Form **990** 

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

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

DLN: 93493255009808 OMB No 1545-0047

**Open to Public** 

Department of the Treasury

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

• Information about Form 990 and its instructions is at your IRS gov/form990.

Interna	al Revenue Service	P Informatio	in about 101111 990 and its matractions	is at www ins gov/rom	<u> </u>	Inspection
A F	or the 2017 c	alendar year, or tax year	beginning 01-01-2017 , and endi	ng 12-31-2017		
<b>B</b> Che	eck if applicable	C Name of organization Cincinnati Center City Develo	opment Corp		D Employer ic	entification number
	ldress change		spinetic corp		20-044632	1
	nme change Itial return	% TIMOTHY SZILASI Doing business as				
	al return/terminated					
	nended return	Number and street (or P O 1203 Walnut Street 4th Floo	pox if mail is not delivered to street address) r	Room/suite	E Telephone nu	
⊔ Ар	plication pending		ce, country, and ZIP or foreign postal code		(513) 621-	1400
		Cincinnati, OH 45202	ce, country, and ZIP or foreign postal code		G Gross record	:s \$ 59,987,941
		<b>F</b> Name and address of p	rincipal officer	H(a) Is thu	s a group return	
		Timothy Szilasi	·		dinates?	□Yes ☑No
		1203 Walnut Street 4th F Cincinnati, OH 45202	oor	ll subordinates	☐ Yes ☐No	
I Ta	x-exempt status	<b>√</b> 501(c)(3)	( ) <b>◀</b> (insert no ) ☐ 4947(a)(1) or ☐	Includ		(see instructions)
J W	/ebsite: ► WW		( ) 4 (IIISER ( III )		exemption nur	•
<b>K</b> For	m of organization	✓ Corporation ☐ Trust	Association ☐ Other ▶	L Year of forma	ation 2004 M . OH	State of legal domicile
Pā	rt I Sum	mary			ı	
			ssion or most significant activities	CDEAT CIVIC CDACES	LIICH DENCITY	/MIVED LICE
gų.		GTHEN THE CORE ASSETS MENTS, AND PRESERVE HIS	OF DOWNTOWN CINCINNATI, CREATE TORIC STRUCTURES	GREAT CIVIC SPACES,	HIGH-DENSITY	/MIXED-USE
Activities & Governance						
e						
70°	2 Check thi	s box 🕨 🗌 if the organizat	tion discontinued its operations or disp	osed of more than 25%	of its net asset	:s
<u>×</u> خ			overning body (Part VI, line 1a)			<b>3</b> 29
<b>16</b> S		•	bers of the governing body (Part VI, lir	•		4 28
<b>M</b>	1	• •	d in calendar year 2017 (Part V, line 2	·	•	5 266
ACI		•	e if necessary)		•	6 100
			m Part VIII, column (C), line 12		•	<b>7a</b> 14,520 <b>7b</b> -1,784
	D Net uniter	ateu busilless taxable ilicoi	He Holli Follii 990-1, iiile 34		or Year	Current Year
	8 Contribut	ons and grants (Part VIII.	line 1h)		12,585,686	4,596,762
Ravenue		• •	line 2g)		36,563,835	41,293,407
ðΛċ	10 Investme	nt income (Part VIII, colum	in (A), lines 3, 4, and 7d)		2,836,751	13,757,699
<u> </u>	11 Other rev	enue (Part VIII, column (A	), lines 5, 6d, 8c, 9c, 10c, and 11e)		178,269	340,073
	12 Total reve	enue—add lines 8 through :	l1 (must equal Part VIII, column (A), l	ıne 12)	52,164,541	59,987,941
	13 Grants ar	nd sımılar amounts paıd (Pa	rt IX, column (A), lines 1–3)...		2,249,085	9,579,458
	14 Benefits	paid to or for members (Par	t IX, column (A), line 4)		0	(
æ	<b>15</b> Salaries,	other compensation, emplo	yee benefits (Part IX, column (A), line	s 5-10)	7,931,523	9,178,572
SUE.	16a Professio	nal fundraising fees (Part I	X, column (A), line 11e)		0	(
Expenses		aising expenses (Part IX, colum	· · · ·			
ш	1	, , , , , , , , , , , , , , , , , , , ,	, lines 11a-11d, 11f-24e)	•	35,132,038	33,684,095
	1	•	ust equal Part IX, column (A), line 25)		45,312,646	52,442,125
<del></del>	19 Revenue	less expenses Subtract line	e 18 from line 12		6,851,895	7,545,816
Net Assets or Fund Balances				ведіппіпд	of Current Year	End of Year
ssel Bala	20 Total asse	ets (Part X, line 16)			332,973,569	349,748,267
A P	21 Total liab	ılıtıes (Part X, lıne 26) .			326,544,253	334,371,166
žĪ.	22 Net asset	s or fund balances Subtrac	t line 21 from line 20		6,429,316	15,377,101
		ature Block				
			e examined this return, inclui mplete Declaration of prepa			
	nowledge		· · ·			
	1 k					
	*****	*				
Sian	* * * * * * * * Signati	* ure of officer				
Sign Here						
_	e TIMOTI	* ure of officer HY SZILASI SR VP & CFO r print name and title				

May the IRS discuss this return with the preparer shown above? (see instru For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name FGRANT THORNTON LLP

Firm's address ► 171 N CLARK ST SUITE 200

CHICAGO, IL 60601

Paid

Preparer

**Use Only** 

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Par	t IIII Statement	of Program Servi	e Accomplis	hments		
	Check if Sche	dule O contains a resp	onse or note to	any line in this Part III		<u> 🗹</u>
1	Briefly describe the o	rganızatıon's mıssıon				
(1) T	O PROMOTE THE WELF	ARE OF THE PEOPLE (	OF THE CITY OF	CINCINNATI, OHIO (TH	E "CITY"), (MISSION CONTINUED	IN SCHEDULE O)
	Did the organization	undertake any signific	ant program ser	vices during the year wh	nich were not listed on	
_	the prior Form 990 o	, -				☐ Yes 🗹 No
	If "Yes," describe the	ese new services on Sc	nedule O			
3	•			changes in how it condu	ıcts, any program	
						☐ Yes ☑ No
	If "Yes," describe the	se changes on Schedu	le O			
4	Section 501(c)(3) an		ons are required	I to report the amount o	largest program services, as mea f grants and allocations to others	
4a	(Code	) (Expenses \$	32,371,831	including grants of \$	9,576,098 ) (Revenue \$	29,017,167 )
	See Additional Data					
4b	(Code	) (Expenses \$	13,678,800	ıncludıng grants of \$	3,360 ) (Revenue \$	12,290,760 )
	See Additional Data	, (=::F=::==== +	,		-,, (	,,
40	(Codo	) (Eyponess &		including graphs of the	) (Payanya f	)
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	, 
4d	Other program service	ces (Describe in Sched	ule O )			
	(Expenses \$	•	luding grants of	\$	) (Revenue \$	)
4e	Total program serv	/ice expenses ►	46,050,6	331		
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Yes

Yes

Yes

Yes

Yes

Yes

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3 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? 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

to provide advice on the distribution or investment of amounts in such funds or accounts? 

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 💆 . . .

6 7 8 9

Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . . 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 11a

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 . . . . . . . . Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🥦 . . . . . . . . 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧 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 🛸

11d 11e 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🛸 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

13 14a business, investment, and program service activities outside the United States, or aggregate foreign investments

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

14h foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . 15

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

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

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

current and former officers, directors, trustees, key employees, and highest compensated employees If "Yes,

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

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 📆

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . . . . . 💆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

ıs treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

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Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2017)

Yes

Yes

Yes

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No

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No

No

Nο

No

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Nο

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Nο

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	٠,		ᆜᆜ
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 307			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3ь	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	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?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
•		5c		
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		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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?			No
	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?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments $^7$ If "No," provide an explanation in Schedule $O$	14b		<u></u>
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Pari	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	
6	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
<b>5</b> e	ction 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   1a   2	9	103	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b  2	3		
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	Yes	
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? .	<sup>п</sup> з		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	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		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revent	ie Code		
0-	Did the average translation between the state of the stat	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	IUa		INO
	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	10b		
	form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	4.2	V	
	Did the organization have a written conflict of interest policy? <i>If "No,"</i> go to line 13	12a	Yes	
	conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
	Did the organization have a written whistleblower policy?	13	Yes	
.4	Did the organization have a written document retention and destruction policy?	14	Yes	
.5	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	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
.6a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-	Vaa	
b	taxable entity during the year?	16a	Yes	
	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		No
	ction C. Disclosure			
.7 .8	List the States with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
.9	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
0	State the name, address, and telephone number of the person who possesses the organization's books and records  TIMOTHY SZILASI 1203 WALNUT STREET 4TH FLOOR Cincinnati, OH 45202 (513) 621-4400			
				0 (2017)

compensated employees, and former such persons

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

Part VII

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

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

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations

organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

- List all of the organization's former officers, key employees, or 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

L Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (F) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the compensation from related organization (Wany hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest oc employee individual trustee or director Officer Former organizations MISC) related Institutional Trustee below dotted organizations employee line) compensated

See Additional Data Table Form 990 (2017) Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F)

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<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	(C) o not ox, u n off or/t	(E) Reportable compensation from related organizations ( 2/1099-MISC	w-	(F) Estimated amount of other compensation from the organization and									
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/109	9-MISC)	2/1099-1413C		related organizations		
See Additional Data Table														
4.6.1.7.1.1											$\perp$			
1b Sub-Total	art VII, Sectio	nΑ.				<b>*</b>		1,	549,758		0		143,281	
Total number of individuals (including of reportable compensation from the compensation)	but not limited	to thos			bove	e) who	rece	eived mo	re than \$	100,000	•			
												Yes	No	
3 Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule J</i>								ghest co	mpensate	d employee on	3		No	
For any individual listed on line 1a, is organization and related organizations individual	greater than \$		0? <i>If</i>	"Yes		omplet				m the	4	Yes		
5 Did any person listed on line 1a receiv services rendered to the organization									tion or inc	lividual for	5		No	
Section B. Independent Contract	ors												110	
Complete this table for your five higher from the organization. Report comper	est compensate										mpen	sation		
Name a	(A) nd business addre	:55							Des	(B) cription of services		(C Compen		
The Turner Corporation, 250 West Court Street CINCINNATI, OH 45202									Construction	'		19,055,361		
Music Hall Revitalization Company, 1241 Elm Street CINCINNATI, OH 45202									Construction	n		9	,531,483	

(C)

(D)

(B)

2,750,174 Construction Hudepohl Construction, Construction 2,065,488

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Construction

HGC Construction, 2814 Stanton Avenue CINCINNATI, OH 45206

6057 State Route 128 CLEVES, OH 45002

5050 Section Avenue Suite 330 CINCINNATI, OH 45212

compensation from the organization ▶ 36

CINCINNATI, OH 45202
Triversity Contruction Co LLC,

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	lete column (A)	_
Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	9,579,458	9,579,458		
2 Grants and other assistance to domestic individuals See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees	839,555	385,574	453,981	
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	292,319	134,251	158,068	
<b>7</b> Other salaries and wages	6,937,950	3,186,325	3,751,625	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
9 Other employee benefits	704,266	323,441	380,825	
<b>10</b> Payroll taxes	404,482	185,763	218,719	
11 Fees for services (non-employees)				
a Management	268,830	268,830		
<b>b</b> Legal	293,313	182,362	110,951	
c Accounting	210,965	1,470	209,495	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	368,907	368,907		
<b>12</b> Advertising and promotion	260,314	201,507	58,807	
13 Office expenses	760,881	675,891	84,990	
<b>14</b> Information technology	268,359		268,359	
15 Royalties	0			
<b>16</b> Occupancy	4,827,772	4,493,710	334,062	
<b>17</b> Travel	75,938	46,461	29,477	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
<b>19</b> Conferences, conventions, and meetings	0			
<b>20</b> Interest	6,760,272	6,639,536	120,736	
21 Payments to affiliates	0			
<b>22</b> Depreciation, depletion, and amortization	7,461,648	7,437,303	24,345	
23 Insurance	548,628	373,974	174,654	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O )				
a REAL ESTATE DEV CONSTRUCTION	9,140,946	9,140,946		
b EVENT AND PROGRAM PLANNING	1,496,648	1,496,648		
c SAFE AND CLEAN PROGRAM	788,351	788,351		
d PROFESSIONAL MEMBERSHIPS	10,438		10,438	
e All other expenses	141,885	139,923	1,962	
25 Total functional expenses. Add lines 1 through 24e	52,442,125	46,050,631	6,391,494	0
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)	1			

(B) End of year

Page **11** 

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25.267.841

6,811,392

5,958,382

243,190,967

29.046.037

718,190

349.748.267

18,442,268

27.768.851

53.912.171

225 737 162

8.508.713

334.371,166

13,937,775

1.439.326

15,377,101

349.748.267 Form **990** (2017)

2,001

0

0

## Check if Schedule O contains a response or note to any line in this Part IX .

Inventories for sale or use .

