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 foundations)

OMB No 1545-0047 2018

Department of the Treasury			▶ Do not enter social security numbers on this form as it may be n	•	c.	_Open to Public_			
Inter	nal Revenu		► Go to www.irs.gov/Form990 for instructions and the latest inf	ormation.					
<u>A</u>	For the	2018 cale	ndar year, or tax year beginning , 2018, and ending		, 20				
В	Check if a	applicable	C Name of organization Mount Pleasant Now Development Corporation		er identification number				
\sqcup	Address	change	Doing business as Mount Pleasant Now Development Corporation			34-1599720			
\sqcup	Name cha	ange	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telepho	ne number			
	Initial retu	irn	13815 Kinsman Road			216-346-9251			
\Box	Final return	n/terminated	City or town, state or province, country, and ZIP or foreign postal code			•			
	Amended	l return	Cleveland, Ohio 44120		G Gross re				
	Application	on pending	F Name and address of principal officer Mr. Nicholas E. Perry	H(a) Is this a gr	oup return for	subordinates? Yes Vo			
			Same as C Above	4 ''		s included? Tes Ko			
<u>L</u> _	Tax-exem	npt status	√ 501(c)(3)	If "N	o," attach a	a list (see instructions)			
<u>J</u>	Website:		VW.MTPLEASANTNOW.ORG	H(c) Group	exemption number >				
		rganization [✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation	1988	M State	of legal domicile OH			
P	art [Summ	ary			<u> </u>			
	1	Briefly de	scribe the organization's mission or most significant activities TO PRO	VIDE COM	MUNITY	& ECONOMIC			
Çe	l .	DEVELOP	MENT TO RESIDENTS & BUSINESSES IN THE MT. PLEASANT AREA.						
Activities & Governance									
Ver	2	Check thi	s box ▶☐ if the organization discontinued its operations or disposed of i	more than	25% of	its net assets.			
ĝ	3	Number o	of voting members of the governing body (Part VI, line 1a)		3	8			
අර්	4	Number o	of independent voting members of the governing body (Part VI, line 1b)		4	8			
ties	5	Total num	nber of individuals employed in calendar year 2018 (Part V, line 2a)		5	5			
ξį	6	Total num	nber of volunteers (estimate if necessary)		6	5			
Ac	7a	Total unre	elated business revenue from Part VIII, column (C), line 12		7a	0.00			
	b	Net unrela	ated business taxable income from Form 990-T, line 38		7b	0.00			
				Prior Ye	ar	Current Year			
e	8 (Contribut	ions and grants (Part VIII, line 1h)		150,250	166,989			
Revenue	9 1	Program :	service revenue (Part VIII, line 2g)		145,850	170,000			
ě	10 1	Investmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)		15,525	15,000			
Œ	11 (Other rev	enue (Part VIII, column (A), lines 5,-6d-8c,-9c, 10c, and 11e)		325,000	488,724			
	12	Total reve	nue – add lines 8 through 11 (must equal Rant VIII column (A), line 12)		636,625	840,713			
	13 (Grants an	d similar amounts paid (Part IX, column (A), lines 1-3)		0	0			
	14 E	Benefits p	paid to or for members (Part-IX) column (A), line 4)19	0	0				
g					418,993	368,993			
Expenses	16a F	Professio	nther compensation, employée benefits (Part IX, column (A) lines 5–10) nal fundraising fees (Part IX, column (A), line 11e) iraising expenses (Part IX, column (D)) line 25)		0	0			
pe	b 1	Total fund	Iraising expenses (Part IX, column (D), line 25)						
ш	17 (Other exp	enses (Part IX, column (A), lines 14a=1-rd, 111-24e)		535,725	560,800			
	18	Total expe	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		785,737	832,487			
	19 F	Revenue I	ess expenses. Subtract line 18 from line 12		-149,112	8,226			
or Ses				inning of Cui	rent Year	End of Year			
Net Assets o Fund Balance		Total asse	ets (Part X, line 16)	11	,725,050	12,500,000			
t As	21	Total habi	lities (Part X, line 26)	2	,525,000	2,525,000			
影	22 1	Net assets	s or fund balances. Subtract line 21 from line 20	9	,200,050	9,975,000			
Pa	rt II	Signati	ure Block						
Und	der penalti	ies of perjun	y, I declare that I have examined this return, including accompanying schedules and statemer	nts, and to th	e best of n	ny knowledge and belief, it is			
			te Declaration of preparer (other than office) is based on all information of which preparer ha						
		1	Licholo S. Wy	4	1/12	119			
Sig	n	Signa	ture of officer	Dat	e	/ 			
He	re	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	cholas E. temy Executive Di	rcein	\boldsymbol{c}				
Type or print name and title									
Pai		Print/Typ	e preparer's name Preparer's signature Date		Chart F	PTIN			
		R. Black	well Kon Hall 4.	12.19	Check L	if PO2039268			
	eparer			 -	's EIN ▶	47-5254405			
<u></u>	e Only	Firm's ad		Phor		216.491.1778			

