OMB No 1545-0047

(Rev January 2020)

 ✓ Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2019 ▶ Do not enter social security numbers on this form as it may be made public Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection 2019, and ending 20 For the 2019 calendar year, or tax year beginning January 1 December 31 19 D Employer identification number C Name of organization Vancouver Downtown Association Check if applicable Address change Doing business as 91-1816711 Number and street (or P O box if mail is not delivered to street address) Name change Room/suite E Telephone number Initial return 360 258-1129 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return Vancouver, WA 98660 240,582 Application pending F Name and address of principal officer Michael Walker, Executive Director H(a) Is this a group return for subordinates? Yes No H(b) Are all subordinates included? Yes No 811 Main Street, Vancouver, WA 98660) < (insert no) 4947(a)(1) or If "No," attach a list (see instructions) Tax-exempt status 501(c)(3) __ 501(c) (Website: ▶ vdausa.org H(c) Group exemption number ▶ Form of organization
☐ Corporation
☐ Trust
☐ Association
☐ Other ► L Year of formation 1989 M State of legal domicile WA Briefly describe the organization's mission or most significant activities: To revitalize downtown Vancouver, WA for the purpose of attracting residents, non residents and businesses in which Activities & Governance to live, work and play. 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 13 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 3 6 Total number of volunteers (estimate if necessary) 6 35 Total unrelated business revenue from Part VIII, cell 7a 7a Net unrelated business taxable income from Form Prior Year Current Year Contributions and grants (Part VIII, line 1h) 8 325,208 240,196 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 1341 A 10 21 389 Other revenue (Part VIII, column (A), lines 5, 6d, 80 11 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 325,229 240,582 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 4,525 14 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 95,660 60,146 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 186,394 116.688 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 286,579 176,834 19 Revenue less expenses Subtract line 18 from line 12 38,650 63,748 **End of Year Beginning of Current Year** Balance 20 Total assets (Part X, line 16) 295,572 21 Total liabilities (Part X, line 26) . 1,885 8,596 22 Net assets or fund balances. Subtract line 21 from line 20 286,976 Part II Signature Block Under penalties of perjury, I deflare that I have exampled this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is Declaration of prepare other than officer) is based on all information of which preparer has any knowledge true, correct, and complete Sign Here Type or print name and title PTIN Print/Type preparer's name Check 🗹 if **Paid** Kgreen self-employed Jackie McGreevey P01607217 Preparer Firm's name ► For A Song LLC Firm's EIN ▶ 27-0094546 **Use Only** Firm's address ▶ PO Box 455, Ridgefield, WA 98642 Phone no 360 910-4544

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Cat No. 11282Y

✓ Yes □ No Form 990 (2019)



orm 99	(2019) Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	/ancouver Downtown Association was incorporated in 1989 and continues to conduct a variety of revitalization activities that
	strengthen our greater downtown community. We keep downtown vibrant.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
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 \$ 111,227 including grants of \$ 53,990) (Revenue \$ 104,475)
	To create a vital and attractive downtown environment, to encourage residents to participate in the city's community events, and to
	support local businesses.
	To accomplish this work, we follow the Washington Main Street Program, a unique preservation-based economic development
	program that enables communities to revitalize downtown and neighborhood business districts by leveraging local assets - from historic, cultural, and architectural resources to local enterprises and community pride.
	issure, cultural, and architectural resources to local emerprises and community price.
4b	(Code:) (Expenses \$ncluding grants of \$) (Revenue \$)
4c	Code: (Code: (Co

) (Revenue \$

 4d
 Other program services (Describe on Schedule O.)

 (Expenses \$ including grants of \$

 4e
 Total program service expenses ▶ 111,227



Form 99	0 (2019)		` F	Page 3
Part	V Checklist of Required Schedules			
		r	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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	7	
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		1
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 "Yes," complete Schedule C, Part II</i>	4		1
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		1
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? If "Yes," complete Schedule D, Part II	7		1
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 donor-restricted endowments or in 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, VIII, 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		1
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		1
е	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	:	✓
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		1
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	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓

Part	V 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		1
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	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		√
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		√
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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		1
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		1
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		1
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</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? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	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? If "Yes," complete Schedule R, Part VI	37		1
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	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	1	