**b** Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Prepaid expenses and deferred charges

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here ▶ 🔲 and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Other assets See Part IV, line 11 . . . .

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

		0 0 ,		,
1	Cash-non-interest-bearing	0	1	0
2	Savings and temporary cash investments	36,075,578	2	34,043,989
3	Pledges and grants receivable, net	1,469,650	3	1,316,593
4	Accounts receivable, net	3.382.663	4	3.394.876

279,205,438

36,014,471

(A)

Beginning of year

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30

31

32

33

34

0 24

0 11

0 12

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0 18

0 5

0 6

29.088.164

5,228,598

6,099,935

201,361,033

49.204.172

1.063.776

9.038.376

26.594.547

43,490,471

239 388 828

8.030.030

326,544,253

3.063.632

3.365.684

6,429,316

332.973.569

0 29

2,001

332.973.569

Accounts receivable, net . . . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 

10a

10b

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . Assets Notes and loans receivable, net

iabilities Fund Balances

11

12

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31

32

33

34

Assets or

Net

☐ Cash ☑ Accrual ☐ Other

Both consolidated and separate basis

☐ Both consolidated and separate basis

3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 5 5

Other changes in net assets or fund balances (explain in Schedule O) . . . . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

If the organization changed its method of accounting from a prior year or checked "Other." explain in

c 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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

6 7

8

9

10

Page **12** 

6,429,316

630,843

450,000

321,126

No

No

Nο

Form 990 (2017)

15,377,101

Yes

Yes

Yes

2a

2b

2c

3а

3b

# Part XIII Financial Statements and Reporting 1 Accounting method used to prepare the Form 990

Schedule O

Form 990 (2017)

**Reconcilliation of Net Assets** 

Investment expenses . . . . .

Prior period adjustments . . . .

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

Part XI

#### **Additional Data**

Software ID:

Software Version:

**EIN:** 20-0446324

Name: Cincinnati Center City Development Corp

Form 990 (2017)

#### Form 990, Part III, Line 4a:

OVER-THE-RHINE 3CDC CONTINUED ITS SUMMER PROGRAMMING AT WASHINGTON PARK IN 2017, HIGHLIGHTED BY THE INCREASED POPULARITY OF THE DECK IN ITS THIRD YEAR OF OPERATION THE ORGANIZATION HOSTED MORE THAN 545 EVENTS AT THE PARK, DRAWING APPROXIMATELY 1,000,000 PEOPLE TO OTR 3CDC OPERATED ITS FIRST FULL YEAR AT MEMORIAL HALL, A PERFORMANCE SPACE AND EVENT VENUE LISTED ON THE NATIONAL REGISTER OF HISTORIC PLACES 3CDC HOSTED MORE THAN 325 VARIOUS CORPORATE AND THIRD-PARTY EVENTS 3CDC ALSO COMPLETED THE RENOVATION OF ZIEGLER PARK, EXPANDING THE PARK FROM 1 5 TO 4 5 ACRES OF USABLE GREEN SPACE AS WELL AS CONSTRUCTING A NEW GARAGE, POOL AND BASKETBALL COURTS THE GARAGE AND POOL WERE BOTH OPENED TO THE PUBLIC MIDYEAR THE ORGANIZATION ALSO BEGAN AND SUBSTANTIALLY COMPLETED CONSTRUCTION ON ITS NEXT PHASE OF AN OVERALL AFFORDABLE HOUSING INITIATIVE, ABINGTON RACE & PLEASANT, WHICH WILL PRODUCE 50 AFFORDABLE HOUSING UNITS AND FIVE NEW COMMERCIAL SPACES ADDITIONALLY, VARIOUS RESIDENTIAL PROJECTS COMPLETED CONSTRUCTION DEGAN ON VARIOUS RESIDENTIAL PROJECTS WHICH 2VILL YIFLD 28 ADDITIONAL CONDOMINIUM UNITS

#### Form 990, Part III, Line 4b:

FOUNTAIN SOUARE DISTRICT/CENTRAL BUSINESS DISTRICT IN 2017, 3CDC HOSTED OVER 520 EVENTS AT FOUNTAIN SOUARE, WELCOMING OVER 3,000,000 VISITORS TO DOWNTOWN CINCINNATI IN ADDITION. THE ORGANIZATION BEGAN CONSTRUCTION OF A MIXED-USE DEVELOPMENT AT THE CORNER OF COURT & WALNUT THAT

WILL YIELD A NEW 560-SPACE ABOVE-GRADE PARKING GARAGE, 139 RESIDENTIAL UNITS AND A MULTI-STORY KROGER GROCERY STORE

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation hours per amount of other person is both an officer week (list from related from the compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Michael Fisher

Board Member

S Kay Geiger

Board Member

Paul F Gelter

Board Member

Board Member

James Henning

Board Member

Todd Gick

								organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	O.E.	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
John F Barrett	5 0	×						0	0	0	
Board Member	0 0										
Neil K Bortz	5 0	l									
Board Member	0 0	X						0	0	0	
		<b>-</b>	<del>                                     </del>		-		-				

Calvın D Buford	5 0	¥			0	0	
Board Member	0 0	^			9	0	
Robert H Castellini	5 0	×			O	0	
Board Member	0 0	^			0	Ĭ	
Michael Comer	5 0	×			0	0	

Board Member	0.0	^			0	Ŭ	
Robert H Castellini	5 0	×			0	0	
Board Member	0 0	*			,	Š	
Michael Comer	5 0	×			0	0	
Board Member	0 0	^					

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee)

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours				r/tr	ustee		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Brian Hodgett Board Member	5 0	×						0	0	0
Karen M Hoguet Board Member	5 0	Х						0	0	0
J Phillip Holloman Board Member	5 0	×						0	0	0
Kevin Jones Board Member	5 0	x						0	0	0
Ellen M Katz Board Member	5 0	×						0	0	0
Timothy Maloney	5 0									

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Board Member
Kevin Jones
Board Member
Ellen M Katz
Board Member

Rodney McMullen

John C Merchant

Ralph S Michael III

Board Member

Board Member

Board Member

Vice Chairman

Jospeh A Pichler

Vice Chairman

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average hours per than one box, unless compensation compensation amount of other week (list person is both an officer from related from the compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and	a dır	recto	r/tr	ustee	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
R Michael Prescott Board Member	5 0	×						0	0	0
Jeff Schomburger chairman	5 0	×		×				0	0	0
Paul Silva Board Member	5 0	x						0	0	0
Leigh Fox	5 0	×						0	0	0

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Paul Silva	
Board Member	
Leigh Fox	
Board Member(Beg 03/2017)	
Robert Reifsnyder	

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Board Member(Beg 07/2017)

Board Member (Thru 03/2017)

Board Member (Thru 07/2017)

Yvonne Gray Washington

Theodore Torbeck

Thomas L Williams

Board Member

Shane Wright

Board Member

Board Member

James M Zımmerman

and Independent Contractors

and Independent Contractors (C) (E) (A) (B) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

any hours

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and a director/trustee)

Х

organization

113,384

105,500

organizations

from the

27,238

21,261

12,772

20,335

20,087

9,890

18,763

12,935

0

	l	l			•		,	1	1 00 - 4	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Stephen G Leeper	45 0	x		x				434,345	0	27,23
President & CEO	5 0			``				10 1,0 10		2,,23
Adam Gelter	45 0			x				271,058	0	21,26
EVP, Development	5 0							·		,
Timothy Szilasi	45 0			×				190,538	0	12,77
SR VP & CFO	5 0									
Lann Field	45 0				×			154.327	0	20.33

		1		Х			190,538	0	
SR VP & CFO	5 0						,		
Lann Field	45 0								
					X		154,327	0	
VP Development	5 0								
Jeff Martin	45 0								
						l x l	151.375	0	1

VP Development	5 0		×		154,327	0	l
Jeff Martin	45 0						
VP Development	5.0			X	151,375	0	

5 0							134,327		
45 0									
5.0					X		151,375	0	
	45 0	45 0	45 0	45 0	45 0	45 0 X	45 0 X	45 0 X 151,375	45 0 X 151,375 0

VP Development	5 0						
Jeff Martin	45 0						
				l x	151,375	0	
VP Development	5 0				,		
Charaka Camad	50 0						

eff Martın	45 0			×	151,375	0	
/P Development	5 0			^	131,373	,	
Christy Samad	50 0						

VP Development	5 0			^	151,3/5	0	
Christy Samad	50 0						
VD Events				Х	129,231	0	

Christy Samad	50 0			v	129.231	0	
VP Events	0.0				123,231	0	
Angle White	50 0						

0 0

Controller

Deana Taylor

VP Human Resources

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493255009808
SC	H <b>ED</b> m 99	ULE A		Public (	Charity Statu rganization is a sect 4947(a)(1) nonexe	ion 501(c)(3) o empt charitable	organization or trust.	ort	2017
Depar	ment of	the Treasury	▶ Inf	ormation abou	ıt Schedule A (Form	990 or 990-EZ		ıctions is at	Open to Public Inspection
Nam	e of th	nie Service he organiza			<u>www.irs.g</u>	ov/form990.		Employer identific	<u> </u>
Cincin	natı Cei	nter City Devel	opment Corp					20-0446324	
	rt I				us (All organization			See instructions.	
	rganız				ent is (For lines 1 thro			/A.V.	
1		A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i).</b>							
2					1)(A)(ii). (Attach Scl	•	•		
3		·		•	vice organization desc			-	
4		name, city,	and state _		ed in conjunction with				
5		(b)(1)(A)	( <b>iv).</b> (Comple	ete Part II )	t of a college or unive				ped in <b>section 170</b>
6			·	-	governmental unit de				
7	<b>✓</b>			mally receives ( <b>vi).</b> (Complete	a substantial part of it : Part II )	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	ribed in <b>sectior</b>	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10		from activit	ies related to income and	o its exempt fun unrelated busin	(1) more than 331/39 ictions—subject to cer ess taxable income (learnplete Part III )	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ition organiz	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>i09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509</b> (a	
а		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		<b>Type II.</b> A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally		and C. supporting organizatio ions) You must com				ted with, its
d		Type III n	on-function integrated	ally integrate The organizatio	d. A supporting organ n generally must satis t IV, Sections A and	ızatıon operated fy a distribution	in connection wi requirement and	th its supported orgar	, ,
e		Check this	, box if the org	janization receiv	ved a written determir	nation from the I		pe I, Type II, Type II	functionally
f	Enter			ion-functionally dorganizations	integrated supporting	organization			
g				-	ipported organization(	s)		_	
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? (see instructions) (vi) A mount of monetary support (see instructions) instructions			(vi) Amount of other support (see instructions)
						Yes	No		
				<u> </u>					
Tota	l								

