

Form **990EZ**  
Department of the Treasury  
Internal Revenue Service

**Short Form**  
**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. 1545-1150  
**2020**  
**Open to Public Inspection**

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

**A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization  
DOWNTOWN MOORHEAD INC  
Number and street (or P. O. box, if mail is not delivered to street address) Room/suite  
200 5TH STREET S STE 203  
City or town, state or province, country, and ZIP or foreign postal code  
MOORHEAD, MN 56560

**D** Employer identification number  
81-3097290  
**E** Telephone number  
(218) 443-1361  
**F** Group Exemption Number

**G** Accounting Method:  Cash  Accrual Other (specify) \_\_\_\_\_

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I** Website: [WWW.DTMOORHEAD.ORG](http://WWW.DTMOORHEAD.ORG)  
**J** Tax-exempt status (check only one) -  501(c)(3)  501(c)(6) (insert no.)  4947(a)(1) or  527

**K** Form of organization:  Corporation  Trust  Association  Other \_\_\_\_\_  
**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . . . **\$ 182,500**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)  
Check if the organization used Schedule O to respond to any question in this Part I

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	82,500
	<b>2</b> Program service revenue including government fees and contracts . . . . .	<b>2</b>	100,000
	<b>3</b> Membership dues and assessments . . . . .	<b>3</b>	
	<b>4</b> Investment income . . . . .	<b>4</b>	
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	
	<b>6</b> Gaming and fundraising events		
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .	<b>6a</b>	
	<b>b</b> Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .	<b>6b</b>	
<b>c</b> Less: direct expenses from gaming and fundraising events . . . . .	<b>6c</b>		
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>		
<b>b</b> Less: cost of goods sold . . . . .	<b>7b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>		
<b>8</b> Other revenue (describe in Schedule O) . . . . .	<b>8</b>		
<b>9</b> <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . .	<b>9</b>	182,500	

Expenses	<b>10</b> Grants and similar amounts paid (list in Schedule O) . . . . .	<b>10</b>	
	<b>11</b> Benefits paid to or for members . . . . .	<b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	144,016
	<b>13</b> Professional fees and other payments to independent contractors . . . . .	<b>13</b>	5,171
	<b>14</b> Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	6,600
	<b>15</b> Printing, publications, postage, and shipping . . . . .	<b>15</b>	
	<b>16</b> Other expenses (describe in Schedule O) . . . . .	<b>16</b>	44,655
<b>17</b> <b>Total expenses.</b> Add lines 10 through 16 . . . . .	<b>17</b>	200,442	
Net Assets	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	-17,942
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>19</b>	141,088
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>20</b>	0
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .	<b>21</b>	123,146

**Part II Balance Sheets** (see the instructions for Part II)  
 Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	144,121	<b>22</b>	128,128
<b>23</b> Land and buildings . . . . .		<b>23</b>	
<b>24</b> Other assets (describe in Schedule O) . . . . .		<b>24</b>	
<b>25 Total assets</b> . . . . .	144,121	<b>25</b>	128,128
<b>26 Total liabilities</b> (describe in Schedule O). . . . .	3,033	<b>26</b>	4,982
<b>27 Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21)	141,088	<b>27</b>	123,146

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)  
 Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?  
 DOWNTOWN MOORHEAD INCORPORATED IS A PRIVATE, NON-PROFIT ORGANIZATION DEDICATED TO THE BENEFICIAL ECONOMIC GROWTH AND BUSINESS DEVELOPMENT OF DOWNTOWN MOORHEAD. WE ACCOMPLISH THIS THROUGH POLICY DEVELOPMENT, ADVOCACY, AND PROGRAM MANAGEMENT FUNCTIONS CONDUCTED ON BEHALF OF DOWNTOWN STAKEHOLDERS/INVESTORS, AND IN COOPERATION WITH PUBLIC AND OTHER PRIVATE-SECTOR PARTNERS.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses**  
 (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

**28**  
 See Additional Data Table

(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b>
<b>29</b>		<b>29a</b>
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>30</b>		<b>30a</b>
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>31</b> Other program services (describe in Schedule O) . . . . .		
(Grants \$ )	If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>
<b>32 Total program service expenses</b> (add lines 28a through 31a) . . . . .		<b>32</b>

