Form. 990-T	E	xempt Organi			siness Inco der section 6			rn	OMB No	1545-0687
TOTAL STATE OF THE		• •	-					<u>,</u>	<b>9</b> (	<b>∂</b> 40
		endar year 2018 or other ta	_					<sup>20</sup> —-·	. <u>Z</u> (	J 10
Department of the Treasury Internal Revenue Service		o not enter SSN numbers o			nstructions and the			(c)(3)	Open to Pu	blic inspection for ser
A Check box if		Name of organization (	_		me changed and see in			D Emplo	yer identific:	ation number
address chang	ed	CINCINNATI C	ENTER		Ť			(Emplo	yees' trust, see	instructions )
B Exempt under section		CITY DEVELOP	MENT CO	RP						
X 501( C ( 3)	Print	Print Number, street, and room or suite no. If a P.O. box, see instructions								
408(e) 220	1/61	or Type								s activity code
408A 530		1203 WALNUT	STREET,	4TH	FLOOR			(See in:	structions )	
529(a)		City or town, state or pro	ovince, countr	y, and 2	ZIP or foreign postal cod	е		]		
C Book value of all asse	ts	CINCINNATI,	OH 4520:	2				54185	50	
at end of year	<b>F</b> Gro	oup exemption number (	See instruct	ions )	<b>&gt;</b>					
413,225,233	· G Ch	eck organization type	X 501	(c) co	rporation	501(c) tru	ıst	401(a)	trust	Other trust
	_	anization's unrelated trad	es or busine	sses	<b>→</b> 1		Describ	e the only	(or first) un	related
trade or business	here ▶LEI	D ADVERTISING			If onl	ly one, con	nplete Parts	I-V If more	e than one, o	describe the
	•	e end of the previous se	entence, cor	nplete	Parts I and II, compl	ete a Sche	dule M for ea	ich additior	nal	
trade or business		<del></del>								
		corporation a subsidiar	•	_		sidiary conti	rolled group?	·	▶ ∟	Yes X No
		identifying number of the IMOTHY SZILASI	ne parent co	rporation	on ▶		umber ▶ 51	12-621-	- 4 4 0 0	<del></del>
		or Business Incom			(A) Income	elephone no			T	C) Net
1a Gross receipts		or Business incom	<u> </u>	<del> </del>	(A) Income	86.52 2.338	(B) Expe	TENNEY.	1 380 7 388	Cinet Carana
b Less returns and al			c Balance ▶	1c						
		dule A, line 7)		2						
	•	2 from line 1c		3			3.00			St. Control by Talestengeral
		attach Schedule D)		4a						
		Part II, line 17) (attach For		4ь						
		trusts		4c				X 200 (0) 12		
		or an S corporation (attach states		5		351				
6 Rent income (S	Schedule C)			6						
7 Unrelated deb	-financed ir	ncome (Schedule E)		7						
8 Interest, annuities,	royalties, and re	ents from a controlled organization	on (Schedule F)	8_						
9 Investment income	of a section 50	01(c)(7), (9) or (17) organization	n (Schedule G)	9			<del></del>		ļ <u></u>	
10 Exploited exert	pt activity i	income (Schedule I)		10					<u> </u>	
_		dule J)		11		100 86852		97874.44780.054.N	1	
	•	ctions, attach schedule) .		12			ATCH: 1		1	24,400.
		rough 12		13	24,4			Fyeres &		24,400.
		Taken Elsewhere ( t be directly connect						Exception	or contrib	utions,
		directors, and trustees (						14	· · ·	
15 Salaries and w		directors, and trustees (	•							
16 Repairs and m	aintenance	RECEIV	ĘD.	ገ :				. 16		
				• 1				17		
18 Interest (attacl	schedule)	See instructions 1.2	040					. 18		
19 Taxes and licer	ses		Ola LO	1						
20 Charitable con	tributions (	See instructions for limit	ation rules))	1	A	TCH.2		20		742
21 Depreciation (	ttach Form	, <sub>4562)</sub> OGDEN,	UT	Į	21					
		on Schedule A and else						22b		
		<del></del>								<del> </del>
		compensation plans								
		s								
		Schedule I)								
		Schedule J)							<u> </u>	16 003
		schedule)							<del> </del>	16,983. 17,725.
		es 14 through 28						29		6,675
		ole income before net ng loss arising in tax yea								0,0/3
		e income Subtract line							538000000000000000000000000000000000000	6,675
For Paperwork Redu	iction Act I	Notice, see instructions.	or nom line	JŲ .	· · · · · · · · · · · · · · ·		<u></u>	32	Form	990-T (2018)
8×2740 1,000 2239HC 6	48W	· ·				017	9672	r	1	PAGE

