservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
_			
b	Total acreage restricted by conservation easemen		
C	Number of conservation easements on a certified	* *	. 2c
ď	Number of conservation easements included in	•	
_	9		· · 2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or teri	minated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		
	violations, and enforcement of the conservation ea	isements it holds?	· · · · · ·
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcin	g conservation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspectir	ng, handling of violations, and enforcing	conservation easements during the year
	▶ \$		
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	f section 170(h)(4)(B)(i)
	and section $170(h)(4)(B)(ii)$?		· · · · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	e and expense statement, and
	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easeme		
Part	Organizations Maintaining Collection	s of Art. Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered		
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f		
h			
b	If the organization elected, as permitted under S		
	works of art, historical treasures, or other similar		ducation, or research in jurinerance of
	public service, provide the following amounts relat		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		> \$
'2	If the organization received or held works of art	, historical treasures, or other similai	r assets for financial gain, provide the
	following amounts required to be reported under S	FAS 116 (ASC 958) relating to these it	tems.
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		•

Page	2

Part	tellie – Organizations Mainta										
3	Using the organization's acquis collection items (check all that a		sion, and othe	r recor	ds, chec	k any of th	e follov	ving that are a s	ignifica	ınt use	of its
а	Public exhibition			d	Loan	or exchang	je prog	rams			
b	Scholarly research					_	-				
С	☐ Preservation for future gener	rations									
4	Provide a description of the org	anization's	collections and	d expla	in how t	hev further	the ord	ianization's exer	not pur	pose i	ın Part
	XIII.	,				,		,	• •		
5	During the year, did the organiz	zation solici	t or receive do	nation	s of art	historical tr	reasure	s or other simil	ar		
•	assets to be sold to raise funds								_	Yes [No
Pari	t IV Escrow and Custodia										
	Complete if the organize 990, Part X, line 21.			n For	m 990, F	Part IV, line	e 9, or	reported an ar	nount (on Foi	rm
1a	Is the organization an agent, tr included on Form 990, Part X?									Yes [☐ No
b	If "Yes," explain the arrangemen	nt in Part XII	I and complete	the fo	llowing ta	able.	_	A	mount		
С	Beginning balance						10	:			
ď	Additions during the year			•		•	10				
e	Distributions during the year						16				
f							11				
	Did the organization include an		., Form 000 Part						<u> </u>	Vas	
2a 5											
		it in Part XII	i. Check here ii	the ex	pianalio	mas been	provide	On Part Am.		<u>· </u>	
Far			(()/!) -		000 r	7 IV - II	- 10				
	Complete if the organiz							(d) Three years boo	() (a) E	our years	n back
	_	(a)	Current year	(b) Pro	or year	(c) Two year	rs back	(d) Three years bac	(e) FC	our years	- Dack
1a	Beginning of year balance .										
b	Contributions										
С	Net investment earnings, gains,	and									
	losses	· ·									
d	Grants or scholarships										
е	Other expenditures for facilities	and									
	programs										
f	Administrative expenses										
g	End of year balance	-									
2	Provide the estimated percentage		rrent vear end	halanc	e (line 10	column (a)) held	as			
a	Board designated or quasi-endo		-		e,, e	,, 001011111 (0	.,,				
b	Permanent endowment	%	9	U							
			0/								
С	Temporarily restricted endowme			0/							
2-	The percentages on lines 2a, 2b		•			املما حدد الم		minustared for th			
За	Are there endowment funds not organization by:	t in the pos	session of the	organi	zauon ma	at are neto	and ad	ministered for tr	1 C	14	
	,								<u> </u>	Yes	No
	(i) unrelated organizations			•		• •	• •		3a(
	(ii) related organizations								3a(i		
b	If "Yes" on line 3a(ii), are the rela	•		•			. :		3b	<u> </u>	
4	Describe in Part XIII the intender		-	s endo	wment fo	unds.					
Part											
	Complete if the organiz	zation ansv	vered "Yes" c	n For	m 990, F	Part IV, line	e 11a.	See Form 990.	Part X	(, line	<u>10.</u>
	Description of property		(a) Cost or other (investment)			or other basis other)		Accumulated epreciation	(d) B	look valu	he
1a	Land			0.		4,516.				4,	516.
b	Buildings		<u></u>		1	23,246.	,	46,968.		76,	278.
c	Leasehold improvements	• •				-,					
_			,			4.0., 4					
d	045	• •				14,615.		12,294.			321.
Total		· · ·	and Fam. 202	D=:4 \			Jo ,	14,434.			115.
otal.	. Add lines 1a through 1e. <i>(Columi</i>	n (a) must θ	quai rorm 990,	, rart)	, coiumr	<u>ı (в), iine 10</u>	/C)			11),	111.