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated — see the instructions for Part IV)  
 Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
DERRICK LAPOINT PRESIDENT/CEO	40.00	134,500	0	0
DAVE ANDERSON BOARD CHAIR	1.00	0	0	0
LISA BORGEN VICE CHAIR/SECRETARY	3.00	0	0	0
JOE WATZKE TREASURER	3.00	0	0	0
ANNE BLACKHURST DIRECTOR	3.00	0	0	0
WILLIAM CRAFT DIRECTOR	3.00	0	0	0
CARRIE BRIMHALL DIRECTOR	3.00	0	0	0
SHERI LARSON DIRECTOR	3.00	0	0	0
TED HORAN DIRECTOR	3.00	0	0	0
MARCIA PULCZINSKI DIRECTOR	3.00	0	0	0
MICHAEL BURNS DIRECTOR	3.00	0	0	0
BRANDON LUNAK DIRECTOR	3.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V. [X]

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name.
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed.
42a The organization's books are in care of DERRICK LAPOINT Telephone no. (218) 443-1361
Located at 200 5TH STREET S STE 203 MOORHEAD, MN ZIP + 4 56560

42b 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)?
42c At any time during the calendar year, did the organization maintain an office outside the U.S.?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

	<b>Yes</b>	<b>No</b>
<b>46</b> Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. . . . .	<b>46</b>	No

**Part VI Section 501(c)(3) Organizations Only**  
 All section 501(c)(3) organizations must answer questions 47- 49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI . . . . .

	<b>Yes</b>	<b>No</b>
<b>47</b> Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

**f** Total number of other employees paid over \$100,000 . . . . . ▶ \_\_\_\_\_

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

**d** Total number of other independent contractors each receiving over \$100,000. . . . . ▶ \_\_\_\_\_

**52** Did the organization complete Schedule A? **NOTE.** All section 501(c)(3) organizations must attach a completed Schedule A . . . . . ▶  Yes  No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b> Signature of officer ***** DERRICK LAPOINT PRESIDENT Type or print name and title	2021-05-05 Date
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<b>Paid Preparer Use Only</b>	Print/Type preparer's name SARA LYNCH CPA	Preparer's signature	Date 2021-05-05	Check <input type="checkbox"/> if self-employed	PTIN P00988855
	Firm's name ▶ BRADY MARTZ & ASSOCIATES PC			Firm's EIN ▶ 45-0310328	
	Firm's address ▶ 2537 S UNIVERSITY DRIVE FARGO, ND 58103			Phone no. (701) 280-2100	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶  Yes  No

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 81-3097290  
**Name:** DOWNTOWN MOORHEAD INC