حصون	990-T (2019)			Page 2
Par				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see			
	Instructions)	33	6,	,675.
34	Amounts paid for disallowed fringes	34	106,	, 563.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		-	
	instructions),	35	1113,	, 238.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum			
	of lines 33 and 34	36		
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,	,000.
38	Unrelated business taxable income. Subtract line 37 from line 36 if line 37 is greater than line 36,			
	enter the smaller of zero or line 36	38		0.
Par	Tax Computation	1 2 1		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39		
40	Trusts Taxable at Trust Rates. See instructions for tax computation, income tax on	<del>  "                                   </del>		
	the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041)	40		
41	Proxy tax. See instructions	41		
42	Alternative minimum tax (trusts only).	<del></del>		
42	Tax on Noncompilant Facility Income. See instructions	42		***************************************
44				
Par	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44		
		<del></del>		<del></del>
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a	{		
	Other credits (see instructions)			
	General business credit. Attach Form 3800 (see instructions)	1 1		
	Credit for prior year minimum tax (attach Form 8801 or 8827)	!		
	Total credits. Add lines 45a through 45d	45e		
46	Subtract line 45e from line 44	46		
47	Other taxes Check if from: Form 4255 Form 8611 Form 8697 Other (attach schedule).	47		
48	Total tax. Add lines 46 and 47 (see instructions)	48		0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49		
50 a	Payments: A 2017 overpayment credited to 2018			
ь	2018 estimated tax payments	1		
c	Tax deposited with Form 8868			
d	Foreign organizations? Tax paid or withheld at source (see instructions) 50d	1		
8	Backup withholding (see instructions)	1		
f	Credit for small employer health insurance premiums (attach Form 8941) 50f	1		
9	Other credits, adjustments, and payments Form 2439	1 1		
	Form 4136 Other Total ▶ 50g			_
51	Total payments. Add lines 50a through 50g	51	14,	354.
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached.	52		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53		
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	14,	354.
55	Enter the amount of line 54 you want   Credited to 2019 estimated tax ▶14, 354.   Refunded ▶	55		<del></del>
Par				
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or	<del></del>	thority Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma			1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the			
	here >		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	x
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a forei		— <del> </del>	$\frac{1}{x}$
٠,		gn trust?.		<del>                                     </del>
58	If "Yes," see instructions for other forms the organization may have to file.  Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		1	
	Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the b	est of my k	spyledge and b	elei it s
Sigr	True correct and complete. Declaration of preparer (other than taypover) is based on all information of which preparer has now knowledge.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Here	holustanta Den un cero		discuss this	
11616			eparer shown	_
		2 H1811UCUCHS)	Yes.	No
Paid	Check		PTIN	a <b>a</b>
Prep	arer Charles Outsit (Selle 10/10/17 sell-e	mployed	P006668	
	Only Firm's name GRANT THORNTON LLP / Firm's		6-605555	
	Firm's address ► 171 N. CLARK ST., SUITE 200, CHICAGO, IL 60601 Phone	no 312	-856-0200	
JSA			Form 990-T	[(2018)