Schedule D (F	form 990) 2018	•		- Page
Part VII	Investments - Other Securities.			
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV, li	ne 11b. See Forr	m 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation d-of-year market value
(1) Financia	al derivatives			
(2) Closely	-held equity interests			,
(3) Other		ı		
(A)				•
, (B)	,	* ,	•	مر
(C)	1			•
, (D)				
(E)	, ,	,	, .	
(F)	,	•	-	•
(G)	•		-	, , , , , , , , , , , , , , , , , , , ,
(H)	<u> </u>	4 _		•
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 12.) ▶	-	Manager Committee	
Part VIII	Investments-Program Related.	<u> </u>	Las Calanta survey of a servey of a	13 - 5 - 17 - 17 - 17 - 17 - 17 - 17 - 17
	Complete if the organization answered "Yes" on Fo	rm 990, Part IV. II	ne 11c. See Forr	n 990, Part X, line 13.
	(a) Description of investment	(b) Book value		ethod of valuation
	• • • • • • • • • • • • • • • • • • • •	,,,		d-of-year market value
(1)		•		
1(2)			•	
(3)		• •		1
(4)	•			, -
(5) '		1	+	•
(6)			-	
(7)	•		•	
		•	-	
(9)	*		 	
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			orthographic and the second
Part IX	Other Assets.	1 ' '	THE CONTROL OF THE STATE OF THE PARTY OF THE	alangan marang ang ang ang ang ang ang ang ang ang
	Complete if the organization answered "Yes" on For	rm 990 Part IV lu	ne 11d See Forr	n 990 Part X line 15
, ,	(a) Description	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ie i i a. dee i dii	(b) Book value
(1)		Ŧ I		(-,
			F	·
(3)				4
		"	•	
(4)				
(5)		•		•
(6)	•			,
(7) ·		7		
(8)				
(9) Table (0 /	()			
	umn (b) must equal Form 990, Part X, col (B) line 15.)		· ·	<u> </u>
₹Part X	Other Liabilities.			_
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lıı	ne 11e or 11f. Se	e Form 990, Part X,
	line 25.			
1.	(a) Description of liability (b) Book value	A 10 18 18 18 18 18 18 18 18 18 18 18 18 18	PROPERTY OF THE PROPERTY OF TH	

1.	(a) Description of liability	(b) Book value -	
(1) Federa	income taxes		
(2)			
(3)			
(4)		•	
(5)			
(6)	•	,	
(7)		κ.	
(8)			
(9)		•	
Total. (Colum	n (b) must equal Form 990, Part X, col. (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 tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Pan	Complete if the organization answered "Yes" on Form 990,		•	Return.	
1	Total revenue, gains, and other support per audited financial statements		v, iiie iza.	11	387,904.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•			307,304.
	Net unrealized gains (losses) on investments	2a			
a b	Donated services and use of facilities	2b	2 005		
	Recoveries of prior year grants	2c	2,985.		
C					
d	Other (Describe in Part XIII.)	2d		0-	2 005
e				2e	2,985.
3	Subtract line 2e from line 1	i .		3	384,919.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			1.0	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIII.)	4b			
C E	Add lines 4a and 4b			4c	224 212
5 1000	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		Mill Everence =	5 Deture	384,919.
Part	Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, I			er Keturi	1.
1	Total expenses and losses per audited financial statements	· unti	v, 11170 12a.	1	355,773.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1004	33377731
a	Donated services and use of facilities	2a	2,985.		
b		2b	2,300.		
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d	Zu		2e	2,985.
3	Culptropt line On from line 4	•		3	352,788.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	i ı		Sherre!	332,700.
		40			
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (December in Part VIII.)	4a 4b	., <u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
b	Other (Describe in Part XIII.)			40	
С 5	Add lines 4a and 4b			4c 5	352,788.
Part		e 10.)	· · · · · ·	<u> </u>	332,700.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4: Pa	art IV. lines 1b and 2	b. Part V. I	ne 4. Part X. line
	XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part				
			•		
	·				
•	•				
	ı				

•					
			•		
	·				
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Chedule D (Form 990) 2018 Page 5					
Part XIII	Supplemental Information (continued)				
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 48-0886413 Rosedale Development Association, Inc. Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 e Solicitation of non-government grants Mail solicitations а ☐ Internet and email solicitations ☐ Solicitation of government grants b Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, 2a or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (or retained by) fundraiser listed in (i) Name and address of individual (iv) Gross receipts (or retained by) organization (ii) Activity custody or control of contributions? or entity (fundraiser) from activity col (i) Yes No 1 2 3 4 5 6 7 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing.