For Paperwork Reduction Act Notice, see the separate instructions.

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

Cat No 11282Y

☐ Yes ☑ No Form 990 (2018)



1	
Form, 990 (2018)	

Page 2

Part			- · ·	
	Check if Schedule O contain	ns a response or note to any line i	n this Part III	<u> </u>
1	Briefly describe the organization's			
		OMIC DEVELOPMENT TO RESIDENTS		
	IN WHICH TO LIVE, WORK, SHOP &	E THE COMMUNITY & MAKE MT. PLE.	ASANT A DESIRABLE, SAFE NEI	SUBORIOOD
	iii wiiioii 10 Live, work, 310F &	RAISE AT AWILT.		
2	Did the organization undertake any	significant program services durin	g the year which were not lister	d on the
	If "Yes," describe these new service	es on Schedule O.		
3		ucting, or make significant chang	es in how it conducts, any	program
	services?		•	· · PYes No
	If "Yes," describe these changes o	n Schedule O.		
4		im service accomplishments for eac	ch of its three largest program	services, as measured by
		01(c)(4) organizations are required t		and allocations to others
	the total expenses, and revenue, if	any, for each program service report	rted.	
4a	(Code) (Expenses \$	125,250 including grants of \$) (Revenue \$	84,000)
		ED BY ASSIGNED STAFF AND FOCU		
		LATIONS, SOUND MAINTENANCE PR	OGRAMS, AND ONGOING SEMIN	ARS TO PROMOTE
	TENANT GROWTH.			

4h	/Codo \/Evpopoo \$	02 125 molydyna avanta of C	\/D==	75.050 \
4b	(Code) (Expenses \$	53,125 including grants of \$) (Revenue \$	75,250)
	NEIGHROPHOOD PROGRAMS - NEIG	GHBORHOOD ORGANIZING AND ENG	ACEMENT OF BLOCK CLUBS /	TREET CLUBS AND
		DRESS AND RESOLVE COMMUNITY		
		ADJACENT HOMEOWNERS OR CREA		
		WITH RESIDENTS ON POLICY AND AL		
	***************************************	***************************************		
		·		

4c	(Code:) (Expenses \$	225,725 including grants of \$) (Revenue \$	25,500)
	PROJECT DEVELOPMENT - ATTEMP	TS TO RESTORE VITALITY TO KINSM	AN ROAD. DEVELOPMENT OF C	OMMERCIAL
	BUILDINGS TO ATTRACT NEW SERV	ICES AND BUSINESSES TO THE COM	MUNITY, MANAGEMENT OF A 5	7,000 SQ. FT.
	BUILDING WHICH HOUSES CUYAHO	GA COUNTY PROGRAMS AND SERV	ICES, AS WELL AS THE MT. PLEA	ASANT NOW OFFICES.
	ALSO FOCUSES ON RESIDENTIAL D	EVELOPMENT, CONSISITING OF NEW	VLY CONSTRUCTED AND REHAE	ILITATED SINGLE
	AND MULTI-FAMILY HOUSING. IN AD	DITION, OVERSEES A PROPERTY CO	DE ENFORCEMENT PROGRAM	TO IDENTIFY
	PROPERTIES WITH CODE VIOLATIO	NS AND TO ASSIST OWNERS WITH R	EMEDIATION OPTIONS. OPERAT	ES A
	MICRO-ENTERPRISE CENTER FOCU	SED ON JOB CREATION AND DEVEL	OPMENT, ENTREPRENEURISM A	ND BUSINESS
	DEVELOPMENT AND ENHANCEMEN	Т.		
		·		
4d	Other program services (Describe in	•		
	(Expenses \$ 0 includ	ing grants of \$ 0) (Re	evenue \$ 0)	
4e	Total program service expenses ▶	444,100		

