29490065120	106	1
_	OMB No	1545-0047

990 Form

(Rev January 2020)

Return of Organization Exempt From Income Tax

2019

Department of the Treasury

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.

Open to Public

	ai Revenu			ww.iis.gov/roiliisso	TOT ITISE UCCIOITS &	and the latest in	Ormation.			pection	
<u>A </u>	For the	2019 calendar y	ear, or tax year begin	ning	07-	-01 , 2019, and	dending		06-30 ,202	0	
	Check if a	pplicable	C Name of organizationCh	apel Hill Down	town Partne	rship Inc.		P	D Employer identification number		
X	Address c	hange	Doing business as						20-15612	19	
۰ ك	Name cha	nge	Number and street (or P	D box if mail is not delivered	I to street address)	R	oom/suite	E	Telephone number		
Ш ∙	nitial retur	'n	28 E Franklın	St Suite 240					(919) 967	-9440	
□ ·	inal retur	n/terminated	City or town, state or prov	vince, country, and ZIP or for	eign postal code			G	Gross receipts		
	Amended	return	Chapel Hill, NO	27514					\$	510,908	
	Application	n pending	F Name and address of prii	ncipal officer Matt Gl	addek		H(a)	Is this a group	return for subordinates?	Yes X No	
			Same as C above	•		**	7 H(b)	Are all subc	ordinates included?	Yes 🗌 No	
	ax-exemp	ot status X 501((c)(3) 501(c) () ◀ (insert no)	4947(a)(1) or	527	5	If "No," atta	ch a list (see instructions	s)	
J 1	Vebsite		//www.downtownc	hapelhill.com/		· · · · · · · · · · · · · · · ·	H(c)		emption number		
K	orm of or	ganization X Corp		ociation Other	1	L Year of formation	2004	M State	e of legal domicile N		
Pa	rt I	Summary		<u>-</u>							
	1	Briefly describe to	he organization's missi	on or most significant	activities To	bring the r	esourc	es of 1	the town, un:	versity	
•		and downtow	m community to	gether to main							
2	1		tural and spir								
E.						-					
Activities & Governance	2	Check this box	If the organization	discontinued its opera	ations or disposed	of more than 25%	6 of its net	assets			
Ŏ	3	Number of voting	members of the gover	ning body (Part VI, lin	e 1a)				3	12	
S	4	Number of indepe	endent voting members	of the governing bod	y (Part VI, line 1b)			[4	12	
ij	5	Total number of it	ndıvıduals employed ın	calendar year 2019 (F	Part V, line 2a)			[5	5	
Ę	6	Total number of v	rolunteers (estimate if n	ecessary)				[6	25	
⋖	7a	Total unrelated by	usiness revenue from F	Part VIII, column (C), li	ne 12 · · · ·			[7a	0	
	b	Net unrelated but	siness taxable income f	from Form 990-T, line	39			[7b	0	
		· -					Pro	or Year	Curren	t Year	
	8	Contributions and	d grants (Part VIII, line	1h)		[552,1	.24	510,901	
e	9	Program service	revenue (Part VIII, line	2g)		[81,5	645	0	
Revenue	10	Investment incom	ne (Part VIII, column (A), lines 3, 4, and 7d)		[8	7	
æ	11	Other revenue (P	art VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, a	and 11e)	[0	
	12	Total revenue - a	dd lines 8 through 11 (r	nust equal P <u>art VIII,</u> o	olumn (A), line 12)	<i>.</i> [633,6	577	510,908	
	13	Grants and simila	ar amounts paid (Part I)	(, column (A), lines 1	%FCFI\∕FC			244,4	129	4,317	
			or for members (Part IX		· · · · · · · · · · · · · · · · · · ·	[[_0	
"	15	Salanes, other co	ompensation, employee	e benefits (Pa∰k, coµ	սբող (A), lynes 5-10)		236,6	82	249,363	
Se	16a	Professional fund	Iraising fees (Part IX, co	olumn (A), li peri lle) ^L	JEC 2.8 2020					0	
Expenses			expenses (Part IX, colι			<u> </u>					
X	17	Other expenses ((Part IX, column (A), lin	es 11a-11d, 11f-24	GDEN: U	F [284,3	319	237,348	
	18	Total expenses	Add lines 13-17 (must e	equal Part IX, column	(A), line 25) ·	` J		765,4	130	491,028	
	19	Revenue less exp	penses Subtract line 1	8 from line 12 · · ·				(131,7	753)	19,880	
Net Assets or Fund Balances							Beginning	of Current Y	Year End of	Year	
sets	20	Total assets (Part	t X, line 16)					230,8	348	267,766	
t As	21	Total liabilities (Pa	art X, line 26)				_	45,6	81	62,719	
			d balances Subtract li	ne 21 from line 20	<u></u>			185,1	.67	205,047	
$\overline{}$	rt II	Signature I									
			hat I have examined this return on of preparer (other than office				y knowledge	and belief, it	IS		
	· · · · · ·	11.4	FICO	<u> </u>	<u>.</u>	<u> </u>			10/01/0000		
Sig	,	1/11/10	1. Glatter	<u> </u>					12/21/2020	 	
_	- 1	Signature of o		_					Date		
Her	e		T Gladdek, Executiv	e Director							
		Type or print n		0		Ta			1 Lorus —		
D- '		Print/Type preparer		Preparer's signature		Date		Check X		· 1	
Paid		Mark Danes			<u>S. Danes</u>	12-16-2020		self-employe		736	
	parer	Firm's name	Mark S D						<u>46-1061285</u>		
use	Only	Firm's address		nchmans Creek	Drive		Phone				
		-	Durham N					9:	19-452-1999		
Mav	ine IRS	discuss this retur	n with the preparer sho	wn above? (see instri	uctions)				X Ye	s No	