Page 2

	(b)(1)(A)(ix) (Complete only if you ch						y under Part
_	III. If the organization f	ails to qualify un	der the tests list	ed below, please	e complete Part	III.)	
	Section A. Public Support  Calendar year	1			1		
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	19,593,711	13,697,187	11,667,075	12,585,686	4,596,762	62,140,42
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	19,593,711	13,697,187	11,667,075	12,585,686	4,596,762	62,140,42
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5						62,140,42
_	from line 4 Section B. Total Support						
	Calendar year	(-)2012	(1-)2014	(-)201E	(4)2016	(-)2017	/£\T-+-
	(or fiscal year beginning in) ▶	(a)2013	<b>(b)</b> 2014	(c)2015	(d)2016	(e)2017	<b>(f)</b> Total
7		19,593,711	13,697,187	11,667,075	12,585,686	4,596,762	62,140,42
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	459,809	548,692	585,223	654,856	607,594	2,856,17
9							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	653,142	0	164,519	325,553	1,143,21
11	<b>Total support.</b> Add lines 7 through 10						66,139,80
12	Gross receipts from related activities,	etc (see instruction	ons)			12	141,023,51
13	First five years. If the Form 990 is for	or the organization	's first, second, th	rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) orga	nızatıon,
	check this box and <b>stop here</b>					<u> ▶ □</u>	
	Section C. Computation of Publi						
14	Public support percentage for 2017 (li	ne 6, column (f) dı	vided by line 11, c	olumn (f))		14	93 953 9
15	Public support percentage for 2016 So	hedule A, Part II, l	ine 14			15	92 265 <sup>c</sup>
16	a <b>33 1/3% support test—2017.</b> If the	e organization did r	not check the box	on line 13, and line	14 is 33 1/3% or	more, check this b	iox
ı	and stop here. The organization qual b 33 1/3% support test—2016. If the	ne organization did	not check a box o	n line 13 or 16a, ar	nd line 15 is 33 1/	3% or more, check	this
17	box and <b>stop here.</b> The organization a <b>10%-facts-and-circumstances tes</b> is 10% or more, and if the organization in Part VI how the organization meets	t— <b>2017.</b> If the orgon meets the "facts	ganization did not a -and-circumstance	check a box on linees" test, check this	box and stop he	re. Explain	_
ı	organization <b>10%-facts-and-circumstances te</b> 15 is 10% or more, and if the organi  Explain in Part VI how the organization	zation meets the "f	acts-and-circumst	ances" test, check	this box and <b>stop</b>	here.	▶□
	supported organization						ightharpoons

20

Р	art III Support Schedule for	Organization	s Described in	Section 509(a	a)(2)					
	(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If									
_	the organization fails to qualify under the tests listed below, please complete Part II.)									
Se	ection A. Public Support									
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 20	)17	(f) Total		
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")						$\longrightarrow$			
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									
4	under section 513 Tax revenues levied for the						+			
4	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 organization without charge									
6	Total. Add lines 1 through 5									
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons									
Ь	Amounts included on lines 2 and 3									
	received from other than disqualified									
	persons that exceed the greater of									
	\$5,000 or 1% of the amount on line 13 for the year									
_	Add lines 7a and 7b						-			
8	Public support. (Subtract line 7c						-			
•	from line 6 )									
Se	ction B. Total Support									
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 20	117	(f) Total		
_	(or fiscal year beginning in) ▶	(4) 2013	(5) 2011	(0, 2013	(4) 2010	(0) 2.		(1) 10ta		
9	Amounts from line 6									
0a	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 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)				<u> </u>	5011	-)(2)			
L4	First five years. If the Form 990 is for	r the organization	is first, second, th	nira, fourth, or fift	n tax year as a sect	on 501(	c)(3) org	_		
e-	check this box and stop here ection C. Computation of Public S	Support Bores	ntage					▶□		
<u> </u>	Public support percentage for 2017 (lin			column (f))		15				
15 16	Public support percentage from 2016 S									
		•	•			16				
	ection D. Computation of Investi Investment income percentage for 201			line 13 column (f	))	1 4 - 1				
L7	investment income percentage for 201	is (iiiie toc, colul	iii (i) aivided by	mie 15, column (1	//	17				

Investment income percentage from 2016 Schedule A, Part III, line 17 18 19a 331/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		

	they describe in the supported organization and accignated by diase 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 <b>Part VI</b> how the organization determined that the supported organization was described		
	ın 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		

		~	l 1	
3а	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 <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use	3с		

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 <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use	3c	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın 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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or	4b	

	· ·				
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 <b>Part VI</b> 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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations				
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 <b>Part VI</b> what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes				
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 <b>Part VI</b> , including (i) the names and EIN numbers of the supported				

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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

**Substitutions only.** Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes."

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

amendment to the organizing document)

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below

6

7

8

10a

	art IV Supporting Organizations (continued)		<u>'</u>	age 3		
ı C	Supporting Organizations (continued)		Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c				
S	Section B. Type I Supporting Organizations					
			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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2				
	organization					
S	Section 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 or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
_	Section D. All Type III Supporting Organizations					
	ection b. An Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a 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 <b>Part VI</b> the role the organization's supported organizations played in this regard	3				
_	Section 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 instruction	ons)				
	a The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)			
			/			
2	Activities Test Answer (a) and (b) below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> 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.	ΣU				
	<ul> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.</li> </ul>	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3b				

гœ	Type 111 Non-Functionally Integrated 509(a)(5) Supporting O	ı yanı	Lativiis	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> 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	<b>Distributable Amount.</b> 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-in	tegrate	d Type III supporting or	ganızatıon (see

Page **6** 

	Section E - Distribution Allocations (see (i) (ii) (iii) (iii)
10	Line 8 amount divided by Line 9 amount
9	Distributable amount for 2017 from Section C, line 6
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions
7	Total annual distributions. Add lines 1 through 6
6	Other distributions (describe in <b>Part VI</b> ) See instructions
_5	Qualified set-aside amounts (prior IRS approval required)

details in Part VI) See instructions			
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
h From 2012			

instructions)	Excess Distributions	Pre-2017	Amount for 2017
Distributable amount for 2017 from Section C, line     6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
c From 2014			
<b>d</b> From 2015			
e From 2016			
f Total of lines 3a through e		_	
<b>g</b> Applied to underdistributions of prior years			

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
<ul> <li>Carryover from 2012 not applied (see instructions)</li> </ul>		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
\$		
a Applied to underdistributions of prior years		
<b>b</b> Applied to 2017 distributable amount		

5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6	Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7	Excess distributions carryover to 2018. Add lines 3j and 4c		

Schedule A (Form 990 or 990-EZ) (2017)

c Remainder Subtract lines 4a and 4b from 4

8 Breakdown of line 7

d Excess from 2016.

a Excess from 2013. . . . . . **b** Excess from 2014. . . . **c** Excess from 2015. . . . .

e Excess from 2017. . . . .

### Additional Data

## Software ID: Software Version:

**EIN:** 20-0446324

Name: Cincinnati Center City Development Corp

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Schedule A (Form 990 or 990-EZ) 2017

Part VI Supplemental Information, Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, I

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

**SCHEDULE D** 

## **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.

OMB No 1545-0047

DLN: 93493255009808

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

	ne of the organization nnatı Center Cıty Development Corp				Limployer	dentification number
	,				20-0446324	1
Pai					or Accounts	
	Complete if the organization answered "Ye				/h\F	. d d bb
	Total number at and of year	(a) Dono	r adv	sed funds	(B)Fur	nds and other accounts
	Total number at end of year					
	Aggregate value of contributions to (during year)					
	Aggregate value of grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex			ets held in donor a	dvised funds ai	re the $\hfill \square$ Yes $\hfill \square$ N
	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?					
ar	Conservation Easements. Complete if t	he organization a	nswe	red "Yes" on For	m 990, Part I	IV, line 7.
	Purpose(s) of conservation easements held by the orga	nızatıon (check all	that a	pply)		
	Preservation of land for public use (e g , recreation	n or education)		Preservation of ar	n historically in	nportant land area
	Protection of natural habitat			Preservation of a	certified histor	ıc structure
	Preservation of open space					
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	on co	ntribution in the fo		
	Total number of conservation easements				2a Held	l at the End of the Year
1 )	Total acreage restricted by conservation easements				2b	
	Number of conservation easements on a certified histor	ic structuro includo	dun (-		$\vdash$	
	Number of conservation easements on a certified history number of conservation easements included in (c) acqu			•	2c	
i	structure listed in the National Register				2d	
	Number of conservation easements modified, transferred tax year	ed, released, exting	uishe	d, or terminated by	the organizati	on during the
	Number of states where property subject to conservation	on easement is loca	ted 🕨			
	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		ıng, ır	spection, handling	of violations,	☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of v	iolatio	ns, and enforcing c	conservation ea	
	Amount of expenses incurred in monitoring, inspecting.  \$\blue\$\$	, handling of violation	ons, a	nd enforcing consei	rvation easeme	ents during the year
	Does each conservation easement reported on line 2(d	) above satisfy the	reauir	ements of section 1	70(h)(4)(B)(ı)	
	and section $170(h)(4)(B)(II)^7$	,,		oments of section 1	.,,(,,,(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	and section $170(h)(4)(B)(ii)$ ? In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement	servation easement e footnote to the org	s ın ıtı	s revenue and expe	ense statement	Yes No
	In Part XIII, describe how the organization reports con- balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement Organizations Maintaining Collections Complete if the organization answered "Ye	servation easement e footnote to the or ots of Art, Historic es" on Form 990,	s in it: ganiza <b>:al Tr</b> Part	s revenue and expetion's financial state easures, or Oth IV, line 8.	ense statement ements that de ner Similar A	Yes No , and escribes  Assets.
	In Part XIII, describe how the organization reports con- balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement III Organizations Maintaining Collections	servation easement e footnote to the ord ts of <b>Art, Historic</b> es" on Form 990, 16 (ASC 958), not to public exhibition, e	s in it ganiza <b>:al Tr</b> Part o repo	s revenue and expetion's financial state  easures, or Oth  IV, line 8.  ort in its revenue state  ion, or research in	ense statement ements that de ner Similar A atement and b	Yes No  n, and escribes  Assets.  alance sheet works of
l	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement Organizations Maintaining Collections Complete if the organization answered "Yes If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for	servation easement e footnote to the ord ts of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, encial statements the focal (ASC 958), to re	s in its ganiza cal Tr Part o repo educat at des port ii	easures, or Oth IV, line 8. ort in its revenue st ion, or research in cribes these items	ense statement ements that de ner Similar A atement and b furtherance of ment and balar	Yes No s, and escribes  Assets.  alance sheet works of public service, ace sheet works of art,
•	In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer  Organizations Maintaining Collections Complete if the organization answered "Year If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finate organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for publisherical treasures, or other similar assets held for publisherical treasures.	servation easement e footnote to the ord ts of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, encial statements the focal (ASC 958), to re	s in its ganiza cal Tr Part o repo educat at des port ii	easures, or Oth IV, line 8. ort in its revenue st ion, or research in cribes these items	ense statement ements that de ner Similar A atement and b furtherance of ment and balar nerance of pub	Yes No  a, and escribes  Assets.  alance sheet works of public service, the sheet works of art, and the service, provide the
, (i	In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement.  Organizations Maintaining Collections Complete if the organization answered "Yearth organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finatification of the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items  Revenue included on Form 990, Part VIII, line 1	servation easement e footnote to the ord ts of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, encial statements the focal (ASC 958), to re	s in its ganiza cal Tr Part o repo educat at des port ii	easures, or Oth IV, line 8. ort in its revenue st ion, or research in cribes these items	ense statement ements that de ner Similar A atement and b furtherance of ment and balar nerance of pub	Yes No s, and escribes  Assets.  alance sheet works of public service, ace sheet works of art,
) (i	In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement.  Organizations Maintaining Collections Complete if the organization answered "Yearth organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finatif the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X If the organization received or held works of art, historical treasures included in Form 990, Part X	servation easement e footnote to the ora ts of Art, Historic es" on Form 990, 16 (ASC 958), not t public exhibition, e nicial statements the 16 (ASC 958), to re olic exhibition, educ	s in it. ganiza  cal Tr Part o report educat at des port in ation,	easures, or Oth IV, line 8. ort in its revenue st ion, or research in cribes these items in its revenue stater or research in furth	ense statement ements that de ner Similar A atement and b furtherance of nent and balar nerance of pub	Yes No s, and escribes  Assets.  alance sheet works of public service, ice sheet works of art, lic service, provide the
a b	In Part XIII, describe how the organization reports combalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement.  Organizations Maintaining Collections Complete if the organization answered "Yeart, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finate if the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items  Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X	servation easement e footnote to the ora ts of Art, Historic es" on Form 990, 16 (ASC 958), not t public exhibition, e nicial statements the 16 (ASC 958), to re olic exhibition, educ	s in it. ganiza  cal Tr Part o report educat at des port in ation,	easures, or Oth IV, line 8. ort in its revenue st ion, or research in cribes these items in its revenue stater or research in furth	ense statement ements that de ner Similar A atement and b furtherance of nent and balar nerance of pub	Yes No s, and escribes  Assets.  alance sheet works of public service, ice sheet works of art, lic service, provide the