Part II	Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more
	than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with
	gross receipts greater than \$5,000.

		gross receipts greater tria				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Disc Golf Tournament		NONE	(add col (a) through col (c))
			(event type)	(event type)	(total number)	COI (C))
ЭĞ						
Revenue	1	Gross receipts	17,776.			17,776.
Вe						
	2	Less Contributions	13,875.			13,875.
	3	Gross income (line 1 minus				
		line 2)	3,901.			3,901.
	4	Cash prizes	0.			0.
	5	Noncash prizes .	2,836.			2,836.
S						
se	6	Rent/facility costs	0.			0.
per			•			
Ä	7	Food and beverages	692.			692.
Direct Expenses						
ă	8	Entertainment .	0.			0.
_						
	9	Other direct expenses .	2,063.			_2,063.
	10	Direct expense summary. Ac				5,591.
	11	Net income summary Subtra			<u> </u>	-1,690.
Pa	rt III	Gaming. Complete if th	e organization answe	ered "Yes" on Form	990, Part IV, line 19,	or reported more than
		\$15,000 on Form 990-E	Z, line ba.		T	<u> </u>
ne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue				birigo/progressive birigo	· · · · · · · · · · · · · · · · · · ·	cor (a) throught cor (c))
Ğ.	_	_				
_	1	Gross revenue				
	_	On the second				
ses	2	Cash prizes				
Direct Expenses		Name and a side of				
X	3	Noncash prizes .		<u> </u>		
ct I		5				
ire	4	Rent/facility costs				
u	_	Other durent sures as				
	5	Other direct expenses .				
	_	Malauska su lala su	☐ Yes%			
	6	Volunteer labor	∐ No	☐ No	│	
7 Direct expense summary. Add lines 2 through 5 in column (d)						
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)	•	
			ū			
	7 8	Direct expense summary. Ad	ū			
	8	Net gaming income summar	y Subtract line 7 from li	ne 1, column (d)	· · · · · •	
9	. 8 En	Net gaming income summan	y Subtract line 7 from li	ne 1, column (d) .		□ Vas □ Na
	8 En a Is	Net gaming income summan nter the state(s) in which the or the organization licensed to co	y Subtract line 7 from li ganization conducts ga onduct gaming activities	ne 1, column (d) ming activities. s in each of these state	s ⁹	Yes No
	8 En a Is	Net gaming income summan nter the state(s) in which the or the organization licensed to co "No," explain	y Subtract line 7 from li ganization conducts ga onduct gaming activities	ne 1, column (d) ming activities. s in each of these state	s?	Yes No
	8 En a Is	Net gaming income summan nter the state(s) in which the or the organization licensed to co	y Subtract line 7 from li ganization conducts ga onduct gaming activities	ne 1, column (d) ming activities. s in each of these state	s?	Yes No
	En a Is b If '	Net gaming income summan nter the state(s) in which the or the organization licensed to co "No," explain	y Subtract line 7 from li ganization conducts ga onduct gaming activities	ne 1, column (d) ming activities. s in each of these state	s ²	
10	En ls b lf '	Net gaming income summan nter the state(s) in which the or the organization licensed to co "No," explain	y Subtract line 7 from li ganization conducts ga onduct gaming activities aming licenses revoked	ne 1, column (d) ming activities. s in each of these states	s?	Yes . No
10	En ls b lf '	Net gaming income summan nter the state(s) in which the or the organization licensed to co "No," explain	y Subtract line 7 from li ganization conducts ga onduct gaming activities	ne 1, column (d) ming activities. s in each of these states	s?	Yes . No
10	En ls b lf '	Net gaming income summan nter the state(s) in which the or the organization licensed to co "No," explain	y Subtract line 7 from li ganization conducts ga onduct gaming activities aming licenses revoked	ne 1, column (d) ming activities. s in each of these states	s?	Yes . No

Schedu	ule G (Form 990 or 990-EZ) 2018
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in.
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name ▶
	Address ▶
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party.
	Name ►
	Address ▶
16	Gaming manager information
	Name ▶
	Gaming manager compensation ► \$
	Description of services provided ▶
	□ Director/officer □ Employee □ Independent contractor
17	Mandatory distributions
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
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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.

2018 Open to Public

Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ Go to www.irs.gov/Form990 for the latest information.

Rosedale Development Association, Inc.	48-0886413
Pt VI, Line 11b: A copy of the Form 990 was distributed to all	
Board of Directors prior to filing. Members of the Board of I	Directors were asked
to provide comments and questions to the Executive Director, I	reasurer and CPA.
Members of the Board of Directors approved filing of the Form	n 990 at a board
meeting prior to filing.	
Pt VI, Line 12c: The organization's staff maintains forms comp	oleted by members
of the Board of Directors of potential conflicts and updates t	this information
throughout the year. If questions related to a potential conf	flict 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 begins.	
Pt VI, Line 15a: Compensation of the Executive Director is dis	scussed by the
Board of Directors as part of the annual budgeting process.	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 15b: Compensation for key employees is set based of	on comparison to
similarly situated employees at comparable not-for-profit orga	nizatıons using
salary surveys. Experience and credentials are considered. [Decisions are documented
in personnel files.	
Pt VI, Line 19: The organization's annual Form 990 is available	le at guidestar.org.
The organization's financial statements, governing documents,	and conflict of