	1990(2019) Chapel Hill Downtown Partnership Inc. 20-1561219 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	To bring the resources of the town, university and downtown community together to maintain,
	enhance and promote the downtown area as the social, cultural and spiritual center of Chapel Hill
	through economic development.
2	Did the organization undertake any significant program services during the year which were not listed on the
	pnor 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? · · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O
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 \$292,119 including grants of \$) (Revenue \$)
	Led and managed the downtown area through partnership efforts; marketing and promotions improving
	the visual appeal of downtown; and rebuilding downtown as a mixed use center of retail service,
	professional, governmental, institutional and residential uses. Worked with business and property
	owners and organizations to identify and recruit tenants and businesses. Coordinated and hosted
	several special events to bring the community to downtown Chapel Hill. Advocated for businesses
	and property owners on issues and challenges affecting them. Provided businesses with
	high-visibility, low-cost marketing promotions through the website, events calendars and
	marketing e-mails.
4b	(Code) (Expenses \$ 98,364 including grants of \$) (Revenue \$)
	The Campus and Community Coalition to Reduce the Negative Impacts of High Risk Drinking (The
	Coalition) was founded in 2016. It is a collaborative effort with representation and funding from
	the Town of Chapel Hill, UNC-Chapel Hill, the Orange County Health Department, and the Orange
	County ABC Board. The Coalition is tasked with addressing the complex public health problem of
	high risk drinking by implementing a series of recommendations that apply to downtown Chapel
	Hill, UNC-Chapel Hill, and the near-campus neighborhoods.
	mility one endper mility and the near campus nerginormous.
	-
	· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	•
44	Other program convince (Decembe on Schedule O.)
4d	Other program services (Describe on Schedule O) (Expenses \$
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses \$ 390, 483
4e	Total program service expenses 390,483

Page 3

Form 990 (2019) Chapel Hill Downtown Partnership Inc. **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," x 2 2 x 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 х 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? If "Yes," complete Schedule C, Part II х 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 98-197 If "Yes," complete Schedule C, Part III 5 X 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 Х 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D, Part III Х Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 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 X 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 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a 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 X c 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 X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Х 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 X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X 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 X 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х 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 X 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 Х 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 Х 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) Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

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

20 a Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H

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? If "Yes," complete Schedule I, Parts I and II

X

X

21

Part IV

Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 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 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a х 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? 25b X 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 or any of these persons? If "Yes," complete Schedule L, Part II 26 Х 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 х Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part 28 IV instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b Х A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 X 31 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Х 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 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 19? Note: All Form 990 filers are required to complete Schedule O X Statements Regarding Other IRS Filings and Tax Compliance Part V No 16 b Enter the number of Form W-2G included in line 1a Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes Nο 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 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O b 3b 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)? 42 X If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b Х С Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods Х If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c Х Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g Х h X Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. а Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b Section 501(c)(12) organizations. Enter а Gross income from other sources (Do not net amounts due or paid to other sources l 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which Did the organization receive any payments for indoor tanning services during the tax year? Х 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 excess parachute payment(s) during the year? 15 X If "Yes," see instructions and file Form 4720, Schedule N is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . X 16 If "Yes," complete Form 4720, Schedule O

Part VI 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. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 1a 12 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 Enter the number of voting members included in line 1a, above, who are independent h 1b 12 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 x 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 Х 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 Х 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 X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following х Each committee with authority to act on behalf of the governing body? 8b X 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Did the organization have local chapters, branches, or affiliates? 10a X 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? 10h 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 x Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . b 12b X 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 X Did the organization have a written document retention and destruction policy? 14 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official x **b** Other officers or key employees of the organization 15b X 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? X 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? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ▼ Upon request Other (explain on Schedule O) Own website Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records Questian Telka (919) 967-9440, 128 E Franklin St Suite 240, Chapel Hill, NC 27514

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Chapel Hill Downtown Partnership Inc.