Part	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			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	V	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	-		
70	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country ▶			<u> </u>
•	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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Ť
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		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
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		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
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			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12] :		ŀ
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:			ļ
а	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.)	ļ		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			ĺ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	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			ĺ
	the organization is licensed to issue qualified health plans			1
C	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		/
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b	L	├
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			١.
	excess parachute payment(s) during the year?	15	L	✓
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	<u>. </u>	✓
	If "Yes," complete Form 4720, Schedule O.	1		1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	istruc	tions
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 13	4 1		
	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 on Schedule O.	T		
b	Enter the number of voting members included on line 1a, above, who are independent 15 13	,		1
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 supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	<u> </u>	1
6	Did the organization have members or stockholders?	6	<u> </u>	1
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		1
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		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	1	ļ
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 on Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C) T - : -
4.0	D. 10	40-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	-	✓
b	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	✓	+ -
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	 	7
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b	\vdash	├-
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14		7
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		1
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
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		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Washington			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(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 on Schedule O)			501(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f intei	rest p	oolicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	
	Vancouver's Downtown Association, 911 Main Street, Vancouver, WA 99660			

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

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

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

- 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. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Column C	Check this box if neither the organization no	any relate	l	Q1 11Z		C)	ompe	1134	lied any corrent	Jilicer, director,	Tradice.
Name and title	(A)	(0)				-			(0)	(5)	(5)
Company Comp	* *	1 '					i				
Compensation Comp	Name and title							1			
(1) Linda Reid President (2) Linda Glover Vice President (3) Adam Murray Secretary (4) Shara Wokal Treasurer (5) Michael Lary (6) Christie Rust (7) Dan Wyatt Jr. (8) Esther Cho Liu (9) Andy Cornett (10) Michaelle Thor (11) Lindsey Norberg (12) Linda Glover (5) Ø (6) Christie Rust (7) Dan Wyatt Jr. (8) Esther Cho Liu (9) Andy Cornett (10) Michaelle Thor (11) Lindsey Norberg (12) Richard Burrows (13) Celinda Rupert (14) Michael Walker		1 '		T				<u> </u>			
(1) Linda Reid President (2) Linda Glover Vice President (3) Adam Murray Secretary (4) Shara Wokal Treasurer (5) Michael Lary (6) Christie Rust (7) Dan Wyatt Jr. (8) Esther Cho Liu (9) Andy Cornett (10) Michaelle Thor (11) Lindsey Norberg (12) Linda Glover (5) Ø (6) Christie Rust (7) Dan Wyatt Jr. (8) Esther Cho Liu (9) Andy Cornett (10) Michaelle Thor (11) Lindsey Norberg (12) Richard Burrows (13) Celinda Rupert (14) Michael Walker			호호	Į st	Ę,	\ <u>\$</u>	를 들	ă			
(1) Linda Reid President (2) Linda Glover Vice President (3) Adam Murray Secretary (4) Shara Wokal Treasurer (5) Michael Lary (6) Christie Rust (7) Dan Wyatt Jr. (8) Esther Cho Liu (9) Andy Cornett (10) Michaelle Thor (11) Lindsey Norberg (12) Linda Glover (5) Ø (6) Christie Rust (7) Dan Wyatt Jr. (8) Esther Cho Liu (9) Andy Cornett (10) Michaelle Thor (11) Lindsey Norberg (12) Richard Burrows (13) Celinda Rupert (14) Michael Walker			호합	₫	۳.	ğ	yet c	(역	(** = *********************************	(
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President	(1) Linda Reid	 				ļ —	_				
(2) Linda Glover Vice President V		†	1 🗸		1				O	o	o
Vice President		1		İ							
(3) Adam Murray		†	1		1				0	o	o
Secretary			<u> </u>	┢	Ė						
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✓ 0 0 0 (14) Michael Walker 0 0 0 0	(13) Celinda Rupert				\Box						
	32	1	11					}	0	d) a
	(14) Michael Walker					Γ.					
	Executive Director	T]			✓			24,375	o	o