Form 99	1) \	V	F	Page \$
Part	Ch -cklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		√
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II .	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, $I\vec{k}$, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	√	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16 ? If "Yes," complete Schedule D, Part IX .	11d		✓
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII .	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓_
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	-	✓
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		√
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		✓
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	eg.	,	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Sched' Je L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		٧.
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19° Note. All Form 990 filers are required to complete Schedule O.	38	✓	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	-	.03	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
		Forn	990	(2018)

arı	Statements Regarding Other INS Fillings and Tax Compliance (Continued)			
_	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	SMF -	Yes	No (ﷺ)⊀.
2a		5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	北京 教	1.4.5	in the
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	-	1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			Ė
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶		The state of	121 131 1 Com 70
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			验验
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	ļ	✓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or qifts were not tax deductible?	6.		
7	gifts were not tax deductible?	6b	Si da	v doctic
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a	- 225 CM	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			Ť
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		✓_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Ya RESCUERS	SOCREGATION.
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		31112	2000
9	sponsoring organization have excess business holdings at any time during the year?	8	1200 ° 1	√
э a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:	学教	\$ 1,000 c	72 T. M. S.
а	Initiation fees and capital contributions included on Part VIII, line 12	SEPON Links	September 1	3.4°M
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		XX.	第 公
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)		歌光	
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	. ,	✓
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.		2.6	1 (12 d) 1 (12 d)
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	> 2m2 241	1
_	Note. See the instructions for additional information the organization must report on Schedule O.	iso, i	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	7.7H
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			
С	Enter the amount of reserves on hand			
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		✓
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	E, 1 1	V
	If "Yes," see instructions and file Form 4720, Schedule N.	السشفندند	<u> ئارەر ئۇ</u>	1-6-31-1
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	.# ,	23/2 4
	If "Yes." complete Form 4720. Schedule Q.	2000 2000	1881 15	U 18 18 4

-	90 (2016)			Page t
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O		struci	tion:
	Check if Schedule O contains a response or note to any line in this Part VI	. <u></u>		<u>. </u>
Secti	ion 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	_		
	If there are material differences in voting rights among members of the governing body, or	٠,	1	
	if the governing body delegated broad authority to an executive committee or similar		٠, ,	受,
_	committee, explain in Schedule O.	1, ,	31.8	
b	Enter the number of voting members included in line 1a, above, who are independent . 1b		5	
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	1.0	√
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?	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	 -	1/
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	1
6	Did the organization have members or stockholders?	6		\ <u>\</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	one or more members of the governing body?	7a_		 ^
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	POUR GARAN	1,5	
	the year by the following	10 to	II	
a	The governing body?	8a	✓	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C	ode.))
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	過貨		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	√	
13	Did the organization have a written whistleblower policy?	13	√	
14	Did the organization have a written document retention and destruction policy?	14		1
,15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	7 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	71.5% 5 dfg	
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	
b	Other officers or key employees of the organization	15b	-	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	姚字	NPRE	8883P
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		+93	
	with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		7 - 192 7 - 193 1 - 254	
	organization's exempt status with respect to such arrangements?	16b	*************	COMPETATION.
Section	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	T (Sec	tion 5	501(c)
	(3)s only) available for public inspection. Indicate how you made these available Check all that apply Own website Another's website Upon request Other (explain in Schedule O)	,		- (-)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	terest p	oolicy	, and
20	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re Mr. NICHOLAS E. PERRY, 13815 KINSMAN ROAD, CLEVELAND, OH 44120 (216-346-9251)	cords	~	

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-om	990	(2018)	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