20-1561219

Page 7

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 Completè 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

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

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

		T	•		(C)					
(A)	(B)	Position (do not check more than one		(D)	(E)	(F)				
Name and title	Average	,				nan one s both ar	,	Reportable	Reportable	Estimated amount
	hours			•		/trustee)		compensation	compensation	of other
	per week (tist any							from the organization	from related organizations	compensation from the
	hours for	유교	ng!	Officer	κ ey	emp High	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	rect	럂	cer	emp	nest ploye	mer			related organizations
	organizations	Individual trustee or director	institutional trustee		Key employee	Highest compensated employee				
	below dotted line)	stee	uste		•	pens				
	dotted inter		[®]			ated				
(1) Elizabeth Flake	5.00									
Director		х						0	0	0
(2) Joel Curran	5.00									1
Director		х						0	0	0
(3) Gordon Merklein	5.00									
Treasurer		х		х			_	0	0	0
(4) Mimi Hock	5.00						i			
Vice Chair		х		х				0	0	0
(5) Pam Hemminger	5.00									
Director		Х			_			0	0	0
(6) Elizabeth Sasser	5.00									
Immediate Past Chair		х						0	0	0
(7) Mark Sherburne	5 .00									
Chair		х		Х				0	0	0
(8) Jeff Furman	5.00									
Director		х						0	0	0
(9) Patty Griffin	5.00									
Director		х						0	0	0_
(10)Doug_Rothwell	5.00									
Director		х						<u> </u>	0	0
(11)Len Wohadlo	5 .00		-							
Director		х		_	_			00	0	0
(12)Andrea Reusing	5.00									
Director		Х			_			0	0	
(13)Jay Patel	5.00						ł			
Director		X						0	0	0
(14)Matt_Gladdek	40.00									
Executive Director	<u> </u>			Х				88,963	0	6,371

Part VII Section A. Officers, Directors, Trustee	s, Key Emplo	oyees,	and	Hig	hes	t Com	pen	sated Employees	(continued)	<u>. </u>		
				1	(C)							
(A)	(B)				sition			(D)	(E)		(F)	
Name and title	Average					han one s both ai		Reportable	Reportable	Estu	mated a	mount
, value and the	hours					s both at r/trustee)		compensation	compensation	250	of othe	
	per week						'	from the	from related	c	ompensa	
	(list any	9.5	5	<u> </u>		gт	Ē	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	ora	from the anization	
	hours for	divid	l st	Officer	Key employee	nghe nghe	Former	(***-21033-141100)	(***-2 1035-11130)	1 -	ed organ	
	related organizations	ctor	l on		힣	yee	1					
	below	Individual trustee or director	nstitutional trustee		yee	m pe						
	dotted line)	6	stee			Highest compensated employee						
						8						
(15)												
·												
(16)												
(17)												
(18)												-
(19)												
(20)												
(21)												
	<u> </u>											
(22)												
(23)												
(24)												
								_				
(25)												
	[•				
1b Subtotal							· •					
c Total from continuation sheets to Part VII, Sec	tion A .						. ▶					
d Total (add lines 1b and 1c)								88,963	0	,	6,	371
Total number of individuals (including but not limit			_			•		e than \$100,000 of		_		
reportable compensation from the organization	>											0
											Yes	No
3 Did the organization list any former officer, director	or, trustee, ke	y empl	oyee	e, or	high	est co	mpe	nsated				T
employee on line 1a? If "Yes," complete Schedule	J for such in	dıvıdua	ıl							. 3		X
4 For any individual listed on line 1a, is the sum of r	eportable con	npensa	ition	and	othe	er com	pen	sation from the				1
organization and related organizations greater tha	n \$150,000?	If "Yes	," co	mple	ete S	Schedu	ıle J	for such				
ındıvıdual										. 4		X
5 Did any person listed on line 1a receive or accrue	compensatio	n from	any	unre	elate	d orga	nıza	ition or individual				
for services rendered to the organization? If "Yes,	" complete So	chedule	Jfo	or su	ch p	erson				. 5		X
Section B. Independent Contractors								•				
1 Complete this table for your five highest compens	ated independ	dent co	ontra	ctors	s tha	t rece	ved	more than \$100,00	00 of			
compensation from the organization. Report comp	ensation for	the cal	enda	ar ye	ar e	nding v	with	or within the organ	zation's tax year			
(A)								(B)		(C)	
Name and business addre	ss							Description of service	es	Comper	sation	
2 Total number of independent contractors (includin	g but not limit	ed to the	hose	liste	ed al	bove) v	who					
received more than \$100,000 of compensation fro			•									