**Form 990EZ, Part III - Statement of Program Service Accomplishments**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
<p><b>28</b></p> <p>AT THE LAUNCH OF DOWNTOWN MOORHEAD INC. IN THE SPRING OF 2018, IT WAS STATED WITH GENUINE CONFIDENCE THAT OUR CITY WAS ON THE VERGE OF GREAT CHANGE. DOWNTOWN MOORHEAD HAD THE POTENTIAL TO BECOME AN AMAZING DESTINATION. A DESTINATION FOR PEOPLE OF ALL AGES, WHETHER FOR BUSINESS, EDUCATION, LEISURE OR JUST PLAIN FUN. POSITIVE EXPERIENCES THAT WILL AFFECT THE WHOLE CITY, AS OUR DOWNTOWN ONCE AGAIN BECOMES THE GATEWAY TO ALL THE GREAT CITY OF MOORHEAD HAS TO OFFER.TWO YEARS IN, IT IS SO APPARENT THAT OUR PROMISING FUTURE IS HAPPENING RIGHT NOW, AND THE SKY IS TRULY THE LIMIT FROM HERE. WE ARE BOTH HUMBLLED AND ENCOURAGED BY THE AMOUNT OF GROWTH WE'VE SEEN IN SUCH A SHORT TIME. NEW BUILDINGS ARE POPPING UP, BUSINESSES ARE STARTING, AND PEOPLE ARE LIVING IN AND EMBRACING DOWNTOWN. WITH THE PROGRESS WE'VE ALREADY MADE, IT IS EVIDENT THAT THE VISION IMAGINED BY CITY LEADERS, AND THE RESULTING DOWNTOWN MOORHEAD INC. BOARD OF DIRECTORS, IS ON ITS WAY TO BECOMING A REALITY. TRUE TO THE PRIVILEGE OF LEADING THESE EFFORTS, AND WITH TREMENDOUS INPUT, SUPPORT AND ENCOURAGEMENT, BE ASSURED DMI WILL CONTINUE TO ENTHUSIASTICALLY SERVE THE BUSINESS COMMUNITY, AS WELL AS ALL CITIZENS OF MOORHEAD. THERE ARE SO MANY OPPORTUNITIES OUT THERE. OPPORTUNITIES WE CAN CLAIM AS OUR OWN, AS WE CONTINUE TO WORK TOGETHER ON OUR AMBITIOUS, BUT ACHIEVABLE, COMMON GOALS FOR THE FUTURE OF OUR CITY.</p> <p>DOWNTOWN MASTER PLAN: EARLY ON, DMI IDENTIFIED THE IMPORTANCE OF HAVING NOT ONLY A VISION, BUT A BLUEPRINT THAT WOULD GUIDE US ON OUR JOURNEY. CONSEQUENTLY, WE HAVE BEEN WORKING HARD ON A DOWNTOWN MASTER PLAN FOR THE CITY OF MOORHEAD. THE PLAN HAS BEEN A THOROUGH, DEEP DIVE EXAMINATION OF MOORHEAD FROM EVERY ANGLE. THROUGH INTENSE COMMUNITY ENGAGEMENT, IT UTILIZES AND INCORPORATES INPUT FROM WIDE-RANGING GROUPS AND INDIVIDUALS, INCLUSIVE AND DIVERSE. ALL WITH THE LOVE OF OUR CITY IN COMMON. WE BELIEVE THIS PLAN WILL LEAD US INTO THE FUTURE, BECOMING A TRUE GUIDE - NOT COMPLETED, PUBLISHED, AND PUT ON THE SHELF - THAT WILL BE USED FOR YEARS TO COME. A GUIDE THAT WILL SERVE US AS WE TRANSFORM DOWNTOWN MOORHEAD INTO A PLACE FOR ALL. THE MASTER PLAN IS NEAR PUBLICATION, AS WE FULFILL A PROMISE MADE TO MOORHEAD BUSINESSES, HIGHER ED INSTITUTIONS, THE CITY OF MOORHEAD AND ITS CITIZENS YOUNG AND OLD.MOORHEAD RENAISSANCE ZONE:IN 2019 DMI HELPED CREATE THE MOORHEAD RENAISSANCE ZONE PROGRAM (MRZ). A KEY ELEMENT FOR THE SUCCESSFUL IMPROVEMENT OF DOWNTOWN MOORHEAD, THIS ECONOMIC INCENTIVE ALIGNS POLICIES WITH OUR NEIGHBORS IN NORTH DAKOTA. TAKING A PAGE FROM THE BOOK THAT LEAD TO ENORMOUS CHANGE IN DOWNTOWN FARGO, THIS POLICY CONSISTS OF A PROPERTY TAX EXEMPTION PROGRAM THAT PROVIDES A SOLID ECONOMIC TOOLBOX FOR DEVELOPMENT TO OCCUR AND BE SUCCESSFUL IN OUR DOWNTOWN. WE ARE BOTH FACILITATOR AND CHEERLEADER, AS WE HELP PARTNER BUSINESSES AND OTHER DEVELOPERS WITH THE CITY OF MOORHEAD IN ORDER TO TAKE ADVANTAGE OF THE MANY OPPORTUNITIES AVAILABLE IN THE DOWNTOWN BUSINESS DISTRICT. STATED GOALS OF THE MRZ ARE TO: "FOCUS ON RENEWAL, INVESTMENT, AND REDEVELOPMENT." DMI SHARES THOSE GOALS AND IS UNIQUELY POSITIONED TO BE A CATALYST FOR THEIR CONTINUED DEVELOPMENT AND SUCCESS. IF YOU HAVE DRIVEN DOWNTOWN LATELY YOU WILL SEE MANY NEW BUSINESSES IN OUR CORE, WITH SO MANY MORE ON THE WAY. THE MRZ AND OTHER INCENTIVES HAVE A MADE A HUGE DIFFERENCE IN THAT GROWTH.HOUSING GOALS:THERE IS A TREMENDOUS NEED FOR MORE RESIDENTS IN OUR DOWNTOWN. THE GOAL IS TO ADD "500 IN 5" 500 UNITS IN 5 YEARS. WHILE AMBITIOUS, THE DOWNTOWN MASTER PLAN CONFIRMS THE DEMAND IS THERE, AND WE ARE WELL ON OUR WAY TO FULFILLING THIS NEED. OVER 250 UNITS ADDED SO FAR, WITH MANY MORE COMING WITH THE APPROVAL OF SO MANY MORE PROJECTS ON THE WAY. PERMANENT/SUSTAINED BORDER CITY LEGISLATION: AS GOOD NEIGHBORS, AND IN THE BEST INTEREST OF BUSINESSES ON BOTH