☐ Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.	
(A) Name and Title	(B) Average hours per week (list any hours for related	box,	unles er and	Pos ieck is pe	rson	e than o	n an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	other compensation from the	
	organizations below dotted line)		Institutional trustee		пріоуее	Highest compensated employee		(W-2/1099-MISC)		organization and related organizations	
(1) NICHOLAS E. PERRY EXECUTIVE DIRECTOR	40.0		✓				i	100,297	0		0
(2) LESLIE CROMWELL TRUSTEE	5.0	√						0	0	(0
(3) MICHELLE BROWN TRUSTEE	5.0	✓						0	0		0
(4) CHRYSTAL JONES TRUSTEE	5.0	1						0	0		0
(5) PAMELA MCKINNEY TRUSTEE	5.0	✓						0	0		0
(6)											
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Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Description of services Total number of independent contractors (including but not limited to those listed above) who	5											/idual		
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Pari	t VIII	Statement of Reve	enue						
		Check if Schedule C	contains a	a respo	onse or note to	o any line in this	s Part VIII		🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s, Grants Amounts	1a b	Federated campaigns Membership dues	3	1a 1b				The state of the s	
	С	Fundraising events .		1c					常是我的意思的意
	d	Related organizations		1d				Tracella de la companie de la compan	turmya ya gili umawa hara a a a a a a a a a a a a a a a a a
	e	e Government grants (contributions) 1e			166,989				
Ö	f								
but		and similar amounts not inc		1f					
<u> </u>	g	Noncash contributions include	led in lines 1a–1					なる 時からまれる をある事でも日本書	A TO A STATE OF THE STATE OF TH
Contributions, and Other Sim	h	Total. Add lines 1a-1	Í		•	166,989			
					Business Code	100 BESS 100 200 20	Tille (Manka)	MAR ACTOR	Z 2.53 & AFTON
Program Service Revenue	2a	PROGRAM SERVICE F	EES	<u> </u>	900099	170,000		instruction control +	TELECON FIREST STREETS
æ	b					110,000	,		
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	3	Investment income aric other similar amount income from investment	(includińg d ounts)	dıvıder	nds, interest,	15,000	\$ TO SECURE STATE OF THE SECURE STATE STAT	2 x set 4.5 mbs.) 1 May 1 x 3 x x x x x x x x x x x x x x x x x	The state of the s
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	6a	Gross rents		3,724	(4)			227-7819-944	
		Less rental expenses		5,000			u		
	b	Rental income or (loss)		3,724					
	C d	Net rental income or (5,724		488,724	488,724	18-18-18-18-18-18-18-18-18-18-18-18-18-1	\$25,000 page 50,000 page 50,00
		· ·	(i) Securitie	es T	(II) Other	400,724	400,724 Kanasturan	M. CONTROLLER CO.	What is contact as a second second
	7a	Gross amount from sales of assets offer than inventory		+	(7)		Paratira.		and the same of th
	_	-			•				
	b	Less cost or other basis and sales expenses .							
	С	Gain or (loss)		_					
	ď	Net gain or (loss)				Little Chit Stanfast nasterneten.	pakala and the pakalang	I fas hiddelijadskistaa fijis	
enne	8a	Gross income from fu	 indraising						
		events (not including \$						THE STATE OF THE S	
æ		of contributions reporte	ed on line 1c)	j.				Killing	
ē		See Part IV, line 18		а					
Other Rev	b	Less direct expenses		ь					
	С	Net income or (loss) f	rom fundrais	sıng ev	vents . ►				
	9a	Gross income from ga	ımıng actıvıtı	ies.			PROBLEM .		
		See Part IV, line 19		a					
	b	Less direct expenses		h					a Mandalan da managa kan ang managa
	С	Net .ncome or (loss) fi	rom gaming	acti <u>vi</u>	ties ►				
	10a	Gross sales of in returns and allowance							
	b	Less cost of goods s		b			STEEL STEEL S		
	С	Net income or (loss) for				Section OPT Report - methods to section at	40000 H 1002 - 1 4 - 1 7 - 1 - 1	SULEM, ASSOCIATION	S COUNTY BY SPENING A SECURIOR COMMENT
		Miscellaneous R	evenue		Business Code				
	11a	OTHER REVENUES		L	900099	. 0	0		
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	d	All other revenue .					Exploration to the re-	~ # \$ 4 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1 \$ 1	South Richards on the Supplier Martin of the
	е	Total. Add lines 11a-		· • •	▶	0	ATESTS SUPERIOR		
	12	Total revenue. See in	nstructions		🕨	840,713	· ·		