Part	VII Section A. Officers, Directors, 1	rustees,	Key i	=m			s, an	a r	lignest Compe	nsatea	Emplo	yees (contini	uea)
`	(A) Name and title	(B) Average hours	(C) Position (do not check more than or box, unless person is both a officer and a director/truste		an	(D) Reportable compensation	(E) Report compen	able sation	(F) Estimated amon					
-	-	per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from re organiza (W-2/1099	ations	fro organ	pensatio om the ization a organiza	ınd
(15)							<u> </u>			_				
(16)														
(17)					-									
(18)														
(19)				-										
(20)					-									
(21)					-									
(22)														
(23)														
(24)														
(25)					-									
1b c	Subtotal	VII, Sectio	n A	-				▶	24,375		0			0
d	Total (add lines 1b and 1c)							<u>►</u> ?) w	24,375 tho received mor		00,000			0
	reportable compensation from the organi	zation >											Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8										ensated 	3		√
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	porta	ble	con	npe	nsatio	n a	and other compe	nsation fr				
5	Individual											4		✓
	for services rendered to the organization on B. Independent Contractors											5		✓
1	Complete this table for your five high compensation from the organization. Repr													
	(A) Name and business add		Sauoi	11 101	LIR	- Ca	lenuai	ye	(B) Description of services			(C) Compens		eai.
	tallo dillo dillo di la													
										· · ·				
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abov	e) who				

-Part	VIII	Statement of Revenue Check if Schedule O contains a re	enon	se or note to an	v line in this Pa	rt VIII		
		Check is deficable of contains a re	эроп	se of flote to diff	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
इ इ	1a	Federated campaigns	1a		· · · · · · · · · · · · · · · · · · ·			
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues	1b					
عَ ق	C	Fundraising events	1c	2,305	1			
ĭ ŝ	d	Related organizations	1d		<u>'</u>			
5 E	O	Government grants (contributions)	1c	187,228		ļ i	. '	, ,
Sic	f	All other contributions, gifts, grants,		[r			•
真真		and similar amounts not included above	1f	50,660		,		
\$8	g	Noncash contributions included in			•	, ,		,
בי בו		lines 1a-1f	1 <u>g</u>	15		,		1
- 0	h	Total. Add lines 1a-1f	•	Business Code	240,193			
o l	00			Business Code				
Z vic	2a b							
Program Service Revenue	C				-			
E S	d							1
gra Re	e							
Pro	f	All other program service revenue .			·····			
_	9	Total. Add lines 2a-2f		▶				
	3	Investment income (including divid						
		other similar amounts)		▶	389	389		
	4	Income from investment of tax-exem	ipt bo	ond proceeds ►				
	5	Royalties						
	_	(i) Real		(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b						
	C	Rental income or (loss) 6c						
	đ	Net rental income or (loss)		(II) Other	, 	-		
	7a	Gross amount from	162	(ii) Otriei				
		sales of assets other than inventory 7a				()		·
9	ь	Less' cost or other basis		 				
Revenue		and sales expenses . 7b						
eve	С	Gain or (loss) 7c						
	d	Net gain or (loss)		•				
Othe	8a	Gross income from fundraising						
Ò		events (not including \$						
		of contributions reported on line						
		1c). See Part IV, line 18	8a					
		Less. direct expenses	8b				1	
		Net income or (loss) from fundraising	g eve	ents ►	· · · · · · · · · · · · · · · · · · ·			
	9a	Gross income from gaming activities. See Part IV, line 19	9a					
		Less: direct expenses	9b					
		Net income or (loss) from gaming ac		es				<u> </u>
	1	Gross sales of inventory, less						
	.va	returns and allowances	10a	ļ				
	b	Less: cost of goods sold	10b	 				
		Net income or (loss) from sales of in	vento	ory ▶				
<u>s</u>				Business Code	=	1		' ', ' '
eon	11a		. .					
scellaned Revenue	b							
e ell	С							ļ.
Miscellaneous Revenue	d	All other revenue		L				
		Total. Add lines 11a-11d	•	<u> ▶</u>				
	12	Total revenue. See instructions		_	24N 5R2	389		i