SIDE OF THE RED RIVER, OUR COMMON GOAL WAS TO PRESERVE AND PROTECT BOTH THE BORDER CITY ENTERPRISE ZONE PROGRAM AND THE DISPARITY REDUCTION CREDIT PROGRAM. WORKING WITH THE CITY OF MOORHEAD AND LOCAL LEGISLATORS, THE RESULTS ARE STATED IN THE CITY'S 2019 LEGISLATIVE DASH BOARD: "BORDER CITY ENTERPRISE ZONE PROGRAM AND DISPARITY REDUCTION CREDIT PROGRAM PRESERVED. BOTH PROGRAMS ARE NOW PART OF THE STATE BUDGET. IT IS VERY SIGNIFICANT THAT FUNDING FOR THE DISPARITY REDUCTION CREDIT PROGRAM AND NOW THE BORDER CITY PROGRAM WILL BE INCLUDED IN AND PART OF THE STATE'S STRUCTURAL BUDGETARY PROCESS."INFRASTRUCTURE: DMI IS A STRONG AND VOCAL SUPPORTER FOR VITAL CONSTRUCTION PROJECTS, AND WE ARE ENCOURAGED BY THE ONGOING CONVERSATION ON HOW TO MAKE OUR URBAN TRANSPORTATION SYSTEM BETTER. AS WE HAVE LEARNED THROUGH THE DEVELOPMENT OF OUR MASTER PLAN, THAT INCLUDES CARS, BIKES, PEDESTRIANS, TRAINS AND HOW THE FLOW OF ALL OF THESE MODES OF TRANSPORTATION AFFECT THE RHYTHM OF THE CITY. WE ARE HEARTENED PROGRESS CONTINUES ON CENTER AVENUE AND THE 11TH ST. UNDERPASS, AS WELL AS THE MINNESOTA DEPARTMENT OF TRANSPORTATION'S PLAN TO BEGIN RECONSTRUCTION OF HIGHWAYS 10 AND 75 IN 2025. THESE PROJECTS ARE CRITICAL CONTRIBUTIONS TO A MODERN, ACCESSIBLE DOWNTOWN. THE DEVELOPMENT OF THE DOWNTOWN MOORHEAD MASTER PLAN ALSO SHOWED US THAT DESIGN MATTERS. CONSEQUENTLY, DMI WILL CONTINUE TO CHAMPION THE NEED TO INCORPORATE A COMPLETE STREET POLICY FOR MOORHEAD AND UNDERSTAND HOW THIS AND OTHER INFRASTRUCTURE PROJECTS IMPACT THE CITY'S FUTURE.BUSINESS DEVELOPMENT:AS A VOICE FOR THE PRIVATE SECTOR, DMI IS A STRONG ADVOCATE FOR DOWNTOWN BUSINESSES. WORKING CLOSELY WITH THE CITY OF MOORHEAD, IT HELPS CREATE POLICIES AND INCENTIVES TO FOSTER BUSINESS DEVELOPMENT. IN ADDITION TO THE RENAISSANCE ZONE, DMI HELPED REVISE THE CITY-WIDE COMMERCIAL/INDUSTRY PROPERTY TAX PROGRAM, AS WELL AS THE STOREFRONT REHAB PROGRAM. DMI UNDERSTANDS THE IMPORTANCE OF BUILDING FROM THE GROUND-UP, WHILE FOSTERING NEW BUSINESS GROWTH. WE RECOGNIZE THE VITAL IMPORTANCE OF SUPPORTING EXISTING BUSINESSES, MANY WHO HAVE BEEN BEDROCKS OF THE CITY'S BUSINESS INFRASTRUCTURE FOR DECADES.MOORHEAD CARES SMALL BUSINESS RELIEF GRANT PROGRAM:DMI, THE CITY OF MOORHEAD, AND CLAY COUNTY HAVE PARTNERED IN CREATING THIS ESSENTIAL PROGRAM IN A TIME OF CRISIS. MUCH CREDIT IS DUE TO THE MOORHEAD CITY COUNCIL FOR APPROVING THE USE OF \$2 MILLION IN FEDERAL CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY (CARES) ACT FUNDING FOR THE DEVELOPMENT OF THE MOORHEAD CARES SMALL BUSINESS RELIEF GRANT PROGRAM. QUOTING MOORHEAD MAYOR JOHNATHON JUDD, "THE CITY OF MOORHEAD VALUES ALL OF OUR BUSINESSES, NON-PROFITS AND COMMUNITY ORGANIZATIONS. THE MOORHEAD CARES PROGRAM WILL HELP THESE ENTITIES DEAL WITH THE DIFFICULT FINANCIAL IMPACTS RESULTING FROM COVID-19. IT IS IMPORTANT THAT OUR BUSINESSES ARE SUPPORTED, NOT ONLY BECAUSE THEY PROVIDE JOBS TO DEDICATED EMPLOYEES, BUT ALSO BECAUSE THEY ARE ESSENTIAL TO MOORHEAD'S CHARACTER AND QUALITY OF LIFE BY THE PRODUCTS AND SERVICES THEY PROVIDE FOR OUR RESIDENTS."THE GRANT PROGRAM OFFERS GRANTS OF UP TO \$10,000 TO SMALL BUSINESSES AND COMMUNITY ORGANIZATIONS WITH 20 OR FEWER EMPLOYEES, AND UP TO \$3,000 FOR ELIGIBLE SOLE PROPRIETORS. PUBLIC ENGAGEMENT:IN ADDITION TO DMI'S BROAD AND DEEP COMMUNITY ENGAGEMENT FOR THE ESSENTIAL INFORMATION NEEDED FOR THE DOWNTOWN MASTER PLAN, WE'VE ALSO TAKEN THE LEAD IN HELPING MOORHEAD BUSINESSES DURING THE SPREAD OF COVID-19. SPECIFICALLY, CONNECTING THEM TO RESOURCES AND INFORMATION NEEDED DURING THE PANDEMIC. THIS INVOLVED FREQUENT COMMUNICATION WITH THE STATE OF MINNESOTA AND FEDERAL GOVERNMENT TO OUTLINE OUR BUSINESS NEEDS AND HOW GOVERNMENT RESOURCES COULD HELP. THIS REMAINS AN ONGOING PROCESS, AND WE ARE FIRM BELIEVERS IN THE SAYING, "WE ARE ALL IN THIS TOGETHER."</p> <p>(Grants \$ 0) <span style="float:right">If this amount includes foreign grants, check here <input type="checkbox"/></span></p>	<b>28a</b>	0