Form 990-T (2018)							Page <b>3</b>		
Schedule A - Cost of Go	<b>oods Sold.</b> Er	ter metho	d of invento	ry valuation	<u> </u>				
1 Inventory at beginning of y	/ear . 1			6 Inventory	at end of ye	ar	6		
2 Purchases	2			7 Cost of goods sold. Subtract line					
3 Cost of labor	3			6 from line 5 Enter here and in					
4a Additional section 263A co	osts			Part I, line 2					
(attach schedule)	4a	4a			8 Do the rules of section 263A (with respect to Yes No				
<b>b</b> Other costs (attach schedu	b Other costs (attach schedule) . 4b			property	produced	or acquired fo	or resale) apply		
5 Total. Add lines 1 through				to the org	anızatıon? .	<u></u>	X		
Schedule C - Rent Income	(From Real P	roperty a	nd Persor	nal Property	Leased V	With Real Prope	erty)		
(see instructions)									
1. Description of property									
(1)				_					
(2)				S4.					
(3)			•	-					
(4)									
	2. Rent recei	ved or accru	ed						
(a) From personal property (if the for personal property is more the more than 50%)	an 10% but not	percent	age of rent for	personal property personal property based on profit or	y exceeds		directly connected with the income 2(a) and 2(b) (attach schedule)		
(1)									
(2)									
(3)				-					
(4)									
Total		Total							
(c) Total income. Add totals of cohere and on page 1, Part I, line 6		•				(b) Total deducti Enter here and o Part I, line 6, colu	n page 1,		
Schedule E - Unrelated De	ebt-Financed I	ncome (se	ee instruction	ons)					
1. Description of deb	ot-financed property			ncome from or o debt-financed		debt-finan	onnected with or allocable to ced property		
			pr	operty	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		
(1)			<del></del>			· · · · · · · · · · · · · · · · · · ·			
(2)									
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adju of or alloca debt-financed (attach sche	ble to property	4 0	Column Iivided olumn 5		income reportable n 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)				%					
(2)				%					
(3)				%					
(4)				%					
Totals				_		re and on page 1, ne 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)		
Total dividends-received deducti	i <b>ons</b> included in co	olumn 8	<u></u> .						

Schedule F-Interest, Ann				ntrolled Or			UII3 (500	, matructic	) ( GI I	
1. Name of controlled organization "	2. Employer identification numb	per ,	3. Net unrela		1	of specified ents made	' included	f column 4 th in the contri ion's gross in	olling	<b>~6.</b> Deductions directly connected with income in column 5
(1) , -	<u>, , , , , , , , , , , , , , , , , ,</u>			<u> </u>			• .		_•	
(2)				·	·,	. •				·
(3)	<u> </u>	-		, .	<u> </u>		4 -		•	· · · · · · · · · · · · · · · · · · ·
(4)	<del></del>	<u> </u>	<u>-                                      </u>		<u>.</u>		<u> </u>			<del>-</del>
Nonexempt Controlled Organ	ızatıons							<u> </u>		<u> </u>
7. Taxable Income	8. Net unrelated in (loss) (see instruc			Total of specific ayments made		includ	t of column ed in the co ation's gros	ntrolling		Deductions directly nected with income in column 10
(1) ,	<u> </u>			<u> </u>					<u>L</u>	*
(2)			1 1	<u>.                                    </u>						
(3)							<u> </u>	•	<u></u>	
(4)		·		18						
t Totals		,			ι,	Enter	columns 5 a nere and on , line 8, colu	page 1,	Ent	Id columns 6 and 11 er here and on page 1, rt I, line 8, column (B)
Schedule G-Investment I	ncome of a Soc	tion 5	01(c)/7)	(9), or (17	) Orac	nization	(see incl	tructione	L	<del></del>
1. Description of income	2. Amount of		101(0)(7),	3. Deduction of the directly corting of the directly c	tions nected	mzation	4. Se	t-asides schedule)		5. Total deductions and set-asides (col 3 plus col 4)
(1)	<del></del>	<del>-</del>	<del></del>	(0001.301		-+		<u> </u>	<del>-  </del> -	F 2*
(2).	<del> </del>		7		· ·		-	<u> </u>	-	
(3)	<del>                                     </del>			<del></del>					•	
(4)	<del> </del>		<del></del>	<u>•</u>					$\dashv$	<del> </del>
Totals	Enter here and Part I, line 9, c									Enter here and on page Part I, line 9, column (B)
Schedule I – Exploited Ex	empt Activity In	come.	Other Th	an Advert	sina Ir	icome (s	ee instru	ctions)	COLUMN TO SERVICE SERV	•
1. Description of exploited activity	. 2. Gross unrelated business income from trade or business	3. E conn proc	Expenses Irrectly ected with duction of orelated ess income	4. Net inconfrom unrelated or business 2 minus collections of the coll	ne (loss) ed trade (column umn 3) ompute	5. Gros from ac	s income livity that nrelated s income	6. Expe		
· · · · · · · · · · · · · · · · · · ·	<del> </del>		<del>.</del>	<del></del>		ļ		<del> </del>		<del> </del>
(1)	<del>                                     </del>	*		<del></del>			<u> </u>	<del> </del>		<del></del>
<del></del>	<del> </del>				<del></del>					<del> </del>
(3)			4	· ·			• •	<del>-</del>	_	<del>                                     </del>
Totals	*Enter here and on page 1, Part I, line 10, col (A)	page	here and on e 1, Part I, I0, col (B)						69	Enter here and on page 1, Part II, line 26
Schedule J- Advertising l										
Part I Income From Per	riodicals Report	ed on	a Consoli	idated Bas	is ı					
1. Name of periodical	2. Gross advertising income	3.	. Direct tising costs	4. Advert gain or (los 2 minus co a gain, coi cols 5 thro	ising s) (col r ol 3) If		ulation	6. Reado	-	7. Excess readership costs (column 6 minus column 5, but not more thancolumn 4)
(1) (2) (3): (4)										
Totals (carry to Part II, line (5))			·····			:	. '			Form <b>990-T</b> (2018