Statement of Revenue

Part VIII Check if Schedule O contains a response or note to any line in this Part VIII Total revenue Revenue excluded Related or exempt Linrelated function revenue business revenue from tax under sections 512-514 Federated campaigns 1a 1b Contributions, Gifts, Grants and Other Similar Amounts C 1c 1d Government grants (contributions) . . 1e 323,718 All other contributions, gifts, grants, and similar amounts not included above 1f 187,183 Noncash contributions included in 1g Total. Add lines 1a-1f · · · · · · · · · · · · · · ▶ 510,901 **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) · · · · · · · · · · · · · · ▶ Income from investment of tax-exempt bond proceeds Royalties (II) Personal 6a Gross rents 6a b Less rental expenses . . 6b c Rental income or (loss) 6c d 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 7a Other Revenue and sales expenses . . c Gain or (loss) 7c 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 8a **b** Less direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9a **b** Less direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** 11a e Total. Add lines 11a-11d Total revenue. See instructions · · · · · · · · · · · · ▶ 510,908 0 0

Part IX 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 (B) Program service Do not include amounts reported on lines 6b. 7b. Total expenses Fundraising Management and 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 4,317 4,317 2 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign 3 ù organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 5 99,526 74,644 24,882 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 123,458 101,119 22,339 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 603 2,412 1,809 9 8,337 6,253 2,084 10 15,630 12,375 3,255 11 Fees for services (nonemployees) а C 6,429 6,429 d Lobbying Professional fundraising services See Part IV, line 17 e f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 35,817 27,968 7,849 Advertising and promotion 12 104,900 91,221 13,679 13 9,571 7,378 2,193 Information technology 14 13,500 10,125 3,375 15 16 17,320 12,990 4,330 17 6,866 2,213 9,079 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 27,633 24,910 2,723 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 4,290 1,430 5,720 23 2,368 1,776 592 Other expenses Itemize expenses not covered 24 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) Bad debt 1,348 1,348 879 879 b Loss on disposal of assets Valet parking activities 1,415 1,415 d 342 All other expenses 1,369 1,027 Total functional expenses. Add lines 1 through 24e- . . 100,545 0 25 390,483 491,028 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 following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet**

		Check if Schedule O contains a response or note to any line in this Part X	<u> </u>		<u> </u>
		•	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	128,464	1	173,354
	2	Savings and temporary cash investments	74,200	2	74,708
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	13,883	4	6,917
	5	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	
	6	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	
, 0	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ass	9	Prepaid expenses and deferred charges		9	6,974
_	10a	Land, buildings, and equipment cost or other	1		
		basis Complete Part VI of Schedule D 10a 71,773			
	ь	Less accumulated depreciation 10b 65,960	10,801	10c	5,813
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,500	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	230,848	16	267,766
	17	Accounts payable and accrued expenses	13,500	17	33,880
	18	Grants payable		18	
	19	Deferred revenue	32,181	19	28,839
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ś	22	Loans and other payables to any current or former officer, director,		-	-
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			ı
abi		controlled entity or family member of any of these persons		22	
ت	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	45,681	26	62,719
		Organizations that follow FASB ASC 958, check here			,
S		and complete lines 27, 28, 32, and 33.			
Š	27	Net assets without donor restrictions	185,167	27	155,047
3ala	28	Net assets with donor restrictions		28	50,000
ğ		Organizations that do not follow FASB ASC 958, check here			,
필		and complete lines 29 through 33.			
6	29	Capital stock or trust principal, or current funds	· · · · · · · · · · · · · · · · · · ·	29	· · · · · · · · · · · · · · · · · · ·
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSI	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	185,167	32	205,047
ž	33	Total liabilities and net assets/fund balances	230,848	33	267,766
EEA .					Form 990 (2019)

	Form 990 (2019) Chapel Hill Downtown Partnership Inc. 20-1561219								
Pa	rt 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-		510,9	908				
2	Total expenses (must equal Part IX, column (A), line 25)	2		491,0)28				
3 Revenue less expenses Subtract line 2 from line 1									
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		185,1	L67				
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 on Schedule O)	9			0				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line								
	32, column (B))	10		205,0)47				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII				X				
				Yes	No				
1	Accounting method used to prepare the Form 990			,	í				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				1				
	Schedule O								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		- 2a		х				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or								
	reviewed on a separate basis, consolidated basis, or both								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		- 2b	х					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				- 1				
	separate basis, consolidated basis, or both								
	X Separate basis				i				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of								
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		· 2c		х				
	If the organization changed either its oversight process or selection process during the tax year, explain on				- 1				
	Schedule O								
3а	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?		. За		x				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the								
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u>.</u> .	. 3b						
EEA			Form	990 (20)19)				