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must coi				
	Check if Schedule O contains a respor	nse or note to any I	ine in this Part IX	<u> </u>	🗆
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising . expenses
1	Grants and other assistance to domestic organizations			新江湖	
	and domestic governments. See Part IV, line 21			er line en e	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individual. See Part IV, lines 15 and 16			The same	
4	Benefits paid to or for members			できた。 では、 を表する。 を表する。 を表する。 できた。 を表する。 できた。 を表する。 できたた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できたた。 できたた。 できた。 できた。 できた。 できた。 できた。 できた。 できた。 できたた。 できたた。 できたた。 できた。 できたた。 できた。 できた。 できた。 は、 にを、 にを、 にを、 にを、 にを、 にを、 にを、	Christian Control of the Control of
5	Compensation of current officers, directors,			N DICKSER SOLVERS	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	trustees, and key employees	100,297			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	353,208			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)		•		
9	Other employee benefits	70,000			
10	Payroll taxes	25,750			
11	Fees for services (non-employees)				
a	Management	17.500			
b	Legal	17,500 15,250		,	1
d	Lobbying	13,230			
e	Professional fundraising services See Part IV, line 17		25 mari 17 mar		-
f	Investment management fees			274.5 DT # 570 to 1 444 day (2010)	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)			,	.,
12	Advertising and promotion	2,000			
13	Office expenses	15,875			
14	Information technology				
15	Royalties'				
16	Occupancy				•
17 18	Travel				
	for any federal, state, or local public officials	5,125			
19	Conferences, conventions, and meetings	7,850			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	<u> </u>			
23	Insurance	9,250	w cheeves a sealing of our refusion 1.75	BEET COMMON TROOPS TO THE	COMMENSATION OF A COMMENSATION
24	Other expenses. Itemize expenses not covered	White Co.			
	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)				
а	MORTGAGE COST	111,337		was with the transfer of the state of the st	the succession of the sections of the section of th
b	TELEPHONE	2,500			
С	PROGRAM EXPENSES	96,545			
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	832,487		_	
26	organization reported in column (B) joint costs				ı
	from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	art X		
		eness in Seriosais of Contains a response of note to any line in all of the	(A) Beginning of year	<u> </u>	(B) End of year
	1	Cash—non-interest-bearing	16,925	1	
	2	Savings and temporary cash investments	70,295	2	
	3	Pledgus and grants receivable, net		3	
	4	Accounts receivable, net	4,801,330	4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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		6	
Assets	7	Notes and loans receivable, net	 -	7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 8,605,012			
	Ь	Less: accumulated depreciation 10b 3,128,862	5,711,000	10c	5,711,000
	11	Investments—publicly traded securities	0,711,000	11	3,711,000
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	-
	15	Other assets. See Part IV, line 11	1,125,500		1,125,500
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,725,050		11,725,050
	17	Accounts payable and accrued expenses	210,200	-	295,750
	18	Grants payable		18	
	19	Deferred revenue		19	-
	20	Tax-exempt bond liabilities	,	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	2,314,800		3,525,00
	24	Unsecured notes and loans payable to unrelated third parties	2,014,000	24	3,323,00
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	2,525,000		3,820,750
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
JE	27	Unrestricted net assets	9,200,050	27	9,975,000
Net Assets or Fund Balances	28	Temporarily restricted net assets	3,233,333	28	3,0.0,000
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	(m.mar. 15 - 201-21) T. W. Mar. Land and A. M. W. W. Land and A. M. W.
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	-
۲	32	Retained earnings, endowment, accumulated income, or other funds.		32	
Š	33	Total net assets or fund balances	9,200,050	33	9,975,000
	34	Total liabilities and net assets/fund balances	11,725,050	34	13,020,800
					Form 990 (2018)