Form 990 (2019) Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All	other organizations	must complete colun	nn (A).
	Check if Schedule O contains a response				🗖
	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 .	-	-		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	55,447	27,239	14,589	13,620
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,699	2,350	1,175	1,175
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	3,390	1,695	848	848
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.) .	7,537	5,198	2,339	
12	Advertising and promotion	1,332	500		832
13	Office expenses	7,425	5,215	1,352	859
14	Information technology	6,957	3,478	1,739	1,739
15	Royalties		·		
16	Occupancy	13,210	7,094	3,093	3,093
17	Travel	4,144	801	3,342	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	6,434		6,434	
20	Interest		_		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,713	1,356	678	678
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a	Maintenance	29,319	28,440	879	
b	Awards	750	750		
C	Marketing	3,384	3,122		229
d	Program Supplies	13,167	13,167		
e	All other expenses	16,926	10,788	4,907	1,231
25	Total functional expenses. Add lines 1 through 24e	176,834	111,227	41,374	24,233
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year Cash – non-interest-bearing 1 109,615 179,695 2 2 Savings and temporary cash investments 115,500 115,877 3 3 4 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 7 Assets 8 8 9 9 Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D . . . | 10a Less: accumulated depreciation 10b 10c 4,464 Investments—publicly traded securities 11 11 12 12 Investments—other securities. See Part IV, line 11 . 13 Investments—program-related. See Part IV, line 11. 13 14 14 15 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33). 16 229,579 295,572 1,885 17 17 8,596 18 18 19 Deferred revenue . . . 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 26 1,885 8,596 Net Assets or Fund Balances Organizations that follow FASB ASC 958, check here ▶ □ and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 27 27 227,694 28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds . . . 32 32 227.694 286,976 33 Total liabilities and net assets/fund balances <u>229,579</u> 33 295,572

Form 99	90 (2019)			Pa	age 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>		. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	40,582
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	76 <u>,83</u> 4
3	Revenue less expenses. Subtract line 2 from line 1	3		(63,74 <u>8</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		2:	27,694
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			<u>-4,466</u>
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		2	<u>86,976</u>
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," e	xplaın	ın	1	
	Schedule O.			<u> </u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or	1	
	reviewed on a separate basis, consolidated basis, or both:		1	}	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted on	a		1
	separate basis, consolidated basis, or both:			Ì	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		<u> </u>		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	of	1	
	the audit, review, or compilation of its financial statements and selection of an independent accounta	ınt? .	2c		l
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain (on		1
	Schedule O.		<u> </u>	_	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in t	he		
	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 und	lergo t	he		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits .	3b		

Form **990** (2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2019

Open to Public ation. Inspection

Employer identification number

	couver's Downtown Association					91-18	
_	rt I Reason for Public Char						ns.
	organization is not a private foundat		•		-	•	. 1
1	☐ A church, convention of church						α +
2	A school described in section		•			• •	U,
3	☐ A hospital or a cooperative hos☐ A medical research organizatio						iii) Entar tha
4	hospital's name, city, and state	•	injunction with a nost	Jilai uesc	indea iii s	ection motor(man	ing. Citter the
5		he benefit of a	college or university	owned o	r operate	ed by a government	al unit described in
6	A federal, state, or local govern	· ·	mental unit described	l in sactio	on 170/h)	(1)(A)(₄)	
7		receives a subst	tantial part of its sup				the general public
8	☐ A community trust described in	section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organizer or university or a non-land-granuniversity:						
10	An organization that normally receipts from activities related support from gross investment acquired by the organization af	to its exempt fui income and uni	nctions—subject to co related business taxal	ertain exc ble incom	ceptions, ne (less se	and (2) no more that ection 511 tax) from	n 331/3% of its
11		•	•		•	•	
12	<u> </u>	•	•	-			ry out the purposes
	of one or more publicly support	•		-			
	Check the box in lines 12a throi	ugh 12d that des	scribes the type of sup	porting o	organizati	on and complete line	s 12e, 12f, and 12g
а							
	the supported organization supporting organization. You	ou must comple	ete Part IV, Sections	A and B	•		
t	Type II. A supporting organization(s). You must of	he supporting o	rganızation vested ın	the same			
c	Type III functionally integrits supported organization(s						ally integrated with,
c	d Type III non-functionally in		•				orted organization(s
	that is not functionally integ		•	•		•	d an attentiveness
	requirement (see instruction	ns). You must c	omplete Part IV, Sec	tions A a	and D, ar	nd Part V.	
e	functionally integrated, or T	ype III non-func	tionally integrated sur	oporting o			e II, Type III
f	Enter the number of supported o						· · [
<u>c</u>	Provide the following information					4.5.4	(3 41 -6
	(i) Name of supported organization	(ii) EiN	(iii) Type of organization (described on lines 1–10	listed in you	rganization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
			above (see instructions))	docu	ment?	instructions)	instructions)
				Yes	No		
A)							
B)							
C)				<u> </u>			
D)							
E)							
lota							