SCHEDULE A

Public Charity Status and Public Support

OMB No 1545-0047 2019

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990 or 990-EZ)

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

Employer identification number Hill Downtown Partnership Inc. 20-1561219 Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 \mathbf{x} An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV. Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization (i) Name of supported organization (v) Amount of monetary (iii) EIN (III) Type of organization (vi) Amount of other support (see (described on lines 1-10 listed in your governing support (see above (see instructions)) instructions) instructions) document? Yes No (A) (B) (C) (D) (E)

990 or 990-EZ) 2019 Chapel Hill Downtown Partnership Inc. 20-1561219
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

<u> </u>	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not		j				
	include any "unusual grants")	414,821	654,248	651,637	552,124	510,901	2,783,731
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	414,821	654,248	651,637	552,124	510,901	2,783,731
5	The portion of total contributions by						
	each person (other than a			i			
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						37,942
	Public support. Subtract line 5 from line 4						2,745,789
	ction B. Total Support						
	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4 · · · · · · · · · · · ·	414,821	654,248	651,637	552,124	510,901	2,783,731
8	Gross income from interest, dividends,			,	•		
	payments received on securities loans,						
	rents, royalties and income from						
	similar sources	16	11	14		7	56
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)	1,477	1,092				2,569
	Total support. Add lines 7 through 10						2,786,356
	Gross receipts from related activities, etc. (see	•			l l	12	308,844
13	First five years. If the Form 990 is for the org	-			-		_
	organization, check this box and stop here				· · · · · · · · ·		▶
	ction C. Computation of Public Suppor						
	Public support percentage for 2019 (line 6, co		-			14	98.54 %
	Public support percentage from 2018 Schedu					15	99.57 %
16a	33 1/3% support test - 2019. If the organization						
	box and stop here. The organization qualifie						
t	33 1/3% support test - 2018. If the organization						_
	this box and stop here . The organization qua	-		-			
17a	10%-facts-and-circumstances test - 2019.	_					
	10% or more, and if the organization meets the				_		
	Part VI how the organization meets the "facts			-			ted
	organization						▶ ⊔
b	10%-facts-and-circumstances test - 2018.	_					ie
	15 is 10% or more, and if the organization me					•	
	Explain in Part VI how the organization meet				-		Cly
	supported organization						▶ ⊔
18	Private foundation. If the organization did no						
	instructions	<u></u>	· • • • • • • •	· · · · · · · · · ·		<u> </u>	<u></u> ▶ <u></u>

90 or 990-EZ) 2019 Chapel Hill Downtown Partnership Inc.
Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees		_				
	received (Do not include any "unusual grants")						1
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .		1	l		/	
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the				/	1	
	organization without charge]	
6	Total. Add lines 1 through 5			1			
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	1	[
	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						
8	Public support. (Subtract line 7c from			/			
	line 6)						
Sec	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business		-				
	activities not included in line 10b, whether				j		
	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 or	ganızatıon's fir	st, second, thir	d, fourth, or fift	h tax year as a	section 501(c)	(3)
	organization, check this box and stop here			<u></u>			▶ <u> </u>
Sec	ction C. Computation of, Public Suppo	rt Percentag	je				
15	Public support percentage for 2019 (line 8, c	olumn (f), dıvı	ded by line 13,	column (f)) .		15	%
16	Public support percentage from 2018 Sched	ule A, Part III,	lıne 15			16	%
Sec	tion D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2019 (line	10c, column	(f), divided by li	ne 13, column	(f))	17	%
	Investment income percentage from 2018 So					18	%
	33 1/3% support tests - 2019. If the organiz					than 33 1/3%, a	and line
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2018. If the organiz						
	line 18 is not more than 33 1/3%, check this						
	Private foundation. If the organization did n						

Supporting Organizations Part IV

> (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
----------------	------------	----------------------

- 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
- 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?
- 6 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.
- 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)
- 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)
- 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
_	1		
-	2		
	3a		
	3b		
	3c		
[-	4a		
	4b		
	4c		
	46		
	5a		
	5b		
Ŀ	5c		1
-	 6		
_	7		
-	<u>-</u>		
	9a		
	9b		
	9c		
1	0a		
	0b	 or 990-E	Z) 2019