LOUII A	30 (2010)			Page 14
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	12.1	840,713
2	Total expenses (must equal Part IX, column (A), line 25)	2		832,487
3	Revenue less expenses. Subtract line 2 from line 1	3		8,226
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,200,050
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	9	9,975,000
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			. 🗆
			Y	es No
1	Accounting method used to prepare the Form 990. ☐ Cash ☐ Accrual ☐ Other			n n (26)
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	2- 922-	ريا" دي
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	√
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or		in in in its
	reviewed on a separate basis, consolidated basis, or both			7
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			0.00
h	Were the organization's financial statements audited by an independent accountant?		2h	1

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

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

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Separate basis Consolidated basis Both consolidated and separate basis

separate basis, consolidated basis, or both

Form **990** (2018)

За

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

20**18**

Open to Public Inspection

Name of the organization Employer identification number MT. PLEASANT NOW DEVELOPMENT CORPORATION 34-1599720 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. h Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. C its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (III) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1–10 support (see other support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D)

(E) Total

Part	II Support Schedule for Organiz	ations Descr	ibed in Secti	ons 170(ხ)(1)(A)(iv) and 1	70(b)(1)(A)(v	i)
	(Complete only if you checked t						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	ted below, p	lease comple	ete Part III <u>.)</u>	
	on A. Public Support	1		-			
	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")	203,936	303,995	181,003	150,250	166,989	1,006,173
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	203,936	303,995	181,003	150,250	166,989	1,006,173
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 the exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,006,173
Secti	on B. Total Support	,		113/11		toolee seem and a rabbe succession	· · · · · · · · · · · · · · · · · · ·
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	203,936	303,995	181,003	150,250	166,989	1,006,173
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	198,013	176,529	489,316	534,000	558,724	1,956,582
9	Net income from unrelated business activities, whether or not the business is regularly carried on	130,013	110,023	100,010	334,000	330,724	, 1,000,002
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10					學的主義	2,962,755
12	Gross receipts from related activities, etc	•	•			12	170,000
13	First five years. If the Form 990 is for the	-			•		
	organization, check this box and stop he			· · · · · · · · · · · · · · · · · · ·	<u> </u>		· · > []
	on C. Computation of Public Suppo			d I. (0)		44	
14	Public support percentage for 2018 (line		•			14	33 %
15 16a	Public support percentage from 2017 Schedule A, Part II, line 14						
IUa							-
b	box and stop here. The organization qualifies as a publicly supported organization						
17a							
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization is Explain in Part VI how the organization is supported organization.	ation meets the meets the "fact	e "facts-and-c	rcumstances' stances" test.	' test, check t	this box and s	top here.
18	Private foundation. If the organization d	id not check a	box on line 13,	16a, 16b, 17a	, or 17b, checl	k this box and	see

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number MT. PLEASANT NOW DEVELOPMENT CORPORATION 34-1599720 Crganizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds 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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) . Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X .