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

	· ·	<u> </u>	4 8 4	T		7. Excess readership
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	costs (column 6 minus column 5, but not more than column 4)
(1)		-				
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)						

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)	<del></del>	%	
2)	·	%	
(3)		%	
(4)		%	
Total, Enter here and on page 1. Part II. line 14			

Form **990-T** (2018)

## PART I - LINE 12 - OTHER INCOME 3CDC LED ADVERTISING PART I - LINE 12 - OTHER INCOME 24,400.

## ATTACHMENT 2

## FORM 990T - PART II - LINE 20 - CHARITABLE CONTRIBUTIONS

UNRELATED TRADE OR BUSINESS INCOME  ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)  LESS: DEDUCTIONS W/O CHARITABLE CONTRIBUTIONS & DPAD & NOL CARRYOVER  NOL CARRYOVER	24,400. 0. 16,983. 113,238.
CHARITABLE CONTRIBUTION LIMITATION (10%)	* 10% 742.
CHARITABLE CONTRIBUTION	742.
CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)	742.

2239HC 648W 0179672 PAGE 7

## ATTACHMENT 3 ONS 7,199. 3,696. 3,500. 1,454. 1,134.

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

TAX PREPARATION EXPENSE

ADVERTISING, MARKETING & COMMUNICATION

TRAINING AND EDUCATION EXPENSES

PART II - LINE 28 - OTHER DEDUCTIONS

1,199.

3,696.

3,500.

1,454.

1,134.

ATTACHMENT 3 0179672 PAGE 8

Cincinnati Center City Development Corp EIN 20-0446324 Form 990-T Net Operating Loss December 31, 2018

	Unrelated	Unrelated		
Tax Year	Business Income	<b>Business Loss</b>	Net Operating Loss Utilized	Net Operating Loss Available
December 31, 2014	•	47,953	(47,953)	
December 31, 2015	-	76,398	(65,285)	11,113
December 31, 2016	-	4,314	-	4,314
December 31, 2017	•	1,784	-	1,784
Total		130,449	(113,238)	17,211

Net operating loss carryforward to 2019

17,211

Cincinnati Center City Development Corp EIN 20-0446324 Form 990-T Charitable Contributions December 31, 2018

Tax Year	Amount Generated	Amount Utilized	Converted to NOL Carryover	Remaining Carryover
December 31, 2015	1,000,000	(742)	•	999,258
December 31, 2016	2,203,744	-	-	2,203,744
December 31, 2017	9,531,457	-		9,531,457
December 31, 2018	20,750	-	•	20,750
Total	12,755,951	(742)		12,755,209

Charitable contribution carryforward to 2019

12,755,209