	dule A (Form 990 or 990-EZ) 2019 Chapel Hill Downtown Partnership Inc. 20-1561219	<u>, </u>	F	Page 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
	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	L	
	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		
Sec	ction B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	İ		
	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	<u> </u>		
		1		ļ.,
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 carned out the purposes of the supported organization(s) that operated,			لـــــا
<u> </u>	supervised, or controlled the supporting organization	2	L	<u></u>
Sec	ction C. Type II Supporting Organizations		-	
	When a consist of the consistency development of the development of th		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	ļ		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			1
	or management of the supporting organization was vested in the same persons that controlled or managed			لـــــا
500	the supported organization(s)	1	L	Щ
<u> </u>	ction D. All Type III Supporting Organizations		Vaa	No.
4	Did the experience arounds to each of its automated experience by the last day of the fifth month of the		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		ĺ	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		نـــا
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	<u> </u>		<u> </u>
_	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)			ļ
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
,	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		- '
Sec	tion E. Type III Functionally Integrated Supporting Organizations			<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	truction	ons)	
а		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JJ,	
b				
C		see ins	tructio	ons)
2	Activities Test Answer (a) and (b) below.		Yes	
а				
	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	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а				_
	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			1
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	aoniza	20-156	1219 Tage (
1 Check here if the organization satisfied the Integral Part Test as a qualifying			n Part VIV See
instructions. All other Type III non-functionally integrated supporting organization			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	71		(optional)
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		
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
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-functionally	intogra	tod Type III supporting	arganization (coa

instructions)

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Sec	etion D - Distributions	Current Year						
1	Amounts paid to supported organizations to accomplish exer							
2	Amounts paid to perform activity that directly furthers exempt	-						
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizati	ons					
4	Amounts paid to acquire exempt-use assets							
_5	дания дригина							
6	Other distributions (describe in Part VI) See instructions							
	Total annual distributions. Add lines 1 through 6							
8	Distributions to attentive supported organizations to which the	e organization is respons	ive	-				
	(provide details in Part VI) See instructions.			_				
9								
10	Line 8 amount divided by line 9 amount							
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
_1								
2	Underdistributions, if any, for years prior to 2019							
	(reasonable cause required - explain in Part VI) See							
	instructions							
	Excess distributions carryover, if any, to 2019							
	From 2014							
b	From 2015							
<u>c</u>	From 2016							
d	From 2017							
е	From 2018							
f	Total of lines 3a through e							
	Applied to underdistributions of prior years							
	Applied to 2019 distributable amount							
i	Carryover from 2014 not applied (see instructions)			•				
<u>j</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f							
4	Distributions for 2019 from							
	Section D, line 7 \$							
а	Applied to underdistributions of prior years							
	Applied to 2019 distributable amount							
c	Remainder Subtract lines 4a and 4b from 4							
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							
a	Excess from 2015							
b	Excess from 2016							
с	Excess from 2017							
d	Excess from 2018							

e Excess from 2019

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

2019

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	or the organization			Employer identification number			
	pel Hill Downtown Partnership Inc.			20-1561219			
Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.						
	Complete if the organization answered "Yes" on	Form 990, Part IV, line	6				
		(a) Donor advise	ed funds	(b) Funds and other accounts			
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (dunng year)			- -			
4	Aggregate value at end of year						
-		Avec Abet Abe essets beld on		-			
5	Did the organization inform all donors and donor advisors in wr	•		П., П.,			
_	funds are the organization's property, subject to the organization's exclusive legal control?						
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used						
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose						
_	conferring impermissible private benefit?	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	· · · · · · · · · · · · · · · · · · ·			
Pa	rt II Conservation Easements.						
	Complete if the organization answered "Yes" or	n Form 990, Part IV, lin	e 7				
1	Purpose(s) of conservation easements held by the organization	(check all that apply)					
	Preservation of land for public use (e.g., recreation or educ	ation)	Preservation of a	a historically important land area			
	Protection of natural habitat		Preservation of a	a certified historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution	in the form of a cons	servation			
	easement on the last day of the tax year			Held at the End of the Tax Ye			
а							
b							
c	Number of conservation easements on a certified historic struct						
				. 20			
d	Number of conservation easements included in (c) acquired after						
_	3						
3	Number of conservation easements modified, transferred, relea	ised, extinguished, or term	ninated by the organi	zation during the			
	tax year •						
4	Number of states where property subject to conservation easen	nent is located					
5	Does the organization have a written policy regarding the period	dic monitoring, inspection,	handling of				
	violations, and enforcement of the conservation easements it he	olds? · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
6	Staff and volunteer hours devoted to monitoring, inspecting, had	ndling of violations, and er	nforcing conservation	n easements during the year			
							