Sample Community Collections of Art, Historical Treasures, or Other Similar Assets (continued)									
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Pan XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	Par								
b Scholarly research e Other	3		accession, and of	ther reco	rds, chec	k any of th	ne follo	wing that are a	significant use of its
c	а	☐ Public exhibition		d	Loan	or exchang	ge prog	ırams	
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 Ouring the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No	b	_ ,		е	Other	r			
Sill. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? □ yes □ No	C								
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		tion's collections	and expl	ain how t	hey further	the or	ganızatıon's ex	empt purpose in Part
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5								
990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Beginning balance □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Part	IV Escrow and Custodial Arra	ingements.					_	
included on Form 990, Part X? Yes No War Yes Replain the arrangement in Part XIII and complete the following table Amount		990, Part X, line 21.						•	
c Beginning balance	1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	ner intern	nediary fo	or contribu	tions o	r other assets	
d Additions during the year	b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	ollowing to	able			
d Additions during the year e Distributions during the year f. Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?								_	Amount
bistributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	С	Beginning balance					10	:	
bistributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	d	Additions during the year					10	1	- · · · · · · · · · · · · · · · · · · ·
f Ending balance .	е						16	•	
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	f						11	F	
Part V	2a	Did the organization include an amour	nt on Form 990, P	art X, line	21, for e	scrow or c	ustodia	ıl account lıabılı	ty? 🗌 Yes 🗌 No
Complete if the organization answered "Yes" on Form 990, Part IV, Inne 10. a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four y	b	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	xplanatio	n has been	provid	ed on Part XIII	
(a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back	Par	t V Endowment Funds.				· ·		<u> </u>	
Beginning of year balance Contributions		Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, lin	e 10.		
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administ ative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Land (a) Cost or other basis (b) Cost or other basis (cother) (coth	-		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ck (e) Four years back
c Net investment earnings, gains, and losses	1a	Beginning of year balance							
d Grants or scholarships e Other expenditures for facilities and programs	b	Contributions							
d Grants or scholarships .	С								
e Other expenditures for facilities and programs	d	Grants or scholarships							
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations . 3a(i) (ii) related organizations . 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation (nivestment) (2,922,765) 5,069,146 c Leasehold improvements . 119,350 114,684 234,034 d Equipment . 27,693 27,693 5,482 e Other . 63,720 63,720	е	Other expenditures for facilities and					•		
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations . 3a(i) (ii) related organizations . 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation (nivestment) (2,922,765) 5,069,146 c Leasehold improvements . 119,350 114,684 234,034 d Equipment . 27,693 27,693 5,482 e Other . 63,720 63,720	f	Administ ative expenses							
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ % Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value 1a Land 402,338 402,338 5,482 6 Uther 402,338 6 Equipment 7,991,911 7,991,911 7,992,765 7,069,146 8 Equipment 8 Equipment 8 27,693 8 27,693 8 5,482 9 Other		·							
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations		· .	he current vear en	d balanc	e (line 1a	. column (a)) held	 as	 .
b Permanent endowment % c Temporarily restricted endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	а				- (5	, · · · · · · · · · · · · · ·	,,		
Temporarily restricted endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	b	Permanent endowment ▶	%	-					
The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	С								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations		The percentages on lines 2a, 2b, and 2	2c should equal 1	00%.					
Ves No	3a	Are there endowment funds not in the	possession of the	e organi	zation tha	at are held	and ad	ministered for t	the
(i) unrelated organizations				_					
(ii) related organizations		(i) unrelated organizations							
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 402,338 b Buildings		(ii) related organizations							
Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 402,338 Buildings	b	If "Yes" on line 3a(ii), are the related or	ganizations listed	as requi	red on So	chedule R?			
Complete If the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation	_								<u> </u>
Complete If the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation	Part								
Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value				" on For	m 990, F	Part IV, line	e 11a.	See Form 990), Part X, line 10.
b Buildings			(a) Cost or ot	her basis	(b) Cost o	r other basis	(c)	Accumulated	
b Buildings	1a	Land		-		402.338			402.338
c Leasehold improvements 119,350 114,684 234,034 d Equipment 27,693 27,693 5,482 e Other 63,720 63,720								2,922.765	
d Equipment		•							
e Other	_								
		Other							5,702
			ust equal Form 9!	90, Part)	K, column)c.) .		5.711.000

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

MT. PLEASANT NOW DEVELOPMENT CORPORATION	34-1599720
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION	
ORDER TO REVITALIZE & STABILIZE THE COMMUNITY & MAKE MT. PLEASANT A DESIRABLE, SAFE	NEIGHBORHOOD IN WHICH
TO LIVE, WORK, SHOP & RAISE A FAMILY.	
FORM 990, PART VI, SECTION B, LINE 11B	
THE FORM 990 IS PROVIDED TO THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER FOR R	EVIEW PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C:	
BOARD MEMBERS ARE REQUIRED TO DISCLOSE INTEREST THAT COULD GIVE RAISE TO CONFLIC	TS ON AN ANNUAL BASIS.
FORM 990, PART VI, SECTION B, LINE 15	
COMPENSATION FOR THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD MEMBERS.	
OTHER COMPENSATION IS DETERMINED BY ANNUAL REVIEWS OF THE INDIVIUALS.	
FORM 990, PART VI, SECTION C, LINE 19	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL	STATEMENTS
ARE AVAILABLE TO THE PUBLIC UPON REQUEST.	
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