c Leasehold improvements

**d** Equipment . . . .

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

	dule D (Form 990) 2017								Page <b>2</b>
Par	Organizations Maintaining Co	llections o	f Art, Histo	rical T	reasu	ıres, or	Other Similar	Assets (	continued)
3	Using the organization's acquisition, accession items (check all that apply)	on, and other	records, checl	any of	the fo	llowing th	at are a significa	nt use of its	collection
а	Public exhibition		d		Loan	or exchai	nge programs		
b	Scholarly research		е		Other	r			
С	Preservation for future generations								
4	Provide a description of the organization's co Part XIII	llections and	explain how t	ney furt	her the	e organiza	ition's exempt pu	rpose in	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							☐ Ye	s 🗆 No
Pai	Complete if the organization ans X, line 21.		' on Form 99	0, Part	IV, lı	ne 9, or	reported an an	nount on F	Form 990, Part
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lan or other	ntermediary fo	r contri	bution	s or other	assets not	☐ Ye	s 🗹 No
Ь	If "Yes," explain the arrangement in Part XII	I and comple	te the followin	a table		Γ		Amount	
c	Beginning balance			9 (45)			1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount on F	orm 990, Par	t X, line 21, fo	r escrov	v or cu	stodial ac	count liability?	✓ Ye	s 🗆 No
b	If "Yes," explain the arrangement in Part XII								
Pa	rt V Endowment Funds. Complete i	f the organ	zation answ	ered "Y					
4 -	Barrania of complete	(a)Curren	t year (b)	Prior yea	ır	(c)Two yea	ars back (d)Three	years back	(e)Four years back
	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses  Grants or scholarships								
	'								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								_
2	Provide the estimated percentage of the curr	ent year end	balance (line	1g, colu	mn (a)	)) held as			_
а	Board designated or quasi-endowment <b>&gt;</b>								
b	Permanent endowment ▶								
С	Temporarily restricted endowment ▶								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100	1%						
3a	Are there endowment funds not in the posse organization by	ssion of the o	organization th	at are h	eld an	d adminis	tered for the		Yes No
	(i) unrelated organizations								a(i)
	(ii) related organizations								n(ii)
ь 4	If "Yes" on 3a(II), are the related organization Describe in Part XIII the intended uses of the								3b
	t VI Land, Buildings, and Equipme	nt.			T) (		Caa Farra 000	Davit V. Iva	- 10
	Complete if the organization ans  Description of property (a) Cost or of (investment)	ther basis	(b) Cost or oth				See Form 990, mulated depreciatio		d) Book value
1-	Land			0.7	84 764				0 204 264
	Buildings				84,264 15,263		15,182,8	45	78,832,418
U	Dunungs	l		5-,0	-5,205	I	15,102,0		,0,032,410

108,787,592

19,896,199

48,222,120

91,219,114

16,683,094

48,172,077

243,190,967

17,568,478

3,213,105

50,043

	Form 990) 2017				Page <b>3</b>
	<b>Investments—Other Securities.</b> Complete r See Form 990, Part X, line 12.	f the organiza	tion answ	ered "Yes" on Form	990, Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b) Book value		thod of valuation -of-year market value
(1) Financial (2) Closely-h (3)Other	derivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12 )	•			
Part VIII	Investments—Program Related.				
	Complete if the organization answered 'Yes' o  (a) Description of investment	n Form 990, F (b) Book			0, Part X, line 13. thod of valuation
(4) 110 (50 714					-of-year market value
	ENT IN SUBSIDIARIES TATE HELD FOR INVEST		3,970,241 5,075,796		<u>F</u>
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column	a (b) must equal Form 990, Part X, col (B) line 13 )	29	9,046,037		
	Other Assets. Complete if the organization answer	ered 'Yes' on For		t IV, line 11d See Forr	
(1)	(a) Descrip	ition			(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. Complete if the organizatio See Form 990, Part X, line 25.	n answered 'Y	es' on For	m 990, Part IV, line	11e or 11f.
1.	(a) Description of liability		<b>(b)</b> Bo	ok value	
(1) Federal in				6,120,134	
	INSTRUMENT LIABILITY			1,025,009	
OTHER LIABI	LITIES			959,118	
	EPOSITS HELD SE OBLIGATIONS			239,160	
(6)	or optionitors			165,292	
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 25 )	, 1		9 F00 712	
	r uncertain tax positions  In Part XIII, provide the tex	t of the footnot	e to the org	8,508,713 sanızatıon's financial st	·
organızatıon'	s liability for uncertain tax positions under FIN 48 (AS	C 740) Check l	here if the t	ext of the footnote has	been provided in Part XIII 🔽

Schedule D (Form 990) 2017

	Complete if the organi	zation answered 'Yes' on Form 990, Par	I IV, I	ine 12a.		_
1	Total revenue, gains, and other s	upport per audited financial statements .			1	
2	Amounts included on line 1 but n	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
c	Recoveries of prior year grants		<b>2</b> c			
d	Other (Describe in Part XIII ) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line $\bf 2e$ from line $\bf 1$ .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII ) .		4b			
С	Add lines 4a and 4b		•		4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Par			Retur	1.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
c	Other losses		2c			
d	Other (Describe in Part XIII ) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 🔒 .	4a			
b	Other (Describe in Part XIII ) .		4b			
С	Add lines 4a and 4b				4c	
5	Total expenses Add lines 3 and 4	Ic. (This must equal Form 990, Part I, line 18	) .		5	
Pai	t XIIII Supplemental Info	ormation				
Pro	vide the descriptions required for P lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and 2d and 4b Also complete this part to provide	4, Par any a	t IV, lines 1b and 2b, Pa additional information	rt V, line	4, Part X, line 2, Part
	Return Reference		Ex	planation		
See A	Addıtıonal Data Table					

Page 4

chedule D (Form 990) 2017	Page <b>5</b>
Part XIII Supplemental Information (conti	
Return Reference	Explanation
	Schedule D (Form 990) 2017

### Additional Data

Software ID: Software Version:

PROJECT, RESPECTIVELY

EIN: 20-0446324

Name: Cincinnati Center City Development Corp

HOMEOWNERSHIP UNIT SALES ACCORDING TO THE COLLATERAL SHARING AGREEMENTS IN PLACE FOR EACH

, , , ,

### Supplemental Informat

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART IV, LINE 2B	ESCROW AND CUSTODIAL ACCOUNTS COST METHOD OF EVALUATION FOR REAL ESTATE HELD FOR SALE AND REAL ESTATE HELD FOR INVESTMENT DURING THE TAX YEAR GATEWAY II, LLC SERVED AS AN ESCROW AGENT OVER TWO SEPARATE BANK ACCOUNTS THE PURPOSE FOR THIS ROLE IS TO AID MULTIPLE LENDERS ON DEVELOPMENT PROJECTS IN OVER-THE-RHINE IN DISTRIBUTING THE SALES PROCEEDS FROM

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	UNCERTAIN TAX POSITIONS 3CDC and OTR Holdings, Inc (OTR) are exempt from federal income ta x under the applicable IRC section, though it is subject to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the Code 3CDC and OTR is, il kewise, exempt from Ohio income tax under comparable state statutes 3CDC derives revenues from an unrelated trade or business and files a Federal Form 990-T and a Cincinnati Busin ess Tax Return to pay its associated tax liabilities. The calculated income tax provision currently is operating at a loss, is immaterial, and thus no provision is recorded in the financial statements. 3CDC HAS CREATED NUMEROUS SINGLE MEMBER LIMITED LIABILITY COMPANIES TO CARRY OUT ITS MISSION WHICH ARE DISREGARDED FOR FEDERAL TAX PURPOSES. 3CDC IS THE SOLE MEMBER, THEREFORE, THE TRANSACTIONS OF THESE ENTITIES ARE REPORTED TO THE INTERNAL REVENUE SERVICE. ON 3CDCS TAX RETURN OTR HAS CREATED A SINGLE MEMBER LIMITED LIABILITY COMPANY TO CARRY OUT ITS MISSION THE COMPANY IS DISREGARDED FOR FEDERAL TAX PURPOSES OTT IS THE SOLE MEMBER, THEREFORE, THE TRANSACTIONS OF THE ENTITY ARE REPORTED TO THE INTERNAL REVENUE SERVICE ON OTRS TAX RETURN VARIOUS LIMITED LIABILITY COMPANIES HAVE BEEN CREATED AS PART OF NEW MARKETS TAX CREDIT (NMTC) FINANCING STRUCTURES AND ARE PARTINERSHIPS FOR FEDERAL TAX PURPOSES 3CDC IS THE NINETY-NINE, NINETY-SEVEN, OR NINETY-FIVE PERCENT MEMBER AND THE CI NCINNATI EQUITY FUND II, LLC OR AN UNRELATED, THIRD PARTY IS THE ONE, THREE OR FIVE PERCENT OWNER AS PART OF VARIOUS HISTORIC TAX CREDIT (HTC) FINANCING STRUCTURES, ANOTHER WHOLLY OWNED SUBSIDIARY (HTC MANAGER) IS A NOT-FOR-PROFIT ORGANIZATION CREATED AS THE MANAGING MEMBER THAT IS NOT A TAX-EXEMPT ENTITY THE ORGANIZATION ELECTED NOT TO BE TREATED AS THE MANAGING MEMBER THAT IS NOT A TAX-EXEMPT ENTITY THE ORGANIZATION ELECTED NOT TO BE TREATED AS A TAX-EXEM PT ENTITY FOR PURPOSES OF SECTIONS 168(H)(5) AND (6) OF THE CODE BY THIS ELECTION, ANY GA IN RECOGNIZED BY THE DISPOSITION OF AN INTEREST IN THE