7	Amount of expenses incurred in monitoring, inspecting, handling	g of violations, and enforci	ng conservation eas	sements during the year			
	▶ \$						
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements o	f section 170(h)(4)(E	3)(1)			
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation	easements in its revenue	and expense staten	nent, and			
	balance sheet, and include, if applicable, the text of the footnote		•				
	organization's accounting for conservation easements						
Pa	t III Organizations Maintaining Collections	of Art. Historical Tr	reasures, or Ot	ther Similar Assets.			
	Complete if the organization answered "Yes" o						
	If the organization elected, as permitted under FASB ASC 958,	· · · · · · · · · · · · · · · · · · ·		ince sheet works			
ıa	of art, historical treasures, or other similar assets held for public	•					
	•			ice of public			
	service, provide, in Part XIII the text of the footnote to its financi			at a strong of			
b	If the organization elected, as permitted under FASB ASC 958,	•					
	art, historical treasures, or other similar assets held for public ex	xhibition, education, or res	earch in furtherance	e of public service,			
	provide the following amounts relating to these items						
	(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 treasi	ures, or other similar asset	ts for financial gain, i	provide the			
	following amounts required to be reported under FASB ASC 958 relating to these items						
а	Revenue included on Form 990, Part VIII, line 1			▶ \$			
b	Assets included in Form 990, Part X			——————————————————————————————————————			

	e D (Form 990) 2019 Chapel Hill Dow					20-156			age
Par	t III Organizations Maintaining	Collections of	Art, Histo	rical Treasures,	or Oth	er Similar A	ssets (co	ontin	uec
	Using the organization's acquisition, accession	, and other records	, check any of	the following that mal	ce signific	ant use of its			
	collection items (check all that apply)		_						
а	Public exhibition		ď∐	Loan or exchange	programs				
b	Scholarly research		e 📋	Other					_
С	Preservation for future generations								
	Provide a description of the organization's colle	ections and explain	how they furth	er the organization's	exempt pu	ırpose ın Part			
	XIII								
	During the year, did the organization solicit or re			•			_	_	
	assets to be sold to raise funds rather than to b		irt of the organ	ization's collection?		<u> </u>	· Ye	š	N
Part	Escrow and Custodial Arran	_			_			_	
	Complete if the organization a 990, Part X, line 21	inswered "Yes"	on Form 9	90, Part IV, line 9	or rep	orted an amo	ount on F	orm	
1a	Is the organization an agent, trustee, custodian	or other intermedia	ary for contribu	tions or other assets	not				
	included on Form 990, Part X?	 .					· · 🗌 Yes	s [] N
þ	If "Yes," explain the arrangement in Part XIII an	d complete the follo	owing table						
						Am	nount		
С	Beginning balance	. .			1c				
d .	Additions during the year	. .		. <i></i>	1d				
е	Distributions during the year	<i></i>			1e				
f	Ending balance	. .			1f				
2a	Did the organization include an amount on Forr	m 990, Part X, line	21, for escrow	or custodial account l	iability?		· Yes	<u> </u>] N
b	If "Yes," explain the arrangement in Part XIII C	heck here if the exp	olanation has b	een provided on Part	XIII .			. []
art	V Endowment Funds.								
	Complete if the organization a	nswered "Yes"	on Form 9	90, Part IV, line 1	0				
		(a) Current year	(b) Pnor y	ear (c) Two years	back	(d) Three years back	(e) Four	years t	oack
a	Beginning of year balance								
b	Contributions								
c	Net investment earnings, gains, and	•							
1	losses		1						
d (Grants or scholarships	•							-
	Other expenditures for facilities and						-		
	programs								
	Administrative expenses								
	End of year balance								
-	Provide the estimated percentage of the curren	t vear end balance	(line 1a. colum	nn (a)) held as					_
	Board designated or quasi-endowment	%	(191	(-),					
	Permanent endowment > %								
	Term endowment > %	•							
-	The percentages on lines 2a, 2b, and 2c should	d equal 100%							
	Are there endowment funds not in the possessi	•	on that are he	d and administered for	or the				
	organization by	organizati					i	Yes	I
	(i) Unrelated organizations · · · · · · · ·						. 3a(i)		Ť.
	(ii) Related organizations						3a(ii)		\vdash
,	If "Yes" on line 3a(ii), are the related organization	ons listed as require	ed on Schedule	R?			. 3b	_	\vdash
	Describe in Part XIII the intended uses of the or	•							
art		-	···iciit iuilus						_
411	Complete if the organization a		on Form Q	90 Part IV line 1	1a See	Form 990 F	Part X lin	ne 10)
		1							_
	Description of property	(a) Cost or oth	1 '	b) Cost or other basis (other)		cumulated reciation	(d) Boo	k value	
		(iiivestiii)	norm)	(omer)		- Coation			
	Land	•							
	Buildings	•							_
	Leasehold improvements	•		-					_
d l	Equipment		1	14.659		12.933		1.'	72