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

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

Section A. Public Support

	January (anticocky con beginning in)	(a) 2015	(h) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	dar year (or fiscal year beginning in) Gifts, grants, contributions, and	(a) 2015	(b) 2016	(C) 2017	(a) 2018	(e) 2019	(i) Total
1	membership fees received (Do not				_	-	
	include any "unusual grants.")	100 645	220 020	270 166	225 200	240,196	1 227 052
2	Tax revenues levied for the	180,645	220,838	270,166	325,208	240,196	1,237,053
_	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge]	
4	Total. Add lines 1 through 3	180,645	220.838	270,166	325,208	240,196	1,237,053
5	The portion of total contributions by	100,000					.,
3	each person (other than a						
	governmental unit or publicly	i					
	supported organization) included on						
	line 1 that exceeds 2% of the amount	1					
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,237,053
Section	on B. Total Support	•		•			
Calend	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	180,645	220,838	270,166	325,208	240,196	1,237,053
8	Gross income from interest, dividends,						_
	payments received on securities loans,						
	rents, royalties, and income from						
	sımılar sources	177	177	178	21	389	942
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or	,]				
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1,237,995
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for th	-			, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop her		· · · ·			· · · · ·	· · • U
	on C. Computation of Public Suppor						
14	Public support percentage for 2019 (line 6		-			14	99.9 %
15	Public support percentage from 2018 Sch	iedule A, Part I	l, line 14 .			15	99.9 %
10a	331/3% support test—2019. If the organization qual	zation did not i	check the box	organization	id lifte 14 is 33	5'/3% OF THOIE,	
h	33 ¹ /3% support test—2018. If the organization	•		_			
b	this box and stop here. The organization						
17a	10%-facts-and-circumstances test-20						
	10% or more, and if the organization me						
	Part VI how the organization meets the "t	facts-and-circu		_		s as a publicly	supported
	organization						▶ 🗆
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization in				i ne organizati	on qualifies as	a publicly
	supported organization						. •
18	Private foundation. If the organization did						
	instructions	· · · · ·	· · · ·	<u> </u>	• • • • •	· · · · ·	🏲 📋

Part	Support Schedule for Organiza (Complete only if you checked the				nization failed	i to qualify un	der Part II.
•	If the organization fails to qualify						7
Secti	on A. Public Support			, [/	_
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 201/9	(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	\	i				
	organization's tax-exempt purpose	\					
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	\					
4	Tax revenues levied for the						
	organization's benefit and either paid to	ĺ '	\				
	or expended on its behalf		\				
5	The value of services or facilities			/	,		
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						·
7a	Amounts included on lines 1, 2, and 3		\				
	received from disqualified persons .						
b	Amounts included on lines 2 and 3		\		:	·	
	received from other than disqualified		l Y				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b			<u> </u>			
8	Public support. (Subtract line 7c from			\			
C4:	line 6.)		/				
	on B. Total Support	(2) 0015	(b) 0016	(5) 0017	(4) 0010	(-) 0010	46 Total
Galen 9	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2015/	(b) 2016	(c)\2017	(d) 2018	(e) 2019	(f) Total
9 10a	Amounts from line 6						
iva	payments received on securities loans, rents,	/		\			
	royalties, and income from similar sources.			\			
h	Unrelated business taxable income (less	/				· - · · · · · · ·	
U	section 511 taxes) from businesses	Y		\			
	acquired after June 30, 1975			`			
С	Add lines 10a and 10b				\		
11	Net income from unrelated business						
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on	:			\		
12	Other income. Do not include gain or						
	loss from the sale of capital/assets				\		
	(Explain in Part VI.)				\		
13	Total support. (Add lines 9, 10c, 11,						
	and 12.) /				`		
14	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he				<u> </u>	<u>.\</u>	. ▶ □
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2019 (line		-			15	<u>%</u>
16	Public support percentage from 2018 Sc			<u> </u>	<u> </u>	16 1	<u>%</u>
	on D. Computation of Investment In				40.	1.5	
17	Investment income percentage for 2019	•		-		17	<u>%</u>
18	Investment income percentage from 201					18	<u>%</u>
19a	331/3% support tests—2019. If the organ						_
	1/7 is not more than 331/3%, check this box		_			- 1	_
b	331/3% support tests—2018. If the organiz						\
	line 18 is not more than 331/3%, check this	•	_	=	-	•	\ _
20	Private foundation. If the organization d	d not check a	box on line 14	, 19a, or 19b, c	neck this box	and see instruc	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.)