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	TLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS, TO IDENTIFY AND REPORT UN RELATED INCOME, TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS, AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS 3CDC HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECO GNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS FOR THE YEAR ENDING DECEMBER 31, 2017 AN D

Supplemental Information

2016

Schedule I (Form 990)		Grants and O	41 4 1 4						
	•		ther Assistanc and Individuals	ce to Organization in the Unite	•		OMB No 1545-0047 2017		
Department of the Treasury Internal Revenue Service			tion answered "Yes," o  ▶ Attach to Form I (Form 990) and its i	990.	•		Open to Public Inspection		
Name of the organization Cincinnati Center City Development Corp						Employer identif	fication number		
Circumati Center City Development Corp						20-0446324			
<ol> <li>Does the organization maintain reconfide selection criteria used to award to awa</li></ol>	the grants of the procedure to Dome	or assistance <sup>7</sup> es for monitoring the use estic Organizations an	of grant funds in the Un	ited States			✓ Yes □ No		
that received more than \$5,0  (a) Name and address of organization or government	EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) 27-3 Music Hall Revitalization Company Inc 1241 Elm Street Cincinnati, OH 45202	055959	501(c)(3)	9,531,457				General Support		
(2) 31-1 Over-the-Rhine Chamber of Commerce 1105 Elm Street Cincinnati, OH 45202	300658	501(c)(6)	9,500				General Support		
<ul><li>Enter total number of section 501(c)</li><li>Enter total number of other organization</li></ul>		_					1 1 1 chedule I (Form 990) 2017		

WITH THE DRAW ON FUNDS

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9325	5009	808
Sch	nedule J	С	ompensati	ion Information	OM	IB No	1545-0	0047
`	m 990)	► Complete if the or	Compensa ganization answ ► Attach	Trustees, Key Employees, and Hig ated Employees vered "Yes" on Form 990, Part IV a to Form 990. I (Form 990) and its instructions	, line 23.		)17	
•	tment of the Treasury al Revenue Service	P Information a		gov/form990.	is at		ectio	
	me of the organiza				Employer identificat	ion nu	ımber	
CITIC	cimati Center City D	evelopment Corp			20-0446324			
Pa	rt I Questi	ons Regarding Compensa	ation					
	•						Yes	No
1a				f the following to or for a person liste y relevant information regarding the				
	First-class	s or charter travel		Housing allowance or residence for	personal use			
	☐ Travel for	companions		Payments for business use of perso				
	_	nification and gross-up paymen	ts 📙	Health or social club dues or initiati				
	☐ Discretion	nary spending account	Ш	Personal services (e g , maid, chaut	feur, chef)			
b		xes in line 1a are checked, did all of the expenses described ab		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b		
2				or allowing expenses incurred by all		2		
	directors, truste	es, officers, including the CEO/	Executive Director	r, regarding the items checked in line	e 1a?			
3	organization's C	EO/Executive Director Check a	all that apply Dor	ed to establish the compensation of the compen				
	☐ Compens	ation committee		Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a		No
b		r receive payment from, a supp		ified retirement plan?		4b		No
c	Participate in, o	r receive payment from, an equ	uty-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons ar	nd provide the app	olicable amounts for each item in Par	t III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Secti ontingent on the revenues of		the organization pay or accrue any				
а	The organization	n <sup>&gt;</sup>				5a		No
b	Any related orga					5b		No
		5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Secti ontingent on the net earnings o		the organization pay or accrue any				
а	The organization					6a		No
b	Any related orga					6b		No_
_	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Secti escribed in lines 5 and 6? If "Ye		the organization provide any nonfixe rt III	a	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		No
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		
For F	Panerwork Redu	uction Act Notice, see the In	structions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	990)	2017

Part II Officers,	Dire	ctors, Trustees, Key	y Employees, and Hig	ghest Compensated	Employees. Use dup	licate copies if addition	nal space is needed.	
instructions, on row (ii)	Do no	ot list any individuals that	ted on Schedule J, report t are not listed on Form 9 dividual must equal the to	90, Part VII	-	_		at individual
(A) Name and Title			of W-2 and/or 1099-MISo (ii) Bonus & incentive compensation		(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 Stephen G Leeper President & CEO	(i)	345,207	83,882	5,256	13,273	18,944	466,562	0
1100,40.10 & 52.2	(ii)	0	0	0	0	0	0	0
2 Adam Gelter EVP, Development	(i)	241,058	30,000	0	12,073	11,885	295,016	0
	(ii)	0	0	0	0	0	0	0
3 Timothy Szilasi SR VP & CFO	(i)	171,538	19,000	0	8,596	4,893	204,027	0
	(ii)	0	0	0	0	0	0	0
4 Lann Field VP Development	(i)	139,327	15,000	0	6,970	13,742	175,039	0
	(ii)	0	0	0	0	0	0	0
5 Jeff Martin VP Development	(i)	134,375	17,000	0	6,722	13,958	172,055	0
	(ii)	0	0	0	0	0	0	0
			!		T T T T T T T T T T T T T T T T T T T			

Schedule J (Form 990) 2017	Page <b>3</b>							
Part III Supplemental Inform	ation							
Provide the information, explanation, or	rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information							
Return Reference	Explanation							
	NON-FIXED PAYMENTS ALL EMPLOYEES OF 3CDC ARE ELIGIBLE FOR A 10% BONUS DEPENDING ON PERFORMANCE METRICS THE FOLLOWING INDIVIDUALS RECEIVED BONUSES FROM THE ORGANIZATION IN 2017 STEPHEN G LEEPER, PRESIDENT & CEO \$83,882 ADAM GELTER, EVP, DEVELOPMENT \$30,000 TIMOTHY SZILASI, SR VP AND CFO \$19,000 LANN FIELD, VP DEVELOPMENT \$15,000 Jeff Martin, VP Development \$17,000 Christy Samad, VP Events \$15,000 Angie White, Controller \$5,500 Deana Taylor, VP Human Resources \$5,500 Bonuses were reviewed and approved by the Human Resources and Governance subcommittee and							

Schedule J (Form 990) 2017

documented in the board meeting minutes

efi	le GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 9	93493	25500	9808
Scl	nedule K	Suu	onlomontal l	Information o	n Tay E	Evom	nt Bon	de				OMB	No 154	5-0047	
(Fo	orm 990)			Information o wered "Yes" to Form					otions,			)	01	7	
		•	explanations	, and any additional i	information								701	. /	
	rtment of the Treasury nal Revenue Service	▶Informatio		((Form 990) and its		s is at <u>v</u>	www.irs.go	v/form99	<u>90</u> .				en to F inspect		
	of the organization Innati Center City Development Co	rn								Emplo	yer iden	tıficatıoı	n numbe	r	
	<u> </u>	· P								20-04	46324				
Pa	TI Bond Issues		T	T 4 10 = 1					_	1					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) De	escription o	of purpose	(g) De	efeased		On alf of		Pool ncing
													uer		
	PORT OF GREATER CINCINNATI	31-1752368	000000000	06-20-2013	24.0	000.000	Refunding	and Facility	v	Yes	No X	Yes	No X	Yes	No X
•	DEVELOPMENT AUTHORITY	31 1/31300			,.	,,,,,,,,,	Improveme		,				^		^
В	Port of Greater Cincinnati	31-1752368	000000000	09-06-2013	<del></del>	731.875	Refunding	Prior ISSU	 E		X		X		×
_	Development Authority					,			_		''				
	Port of Greater Cincinnati	31-1752368	000000000	09-03-2014	21.5	35.907	Facility Imp	provement			X		X		X
	Development Authority					,					''				
	Port of Greater Cincinnati	31-1752368	000000000	12-29-2017	5,1	.00,000	Refunding				X		X		×
	Development Authority				,	,									
Pa	rt II Proceeds														
						Α		В		C				D	
1	Amount of bonds retired					1,475	5,000		245,532		2,615	,081			0
2	Amount of bonds legally defease						0		0			0			0
3	Total proceeds of issue					24,000	0,000		731,875		21,535	,907		5,0	099,344
4	Gross proceeds in reserve funds						0		0			0			0
	Capitalized interest from proceed						0		0			0			0
<u>6</u>	Proceeds in refunding escrows .  Issuance costs from proceeds .					3,400	0,000		0			0			0
7 8	Credit enhancement from proceeds.						0		0			0			656
9	Working capital expenditures from						0 0								
10	Capital expenditures from proce						0		0			<u> </u>			0
11	Other spent proceeds					19,600	0.000		731,875		21,535	———		5.:	100,000
12	Other unspent proceeds						0		0			0		-,-	0
13	Year of substantial completion .				20	012		2013		20:	14			2017	
					Yes	No	Y (	es	No	Yes	No		Yes		No
14	Were the bonds issued as part o	f a current refunding	ıssue?		Х		>	×		Х			Х		
15	Were the bonds issued as part o	f an advance refundı	ng issue?			Х			Х		Х				Х
16	Has the final allocation of procee	eds been made?			Х			×		Х			Х		
17	Does the organization maintain				Х		>	×		Х			Х		
Pai	proceeds?		<u> </u>	<u> </u>											
						A		В		C				D	
			_		Yes	No	Y	es	No	Yes	No		Yes		No
1	Was the organization a partner in financed by tax-exempt bonds?	n a partnership, or a · · · · · · · · ·	member of an LLC,	which owned property		×			х		X				Χ
2	Are there any lease arrangemen	ts that may result in	private business use			Х			Х		Х				X
For	property?				Ca	t No 50					S	chedul	e K (Fo	rm 990	)) 2017

За

9

Part IV

Arbitrage

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PNC BANK NA

Schedule K (Form 990) 2017

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Yes

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No

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counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

counsel to review any research agreements relating to the financed property?

organization, or a state or local government . . . . . . . . . . . . . . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . .

Was the hedge superintegrated? . . . . .

Was the hedge terminated? . . . . . . . . .

No rebate due? . . . . . . . . .

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Yes

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Yes

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PNC BANK NA

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No

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Yes

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Yes

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Schedule K (Form 990) 2017

period?

Part V

No

D

Yes

Schedule K (Form 990) 2017

Yes

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied? . . . . . . . .

requirements of section 148? . . .