**TY 2020 Transfers Personal Benefits  
Contracts Declaration**

**Name:** DOWNTOWN MOORHEAD INC

**EIN:** 81-3097290

**Declaration:** THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT. THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY, OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

**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.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020****Open to Public Inspection**

Department of the Treasury

Name of the organization  
DOWNTOWN MOORHEAD INC

Employer identification number

81-3097290

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES	DESCRIPTION: ADVERTISING. AMOUNT: 300. DESCRIPTION: MEMBERSHIP DUES. AMOUNT: 655. DESCRIPTION: CONFERENCES & TRAVEL. AMOUNT: 1,995. DESCRIPTION: OFFICE EXPENSE. AMOUNT: 2,919. DESCRIPTION: OTHER EXPENSES. AMOUNT: 2,050. DESCRIPTION: PAYROLL TAXES. AMOUNT: 10,312. DESCRIPTION: INSURANCE. AMOUNT: 1,469. DESCRIPTION: PROGRAM EXPENSES. AMOUNT: 23,880. DESCRIPTION: CELL PHONE. AMOUNT: 1,075. TOTAL TO FORM 990-EZ, LINE 16: 44,655.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES	DESCRIPTION: PAYROLL LIABILITIES. BEG. OF YEAR AMOUNT: 3,033. END OF YEAR AMOUNT: 4,982.