Sect	on A. All Supporting Organizations			
			Yes	No
1	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.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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.	3b		
С	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			
42	Was any supported organization not organized in the United States ("foreign supported organization")? If	3c	1	
-74	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
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.	4b		<u> </u>
С	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.	4c		
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).	5a	ļ	
D	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?		ļ	
_		5b 5c		
6	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	30		
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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 .	-		
h	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a		
U	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	90		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
iva	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.	10a		
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.)

10b

Page	5
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Part	V Supporting Organizations (continued)			
•			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		
	A family member of a person described in (a) above?	11b		
	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		
Section	on B. Type I Supporting Organizations			
	Did the directors trucked or membership of one or more consisted average sticks have the new or to		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
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,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	ŀ		
	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).	1		
Section	on D. All Type III Supporting Organizations	l•		l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (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			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
2		2		1
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on 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 i	nstru	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.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	_	
2	Activities Test. Answer (a) and (b) below.		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,	1		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			1
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
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		,
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<u> </u>
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
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)
1 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		
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 int	egrated Type III supporti	ng organization (see

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continuea)	· - · · <u> · · · · · · · · · · · </u>
Sècti	Current Year			
1	Amounts paid to supported organizations to accomplish			
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			
4	Amounts paid to acquire exempt-use assets	, , , , , , , , , , , , , , , , , , , ,		
5	Qualified set-aside amounts (prior IRS approval required)	 		
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E-Distribution Allocations (see Instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019	,		
а	From 2014			
	From 2015			
С	From 2016			
d	From 2017			Ι μ •
е	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			<u> </u>
	Applied to 2019 distributable amount			
<u> </u>	Carryover from 2014 not applied (see instructions)			
<u>_</u> j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from		1	, ,
.,-	Section D, line 7: \$			
<u>a</u>	Applied to underdistributions of prior years		·	
b	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.		<u> </u>	
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			4.4 F
á	Excess from 2015			
b	Excess from 2016		,	
С	Excess from 2017	, s = 0		μ, ι α
d	Excess from 2018		ı	
е	Excess from 2019			, , , , , , , , , , , , , , , , , , , ,

Part VI.	III, line 12 B, lines 1	?; Part IV and 2; F b; Part V	, Section Part IV, So /, line 1; f	A, lines ection C Part V, S	1, 2, 3b , line 1; ection E	, 3c, 4b Part IV, 3, line 1	o, 4c, 5a Section e; Part	i, 6, 9a, n D, line V, Sectio	9b, 9c, s 2 and on D, lir	11a, 11 3; Part nes 5, 6,	b, and 1 IV, Secti and 8; a	1c; Part IV on E, lines and Part V	r 17b; Part r, Section s 1c, 2a, 2b, , Section E,
	-			_	_	_			_	_	_	•	
												•	
													
••••													
			•										
						·							
													

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019

Open to Public

Inspection

Name of the organization **Employer identification number** Vancouver's Downtown Association 91-1816711 Form 990, Part VI, line 11b - Organization's review process The completed Form 990 is prepared by an enrolled agent. It was then submitted to the Executive Committee and Board of Directors for review, approval and signature. Form 990, Part VI, Line 12c - Conflict of Interest Policy The conflict of interest policy is monitored and reviewed annually Form 990, Part VI, Line 15 The compensation of the Executive Director and other employees is reviewed annually by the Board of Directors. Form 990, Part VI, Line 19 Vancouver's Downtown Association makes it's governing documents available to the public upon request. Form 990, Part XI, Line 8 - Reconciliation of Net Assets The asset "office buildout" from 2009, was no longer valid, thus a journal entry was made to remove it from the Balance Sheet creating a prior period adjustment bringing that fixed asset to zero.