Yes

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

No

Yes

Yes

No

Х

Yes

Nο

Yes

No

No

Yes

Nο

ef	ile GRAPHIC print - DO NO	T PROCESS As	Filed Data -										934932		
	hedule K orm 990)	Su	pplemental l	Information o	n Tax-E	xem	pt E	Bonds				_	No 154		'
יי	orini 990)	► Complete if the	e organization ans	wered "Yes" to Form	990, Part I	V, line 2	24a. I	Provide des	criptions,			2	201	7	
Dan	artment of the Treasury			, and any additional i ▶ Attach to Form 990		ın Part	VI.					Op	en to P	ublic	
Inte	rnal Revenue Service	▶Informatio	n about Schedule H	( (Form 990) and its	instruction	s is at <u>w</u>	ww.i	rs.gov/fori	<u>11990</u> .			ī	nspecti	ion	
	ne of the organization cinnati Center City Development C	orp									yer iden: 46324	tificatio	n numbe	:r	
P	art I Bond Issues									20-04	40324				
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	orice	(	( <b>f)</b> Description	on of purpose	e (g) De	efeased	(h)	On	(i)	Pool
													alf of uer	fınar	ncing
										Yes	No	Yes	No	Yes	No
A	Port of Greater Cincinnati Development Authority	31-1752368	00000000	12-29-2017	17,1	01,664	Facılıt	y Constructi	on		Х		X		Х
	<u> </u>														
Ľ	art II Proceeds					۸		E	<u> </u>	C				D	
1	Amount of bonds retired			'		-	0				<u>-                                      </u>				
2	Amount of bonds legally defeas						0								
3	Total proceeds of issue					16,710,	,130								
4	Gross proceeds in reserve fund	s				207,	,500								
5	Capitalized interest from procee	eds					0								
6	Proceeds in refunding escrows						0								
7	Issuance costs from proceeds .					184,	,034								
8	Credit enhancement from proce						0								
9	Working capital expenditures fr						0								
10	Capital expenditures from proce						0								
11	Other spent proceeds						0								
12	Other unspent proceeds					10,349,	,999								
13	Year of substantial completion .					17									
					Yes	No		Yes	No	Yes	No		Yes		<u>No</u>
14	Were the bonds issued as part					Х									
15	Were the bonds issued as part					Х									
16	Has the final allocation of proce	eeds been made? .			Х										
17	Does the organization maintain proceeds?	adequate books and	records to support the	he final allocation of	×										
Pa	rt III Private Business Us											•			
						<b>A</b>		E		C				D	
1	Was the organization a partner financed by tax-exempt bonds?	in a partnership, or a	member of an LLC,	which owned property	Yes	No X		Yes	No	Yes	No		Yes		No
2	Are there any lease arrangeme property?	nts that may result in	private business use			х									
For	Panerwork Reduction Act Noti				Ca	No 50	193F			•	S	chadul	e K (Fo	rm 990	1) 2017

9

c

Part IV

Arbitrage

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

a section 501(c)(3) organization or a state or local government . . . . . Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government . . . . . . . . . . . . . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Does the bond issue meet the private security or payment test? . . .

Penalty in Lieu of Arbitrage Rebate? . . . . If "No" to line 1, did the following apply? . . . .

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . .

If "Yes" to line 2c, provide in Part VI the date the rebate Is the bond issue a variable rate issue? . . . .

Was the hedge superintegrated? . . . . . Was the hedge terminated? . . . . . . . . .

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

No

Page 2

			Δ	I	В	(	C	Г	)
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×						
<u>_</u>	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside							1	

ь	counsel to review any management or service contracts relating to the financed property?				
С	Are there any research agreements that may result in private business use of bond-financed property?	Х			
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?				

Δ

No

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Yes

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No

Yes

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No

Yes

Schedule K (Form 990) 2017

Yes

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

Schedule K (Form 990) 2017

period?

Part V

No

Yes

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

No

Yes

Nο

Yes

Yes

No

Yes

No

No

Yes

No

Yes

Schedule K (Form 990) 2017

Yes

efile GRAPHI	C print - DO NO	T PROCES	S As Fi	iled Data -					DI	_N: 93	4932	5500	09808
Schedule L (Form 990 or 990	Comple	te if the orga 27, 28a,	nization a 28b, or 28 ▶ Attac	ns with In Inswered "Yes Bc, or Form 99 th to Form 99	s" on Form 9 0-EZ, Part V 0 or Form 99	90, Part IV, I , line 38a or 0-EZ.		2017					
Department of the Tre Internal Revenue Serv	asurv	ormation abo	out Schedi	ıle L (Form 99 <u>www.irs.gov</u>		) and its inst	ructio	ns is	at	C	)pen		ıblic
Name of the org Cincinnati Center C	anızatıon Lity Development Corp	)						•	<b>yer ide</b> 6324	entifica	ition n	umbe	er
	ss Benefit Trar						rganıza	ations	s only)	ne 40b			
	) Name of disquali			Relationship be				(c) [	escrip ansact	tion of		) Corr es	rected? <b>No</b>
4958 3 Enter the an	mount of tax incur mount of tax, if an ans to and/or I nplete if the organ	y, on line 2, a  From Interestivation answer	bove, reimbested Per red "Yes" or	oursed by the orsons. The form 990-EZ,	rganization .		. : 	•	. •	\$ \$ 5, or if	the org	janiza	tion
(a) Name of	orted an amount o  (b) Relationship with organization	(c) Purpose	(d) Loan		(e)Original principal amount	(f)Balance due		(g) In (h) lefault? Approved by board or		ved by agre		ten ent?	
		-	То	From			Yes	No	Yes	No	Yes		No
Total					<b>\$</b>			ı					
	i <b>nts or Assistar</b> nplete if the orga					line 27.							
(a) Name of inter	rested person (b	) Relationship erested perso organizati	n and the	(c) Amount	of assistance	<b>(d)</b> Type	of assı	stano	ce	<b>(e)</b> Pu	rpose o	of assi	stance
									+				
For Danerwork Dec	luction Act Notice	see the Instruc	tions for Fo	rm 000 or 000-l	. <b>7</b> C:	at No. 500564		C -	andula.	I /Earm	000 0	. 000	EZ\ 201

(1) Adam Gelter Paul Gelter	Son of Board member	292,319	Compensation	No_
Part V Supplemental Information				_
Provide additional information for	responses to questions on	Schedule L (see instruction	ons)	

Return Reference

Schedule L, Part IV, Line 1

THE INDIVIDUAL WAS DETERMINED AT ARM'S LENGTH

Explanation

WAS EMPLOYED BY THE ORGANIZATION DURING THE YEAR. THE BOARD MEMBER IS NOT INVOLVED IN THE SUPERVISION NOR THE COMPENSATION SETTINGS FOR THE EMPLOYED INDIVIDUAL COMPENSATION FOR

Schedule I. (Form 990 or 990-F7) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493255009808 OMB No. 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Name of the organization Employer identification number Cincinnati Center City Development Corp 20-0446324 990 Schedule O, Supplemental Information Return **Explanation** Reference FORM 990. ORGANIZATION'S MISSION, CONTINUED (2) TO COMBAT COMMUNITY DETERIORATION, PROVIDE RELIEF TO PART III, THE POOR AND DISTRESSED, ELIMINATE DISCRIMINATION AND PREJUDICE, LESSEN NEIGHBORHOOD TENS LINE 1 IONS. STABILIZE. AND GENERALLY TO OTHERWISE PROMOTE COMMUNITY AND ECONOMIC DEVELOPMENT AND REDEVELOPMENT IN THE CITY'S DOWNTOWN, (3) TO LESSEN THE BURDENS OF GOVERNMENT OF THE CITY BY OVERSEEING PROJECTS, INCLUDING THOSE IN THE "CENTER CITY PLAN" PRESENTED TO THE CITY, AND PROGRAMS DESIGNED TO STRENGTHEN AND LEVERAGE THE CITY'S DOWNTOWN CORE ASSETS, INITIALL Y FOCUSING ON FOUNTAIN SQUARE, OVER THE RHINE AND THE BANKS, (4) TO IMPROVE THE ECONOMY OF THE CITY BY DEVELOPING, ATTRACTING, EXPANDING, AND RETAINING BUSINESS, INDUSTRIAL, EDUCAT IONAL, CULTURAL, CIVIC, COMMUNITY AND OTHER ENTERPRISES IN THE CITY AND THEREBY DEVELOPING , ATTRACTING, EXPANDING, AND RETAINING JOBS FOR THE PEOPLE OF THE CITY, (5) SOLELY FOR THE ABOVE PURPOSES. THE CORPORATION IS EMPOWERED TO TAKE AND HOLD BY BEQUEST, DEVISE, GIFT, C ONTRIBUTION, PURCHASE, LEASE, OR ANY OTHER FORM, EITHER ABSOLUTELY OR IN TRUST, ANY PROPER TY, REAL OR PERSONAL, TANGIBLE OR INTANGIBLE, WITHOUT LIMITATION AS TO AMOUNT OR VALUE, TO SELL, CONVEY, USE, ASSIGN AND DISPOSE OF ANY SUCH PROPERTY AND TO INVEST AND REINVEST THE INCOME AND PRINCIPAL THEREOF, TO DEAL WITH AND EXPEND THE INCOME AND PRINCIPAL OF THE COR PORATION. TO MAKE GIFTS OR CONTRIBUTIONS TO OTHER ENTITIES OR PERSONS. TO VOTE THE SHARES OR INTERESTS IN ANY STOCK OR OTHER EQUITY INVESTMENT HELD BY THE CORPORATION. TO MAINTAIN. PROTECT AND ENFORCE ALL RIGHTS. TITLE AND INTERESTS INCIDENTAL TO HOLDING TITLE TO PROPER TY HELD BY THE CORPORATION, TO DO ALL THINGS NECESSARY OR APPROPRIATE TO ACCOMPLISH THE FO REGOING, AND TO EXERCISE ALL OTHER RIGHTS AND POWERS CONFERRED BY THE LAWS OF THE STATE OF OHIO UPON NONPROFIT CORPORATIONS

Return Reference	Explanation
FORM 990, PART VI, LINE 1A	DELEGATION OF AUTHORITY EXECUTIVE COMMITTEE THE EXECUTIVE COMMITTEE AND SUCH OTHER DIRECTORS CHAIRPERSON OF THE BOARD, THE CHAIRPERSON OF EACH BOARD COMMITTEE AND SUCH OTHER DIRECTORS AS MAY BE NOMINATED BY THE CHAIRPERSON OF THE BOARD AND APPROVED BY THE BOARD OF DIRECTOR S FROM TIME TO TIME THE CHAIRPERSON OF THE BOARD SHALL SERVE AS THE CHAIRPERSON OF THEEX ECUTIVE COMMITTEE DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, THE EXECUTIVE COMMITTEE SHALL POSSESS AND MAY EXERCISE ALL OF THE POWERS OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE SHALL POSSESS AND MAY EXERCISE ALL OF THE POWERS OF THE BOARD OF DIRECTORS IN THE MANAGEMENT AND CONTROL OF THE BUSINESS OF THE CORPORATION TO THE EXTENT PERMITTE D BY LAW ALL ACTION TAKEN BY THE EXECUTIVE COMMITTEE SHALL BE REPORTED TO THE BOARD OF DIRECTORS AT ITS FIRST MEETING THE EXECUTIVE COMMITTEE SHALL BE REPORTED TO THE BOARD OF DIRECTORS MAY, AT ANY REGULAR MEETIN G, REVIEW THE ACTIONS OF THE EXECUTIVE COMMITTEE AND MAY MODIFY, RATIFY OR RESCIND ANY SUC HACTIONS, SUBJECT TO THE CONTRACT RIGHTS OF THIRD PARTIES NO MEMBER OF THE EXECUTIVE COMMITTEE WHO IS UNABLE TO ATTEND A MEETING OF THE EXECUTIVE COMMITTEE SHALL BE PERMITTED TO BE REPRESENTED AT SUCH MEETING BY A PROXY SUBCOMMITTEES THE BOARD OF DIRECTORS HEREBY DE LEGATES ITS POWER TO APPOINT FROM TIME TO TIME CERTAIN OF ITS MEMBERS TO ACT AS A COMMITTE E IN THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS TO THE EXECUTIVE COMMITTEE, AND THE EXECUTIVE COMMITTEE MAY, ON BEHALF OF THE BOARD OF DIRECTORS, FROM TIME TO TIME DE LEGATES TO ACCOMMITTEE MAY, ON BEHALF OF THE BOARD OF DIRECTORS, FROM TIME TO TIME DE LEGATES TO ACCOMMITTEE MAY, ON BEHALF OF THE BOARD OF DIRECTORS AND MAY INCLUD PEPSONS WHO ARE NOT DIRECTORS, FROM TIME TO TIME DE PERSONS WHO ARE NOT DIRECTORS AND MAY INCLUD PEPSONS WHO ARE NOT DIRECTORS, PROVIDED THAT AT LEAST ONE (1) DIRECTOR SHALL BE A MEMBER OF SUCH SUBCOMMITTEE OF SUCH COMMITTEE OF SUCH COMMITTEE BY A PROXIMITEE OR SUCH OMMITTEE MAY FROM TIME APPOINT A SUBCO