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

EEA

5,813

	(a) Description of security or category (including name of security)	(b) Book value	ine iib Se	(c)	Method of valuation and-of-year market value
(1) Financial				0031 01 1	and or your market value
	eld equity interests				
(3) Other	end equity interests				
				-	
(A)					
(B)			-		
(C)					
(D) (E)					
(F)				<u> </u>	
(G)					
(H)		†			
	n (b) must equal Form 990, Part X, col (B) line 12)		-		
Part VIII	Investments - Program Related.				
ir ait viii	Complete if the organization answered "Yes" on For	m 990, Part IV,	line 11c Se	e Form 9	990, Part X, line 13
	(a) Description of investment	(b) Book value			Method of valuation and-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13) · · · · · ▶				
Part IX	Other Assets.				
	Complete if the organization answered "Yes" on For	m 990, Part IV,	line 11d Se	e Form 9	990, Part X, line 15
	(a) Description				(b) Book value
(1)					· · · · · · · · · · · · · · · · · · ·
(2)					
(3)					
(4)					
(5)					
(6)					
(7)		-			
(8)		***			
(9)					
	n (b) must equal Form 990, Part X, col (B) line 15)			▶	
Part X	Other Liabilities.				<u> </u>
	Complete if the organization answered "Yes" on For line 25.	m 990, Part IV,	line 11e or	11f See I	Form 990, Part X,
1.	(a) Description of liability (b) Book	value			
(1) Federal ı					
(2)					
(3)					,
(4)	-				
(5)					
(6)		-			
(7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col (B) line 25) - ▶				
(-y quest v etter v (() (() ((

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 FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII

Total re	Reconciliation of Revenue per Audited Financial Stater		er Retur	n.
Total re	Complete if the organization answered "Yes" on Form 990,			
	venue, gains, and other support per audited financial statements	• • • • • • • • • • • • • • • • • • • •	1	510,908
	is included on line 1 but not on Form 990, Part VIII, line 12	1 1		
_	ealized gains (losses) on investments	2a	⊣ ∣	
	d services and use of facilities	2b	⊣ ∣	
	nes of prior year grants	2c	_	
	Describe in Part XIII)	2d	_	
	es 2a through 2d · · · · · · · · · · · · · · · · · ·		2e	
	t line 2e from line 1 · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	3	510,908
	s included on Form 990, Part VIII, line 12, but not on line 1			
	ent expenses not included on Form 990, Part VIII, line 7b	4a	_	
b Other (Describe in Part XIII) · · · · · · · · · · · · · · · · · ·	4b		
	es 4a and 4b · · · · · · · · · · · · · · · · · ·		4c	
	venue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) · · · ·		5	510,90
art XII	Reconciliation of Expenses per Audited Financial State		s per Re	turn.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a		
	penses and losses per audited financial statements	• • • • • • • • • • • • • • • • • • • •	1	491,028
Amoun	s included on line 1 but not on Form 990, Part IX, line 25	1 1		
	d services and use of facilities	2a		
Prior ye	ar adjustments	2b	_	
	sses · · · · · · · · · · · · · · · · · ·	2c		
	Describe in Part XIII) · · · · · · · · · · · · · · · · · ·	2d		
Add lin	es 2a through 2d · · · · · · · · · · · · · · · · · ·		2e	
Subtrac	t line 2e from line 1		3	491,028
Amoun	s included on Form 990, Part IX, line 25, but not on line 1			
ı Investn	ent expenses not included on Form 990, Part VIII, line 7b	4a		
Other (Describe in Part XIII) · · · · · · · · · · · · · · · · · ·	4b		
c Add line	s 4a and 4b · · · · · · · · · · · · · · · · · ·		4c	
Total e	penses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	491,028
	Supplemental Information.			
art XIII vide the d	scriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin	nes 1b and 2b, Part V, line 4, F	art X, line	
vide the d	•••		art X, line	
vide the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	
ride the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	
ride the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	
vide the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	
vide the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	
vide the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	
ide the d	escriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lin		Part X, line	

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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

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

Inspection Employer identification number

Chapel Hill Downtown Partnership Inc.	20-1561219
01. Form 990 governing body review (Part VI, line 11)	
The Form 990 is provided to the Board of Directors and approved by the Treas	surer or
Executive Director prior to filing.	
02. Conflict of interest policy compliance (Part VI, line 12c)	
The Organization regularly and consistently monitors and enforces compliance	e with its
written conflict of interest policy. Each director, principal officer, and i	member_of a
committee with board delegated powers shall annually sign a statement which	affirms
knowledge and compliance with said policy.	
03. Governing documents, etc, available to public (Part VI, line 19)	
The Organization makes its financial statements, governing documents and con	nflict of
interest policy to the general public upon request.	
04. Audited by an independent accountant (Part XII, line 2b)	
The Executive Director and the Board of Directors assume responsibility for	the oversight
of the audit. This process has not changed during the year.	
	