Return Explanation
Reference

Reference	
FORM 990,	FAMILY RELATIONSHIP ADAM GELTER, EXECUTIVE VICE PRESIDENT OF DEVELOPMENT, HAS A FAMILY REL
PART VI,	ATIONSHIP WITH PAUL GELTER, A MEMBER OF THE BOARD OF DIRECTORS
LINE 2	

990 Schedule O, Supplemental Information

Return Explanation

M 990 IS PROVIDED TO THE GOVERNING BOARD PRIOR TO FILING THE RETURN

Reference

11010101100	
FORM 990,	FORM 990 REVIEW PROCESS THE IRS FORM 990 IS PREPARED BY A NATIONAL EXTERNAL PUBLIC ACCOUNT
PART VI,	ING FIRM, GRANT THORNTON THE CFO AND CEO REVIEW THE DRAFT PRIOR TO DISSEMINATION TO THE A
LINE 11B	UDIT COMMITTEE THE AUDIT COMMITTEE IS GIVEN A COPY OF THE FULL TAX RETURN AND REVIEWS THE
	GOVERNANCE AND COMPENSATION DATA PRIOR TO FILING WITH THE IRS. A COMPLETE COPY OF THE FOR

Return
Reference
FORM 990. CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT CONFLICT OF INTEREST POLICY IS VERBAL

PART VI,
LINE 12C

LY DISCUSSED AT REGULAR STAFF MEETINGS EACH YEAR ALL OFFICERS, DIRECTORS AND EMPLOYEES AR
E REQUIRED TO FILL OUT A CONFLICT OF INTEREST (COI) DISCLOSURE FORM (ALTERNATIVE YEARS A R
ECONFIRMATION OF PRIOR YEAR) THE FORM IS REVIEWED AND SUMMARIZED INTERNALLY AND SUBMITTED
TO THE ORGANIZATION'S GENERAL COUNSEL FOR REVIEW AND DISCLOSURE TO EXECUTIVE COMMITTEE, I
F NECESSARY ANY ACTION TAKEN BY THE BOARD OR COMMITTEE THAT HAS A COI OF AN EMPLOYEE, DIR
ECTOR OR OFFICER IS DISCLOSED PRIOR TO PASSAGE AND THE INDIVIDUAL IS REQUESTED TO LEAVE TH
E ROOM DURING THE DISCUSSION AND VOTE

Return Explanation
Reference

FORM 990,	PROCESS FOR DETERMINING COMPENSATION THE EXECUTIVE COMMITTEE UTILIZED COMPARABILITY DATA W
PART VI,	HEN DETERMINING THE CEO'S COMPENSATION IN COMPLETING HIS EMPLOYMENT CONTRACT EACH YEAR TH
LINES 15A	E COMMITTEE REVIEWS THE ORGANIZATION'S SCORECARD AND RESULTS AS WELL AS THE CEO'S PERFORMA
AND 15B	NCE IN ASSESSING HIS COMPENSATION CHANGES FINALLY, THE CHAIR DISCUSSES THE RESULTS WITH B
	OARD MEMBERS OTHER KEY STAFF COMPENSATION IS DETERMINED BY COMPARING LOCAL OR REGIONAL SA
	LARY DATA AS WELL AS THE INDIVIDUAL'S PERFORMANCE

Return Reference	Explanation
FORM 990, PART VI, LINES 16A AND 16B	PROCEDURES FOR ENTERING INTO JOINT VENTURE ARRANGEMENTS 3CDC HAS NOT ADOPTED A FORMAL WRIT TEN POLICY TO ADDRESS JOINT VENTURE ACTIVITIES BUT THE ORGANIZATION UNDERTAKES PROACTIVE M EASURES TO ENSURE THAT THE ORGANIZATIONS ASSETS ARE PRESERVED FOR EXEMPT PURPOSES ALL POT ENTIAL JOINT VENTURE OPPORTUNITIES ARE TAKEN TO THE DEVELOPMENT & FINANCE COMMITTEE, BOARD OF DIRECTORS, AND, IF DEEMED NECESSARY, THE EXECUTIVE COMMITTEE AND/OR HR & GOVERNANCE SU B-COMMITTEE, TO DISCUSS WHY THE JOINT VENTURE HELPS FURTHER THE MISSION OF THE ORGANIZATIO N

Return Explanation
Reference

LINE 19

FORM 990, HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC THE ORGANIZATION'S ARTICLES OF INCORPORATIO PART VI, N, CONSTITUTION, BYLAWS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILAB SECTION C. LE UPON REQUEST

Return Explanation Pafaranca

LINE 9

Reference	
FORM 990,	OTHER CHANGES IN NET ASSETS GAIN ON CHANGE IN VALUE OF INTEREST RATE SWAP \$ 301,749 CHANGE
PART XI,	IN NON-CONTROLLING INTERESTS \$ 163,551 CAPITAL CONTRIBUTION \$ 1 MEMBER DISTRIBUTION \$ (14
LINE 9	4.175) TOTAL \$ 321.126

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493255009808 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2017 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Cincinnati Center City Development Corp 20-0446324 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I See Additional Data Table **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity (b) Primary activity (c) Legal domicile (state (d) (e) End-of-year assets Total income or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	<b>ns</b> Comple	l te ıf the org	anızatıon a	nswered	"Yes" on F	l orm 990	O, Part IV	, line 34 be	ecause it l	had one or	more	
(a) Name, address, and EIN of related organization	Prima	(b) ary activity	Legal domi or foreign	cile (state	(d) Exempt Cod	e section	Public cl (if sectio	(e) narity status n 501(c)(3))		(f) controlling entity	Section (13) co	g) n 512(b) ontrolled tity?
(1)OTR Holdings Inc	SAME AS	3CDC	0	+	501(C)(2)				3CDC		<b>Yes</b> Yes	No
1203 Walnut Street Cincinnati, OH 45202 20-2363373												
												<u> </u>
												<u> </u>
For Paperwork Reduction Act Notice, see the Instructions for Form 9	990.		Cat	No 5013	35Y				Schedu	ıle R (Form	990) 20	017

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. See Additional Data Table (a) Name, address, and EIN of (b) (c) (d) (e) (f) (g) (ı) (k) Share of Share of Code V-UBI Primary Legal Direct Predominant Disproprtionate General or Percentage related organization controlling income(related, total income end-of-year allocations? activity domicile amount in box managing ownership (state entity unrelated. assets 20 of partner? Schedule K-1 excluded from tax under (Form 1065) foreign sections 512country) 514) Yes No Yes No Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (g) Share of end-of-(a) (b) (d) (e) (f) (h) (1) Direct controlling Name, address, and EIN of Primary activity Legal Type of entity Share of total Percentage Section 512(b) related organization domicile entity (C corp, S corp, ıncome ownership (13) controlled year (state or foreign or trust) assets entity? country) Yes No (1)Ale House Manager Inc 3CDC Same as 3CDC -37.154 7.863.931 100 000 % Yes 1203 Walnut Cincinnati, OH 45202 30-0815086 (2) MEMORIAL HALL MANAGER INC ОН 3CDC Same as 3CDC 100 000 % Yes 1203 Walnut Cincinnati, OH 45202 35-2545167

						age 3
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35	b, or 3	36.				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?						
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity				1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b	Yes	
c Gift, grant, or capital contribution from related organization(s)				1c	Yes	
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				<b>1</b> g	Yes	
h Purchase of assets from related organization(s)				1h	Yes	
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)			 	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
o Sharing of paid employees with related organization(s)				10	Yes	1

k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1p	Yes	
q Reimbursement paid by related organization(s) for expenses	<u> </u>		
			No
r Other transfer of cash or property to related organization(s)	1r		No

1s 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (a) Name of related organization **(b)** Transaction (c) (d)
Method of determining amount involved Amount involved type (a-s)

See Additional Data Table

Schedule R (Form 990) 2017

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	1	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		?	(k) Percentage ownership
	<u> </u>		514)	Yes	No	<u> </u>		Yes	No		Yes	No	
										Schedul	le R (Form	1 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017 Software ID: Software Version:

**EIN:** 20-0446324

Name: Cincinnati Center City Development Corp

Form 990, Schedule R, Part I - Identification of Disregarded Entities

Company   Comp	orm 990, Schedule R, Part I - Identification of Disregarded E	ntities 	1	 	1	1
1203 Walnut	(a) Name, address, and EIN (if applicable) of disregarded entity		Legal Domicile (State			Direct Controlling
1203 Walnut	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-16,196	30,017,793	NA
Same as 3CDC   OH   164,585   780,548   NA   1.035 Walnut   1.03	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	28,251	281,931	NA
Fourtain Square Management Group LLC   Same as 3CDC   OH   -354,947   1,485,859   NA   1,203 Walnut   Cincinnati, OH 45202   Cincinnati	CCP LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	164,585	780,548	NA
Age   Age	ountain Square Management Group LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-354,947	1,485,859	NA
1203 Walnut	zeotropic Partners LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	4,464	1,892,428	NA
1203 Walnut	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	32,017,407	38,082,751	NA
1400 Race Master Tenant Manager LLC   1203 Walnut Cincinnati, OH 45202   27-3510288   28	400 Race Leveraged Lender LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-660,522	0	NA
OTR Predevelopment LLC   1203 Walnut   1202 Main Street LLC   1203 Walnut   1206 East Sixth Street LLC   1203 Walnut   1203	400 Race Master Tenant Manager LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-19,375	0	NA
1202 Main Street LLC	TR Predevelopment LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-237,599	3,399,305	NA
120 East Sixth Street LLC	202 Main Street LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-3,021	0	NA
O32811 Holdings LLC   183,335   NA   1203 Walnut   183,335   NA   1203 Walnut   1203	20 East Sıxth Street LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-132,457	13,045,957	NA
1203 Walnut Cincinnati, OH 45202 30-0706445  Urban Legacy VIII LLC 1203 Walnut Cincinnati, OH 45202 32-0359245  Paint Building Master Sub-Tenant LLC 1203 Walnut Cincinnati, OH 45202 61-1665699  Paint Building Leveraged Lender LLC 1203 Walnut Cincinnati, OH 45202 61-1665699  Same as 3CDC OH 47,486 1,413,043 NA	32811 Holdings LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	341,354	183,335	NA
1203 Walnut       Cincinnati, OH 45202         32-0359245       Same as 3CDC       OH       -86,198       3,915,999       NA         1203 Walnut       Cincinnati, OH 45202       OH       -86,198       3,915,999       NA         Paint Building Leveraged Lender LLC       Same as 3CDC       OH       47,486       1,413,043       NA         1203 Walnut       NA	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-103,993	1,226,789	NA
1203 Walnut Cincinnati, OH 45202 61-1665699  Paint Building Leveraged Lender LLC 1203 Walnut  Same as 3CDC  OH  47,486  1,413,043  NA	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-79,746	4,012,803	NA
1203 Walnut	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-86,198	3,915,999	NA
Cincinnati, OH 45202 38-3857641	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	47,486	1,413,043	NA
Mercer Commons OTR LLC         Same as 3CDC         OH         -207,804         445,871         NA           1203 Walnut Cincinnati, OH 45202 38-3877916         Same as 3CDC         OH         -207,804         445,871         NA	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-207,804	445,871	NA
Mercer Commons Garage OTR LLC         Same as 3CDC         OH         203,220         7,499,763         NA           1203 Walnut Cincinnati, OH 45202 36-4735410         Company of the common of	203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	203,220	7,499,763	NA
Fifth and Race LLC 1203 Walnut Cincinnati, OH 45202 32-0374707	fth and Race LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-809,646	64,288,991	NA
Cintrifuse Landlord LLC 1203 Walnut Cincinnati, OH 45202 35-2476904  Same as 3CDC OH -135,182 8,682,125 NA	intrifuse Landlord LLC 203 Walnut Incinnati, OH 45202	Same as 3CDC	ОН	-135,182	8,682,125	NA

Form 990, Schedule R, Part I - Identification of Disregarded Entities											
<b>(a)</b> Name, address, and EIN (If applicable) of disregarded entity	<b>(b)</b> Primary Activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Total income	(e) End-of-year assets	<b>(f)</b> Direct Controlling Entity						
Interstate Holdings LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	0	0	NA						
38-3859201 15th & Race 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	33,278	3,590,316	NA						
32-0416176  Mercer Commons Leveraged Lender 2 LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	-1,193	2,927,020	NA						
35-2468974  Memorial Hall Leverage Lender 1203 Walnut	Same as 3CDC	ОН	24,093	1,365,700	NA						
Cincinnati, OH 45202 81-0806500 1200 Vine LLC 1203 Walnut	Same as 3CDC	ОН	-47,511	3,506,463	NA						
Cincinnati, OH 45202 03-0589872 1222 Republic LLC	Same as 3CDC	ОН	0	0	NA						
1203 Walnut Cincinnati, OH 45202 30-0488295 Ziegler Park LLC	Same as 3CDC	ОН	-632,012	32,678,314	NA						
1203 Walnut Cincinnati, OH 45202 32-0474485											
Condo Holdings LLC 1203 Walnut Cincinnati, OH 45202 61-1743298	Same as 3CDC	ОН	112,358	10,673,649	NA						
Music Hall Development 1203 Walnut Cincinnati, OH 45202 32-0459068	Same as 3CDC	ОН	-114,274	4,490,729	NA						
Fourth and Race Redevelopment LLC 1203 Walnut Cincinnati, OH 45202 61-1751654	Same as 3CDC	ОН	-37,949	6,830,973	NA						
8th and Sycamore 1203 Walnut Cincinnati, OH 45202 38-3968966	Same as 3CDC	ОН	-200,972	15,313,795	NA						
Elm Street Parking 1203 Walnut Cincinnati, OH 45202 36-4811065	Same as 3CDC	ОН	-8,401	1,775,670	NA						
Ziegler Park Management Group LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	0	0	NA						
32-0490955  Memorial Hall Operations LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	-578,589	380,654	NA						
30-0889512 Washington Park Management Group LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	0	0	NA						
61-1789600  ARP Leverage Lender LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	-10,467	1,342,513	NA						
38-4017318 1415 Vine LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	-72,807	12,203,241	NA						
26-4643526  NE VineCentral LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	-460,431	16,505	NA						
02-0721452 15th & Vine LLC 1203 Walnut Cincinnati, OH 45202	Same as 3CDC	ОН	-23,684	17,594,507	NA						
37-1738643  Court & Walnut LLC 1203 Walnut	Same as 3CDC	ОН	-14,836	17,552,968	NA NA						
Cincinnati, OH 45202 35-2590242											

Form 990, Schedule R, Part I - Identification of Disregarded Entities (b) (a)

	•			_	•	
1423 Wal	nut Street	t Lot LLC				
		LOC LLC	21			
1203 Wal	nut					
Cincinnati	, OH 452	02				
37-18639	71					

Name, address, and EIN (if applicable) of disregarded entity

OTR District Management LLC

1203 Walnut Cincinnati, OH 45202 36-4872881

1400 Race LLC

1400 Vine LLC

Race and Vine Offices LLC

CINCINNATI, OH 45202

Liberty and Race Lot LLC

1203 Walnut Cincinnati, OH 45202 35-2612868

1203 Walnut

36-4884664

1203 Walnut Cincinnati, OH 45202 35-2621507

1203 Walnut Cincinnati, OH 45202 27-1251881



Same as 3CDC

Same as 3CDC

SAME AS 3CDC

SAME AS 3CDC

Primary Activity

ОН

ОН

ОН

ОН

(c)

Legal Domicile

(State

(d)

Total income

-5,637

-166,744

2,580,242

-1,503,281

0

(e)

End-of-year assets

497,754 NA

30,918 NA

6,481,390 NA

3,879,708 NA

2,705,302 NA

O NA

(f)

Direct Controlling

Entity

Same as 3CDC

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a)  Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	<b>(f)</b> Share of total Income	(g) Share of end-of- year assets	(h) Disproprtionat allocations?  Yes No	e (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Partr	eral r ging ner?	(k) Percentage ownership
Memorial Hall Development LLC	Same as 3CDC	ОН	NA	EXCLUDED	-35,750	4,329,542	No		Yes		80 000 %
1203 Walnut Cincin, OH 45202											
Memorial Hall Mstr Tenant LLC	Same as 3CDC	ОН	NA	EXCLUDED	-308	26,430	No		Yes		1 000 %
1203 Walnut Cincin, OH 45202											
Ziegler Park Lev Lender LLC	Same as 3CDC	ОН	NA	EXCLUDED	24,606	871,426	No		Yes		95 000 %
1203 Walnut Cıncın, OH 45202											
1400 RACE Mstr SUB-TENANT LLC	Same as 3CDC	ОН	NA	EXCLUDED	-140,581	-4	No		Yes		99 000 %
1203 Walnut Cincin, OH 45202											
	Same as 3CDC	ОН	NA	EXCLUDED	186,374	-3	No		Yes		99 000 %
1203 Walnut Cincin, OH 45202											
120 EAST SIXTH LEVERAGE LENDER	Same as 3CDC	ОН	NA	EXCLUDED	-183,834	3,634,088	No		Yes		99 000 %
1203 Walnut Cincin, OH 45202											
MERCER COMMONS LEVERAGE LENDER	Same as 3CDC	ОН	NA	EXCLUDED	-176,845	7,100,559	No		Yes		99 000 %
1203 Walnut Cincin, OH 45202											
FIFTH AND RACE LEVERAGE LENDER	Same as 3CDC	ОН	NA	EXCLUDED	632	237,569	No		Yes		97 000 %
1203 Walnut Cincin, OH 45202											
ALE HOUSE MASTER TENANT	Same as 3CDC	ОН	NA	EXCLUDED	-492	25,881	No		Yes		1 000 %
1203 Walnut Cincin, OH 45202											
1201 WALNUT MASTER TENANT	Same as 3CDC	ОН	NA	EXCLUDED	-233,051	624,741	No		Yes		1 000 %
1203 Walnut Cincin, OH 45202											
GLOBE BUILDING MASTER TENANT	Same as 3CDC	ОН	NA	EXCLUDED	2,700	338,219	No		Yes		1 000 %
1203 Walnut Cincin, OH 45202											
1201 WALNUT LLC	Same as 3CDC	ОН	NA	EXCLUDED	-233,051	1,959,125	No		Yes		60 000 %
1203 Walnut Cincin, OH 45202											
ALE HOUSE LANDLORD LLC	Same as 3CDC	ОН	NA	EXCLUDED	-69,568	2,589,962	No		Yes		60 000 %
1203 Walnut Cıncın, OH 45202											
GLOBE BUILDING LLC	Same as 3CDC	ОН	NA	EXCLUDED	-20,107	1,961,237	No		Yes		60 000 %
1203 Walnut Cincin, OH 45202											
ARP Master Tenant LLC	Same as 3CDC	ОН	NA	EXCLUDED	8	2,116	No		Yes		1 000 %
1203 Walnut Cıncın, OH 45202											

(c) (e) Legal (d) (f) (a) (b) Predominant Share of end-of-Domicile Share of total Direct Name, address, and EIN of Primary activity income(related, (State Controlling income related organization

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

Entity

Same as 3CDC

Same as 3CDC

Same as 3CDC

Same as 3CDC

ARP Commercial LLC

15th & Vine Leverage Lender

Findlay Kitchen Leverage Lend

C&E Leverage Lender LLC

1203 Walnut Cincin, OH 45202

or Foreign ! [Country) OH

ОН

OH

OH

NΑ

INA

lna

INA

unrelated. excluded from tax under sections 512-514) EXCLUDED

EXCLUDED

EXCLUDED

EXCLUDED

(j)

General

or

Managing

Partner?

Yes No

Yes

Yes

Yes

Yes

Code V-UBI amount in

Box 20 of Schedule K-1

(Form 1065)

(k)

Percentage

ownership

90 000 %

95 000 %

5 000 %

1 000 %

(h)

Disproprtionate

allocations?

No

Nο

Nο

Nο

No

Yes

(g)

vear assets

727.791

-3,691

-4.231

-4,640

0

(c) Amount Involved (a) Name of related organization (b) Transaction (d) Method of determining amount involved type(a-s) Memorial Hall Development 2,083,019 FMV Court & Walnut LLC 1,500,000 FMV b

Form 990, Schedule R, Part V - Transactions With Related Organizations

1201 Walnut MT

15th & Vine LLC	b	962,850	FMV
2331 3. 1.110 223	_	552,555	
Mercer Commons Leverage Lender LLC	h	467,000	FMV
Hereel Commons Edverage Echael EEC		107,000	1111
120 E Sixth Leverage Lender	b	450,000	FMV
120 L Sixtii Level age Lendel	,	430,000	' '''

Mercer Commons Leverage Lender LLC	b	467,000	FMV
120 E Sıxth Leverage Lender	b	450,000	FMV
Fifth & Race Leverage Lender	р	423,789	FMV
Ale Heure Menney	<b>L</b>	207.650	EMV

Fifth & Race Leverage Lender	b	423,789	FMV
-		,	
Ale House Manager	b	207,650	FMV
-		·	
OTR District Management	b	148,000	FMV

Κ

240,689

FMV

Ale House Manager	b	207,650	FMV
OTR District Management	b	148,000	FMV
OTR Holdings Inc	Н	253,758	FMV