DLN: 93493227008132

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2011

Open to Public Inspection

A Fo	r the 2	2011 ca	lendar year, or tax year beginning 01-01-2011 a	nd ending 12-3:	1-2011				
B Ch	eck if ap	pplicable	C Name of organization				D Employ	er id	entification number
_	Iress ch		ENTERPRISE COMMUNITY PARTNERS INC				52-12	3193	31
— _{Na}	me char	nae	Doing Business As				E Telepho	ne n	umber
_	ıal retur	-				(410)964-1230			
_			Number and street (or P O box if mail is not delivered to s 10227 WINCOPIN CIRCLE SUITE 500	street address) Ro	oom/suite		G Gross re	ceipts	\$ \$ 60,707,731
_	mınated					İ			
	ended r		City or town, state or country, and ZIP + 4 COLUMBIA, MD 21044						
_ Ap	olication	pending	,						
			F Name and address of principal officer			H(a) Is thu	s a group	retur	n for
			michael mcneely 10227 WINCOPIN CIRCLE500			affilia	tes?		┌ Yes ┌ No
			columbia, MD 210443400		١,	H(b) Are all	affiliates i	ncluc	ded?
									t (see instructions)
T a	x-exem	pt status	▼ 501(c)(3)	a)(1) or $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$, p exempti		
J W	ebsite	:: ⊨ ww	w enterprisecommunity org						
V Ear	m of ora	ia nizatio n	✓ Corporation Trust Association Other ►		1	I Voor of for	mation 100	, I	M State of logal demisile
K FOI	n or org	janization	Corporation Trust Association Other			L Year of for	mation 198		M State of legal domicile MD
Pa	rt I	Sum	mary						
ų.	ד	ro cre.	escribe the organization's mission or most significa ATE OPPORTUNITIES FOR LOW AND MODERAT E, THRIVING COMMUNITIES		OPLE T	HROUGH A	FFORDA	BLE H	HOUSING IN
Activities & Governance	-								
Ë	-								
Š	2 0	Check th	nis box দ if the organization discontinued its ope	rations or dispo	osed of n	nore than 2	5% of its	net a	ıssets
IJ ⊶K			of voting members of the governing body (Part VI,				1	3	26
er er			of independent voting members of the governing bo					4	23
Ě			mber of individuals employed in calendar year 201		•			5	254
Ş			mber of volunteers (estimate if necessary)		•			6	81
۹,	 7a ⊺	Γotal un	related business revenue from Part VIII, column (0	C), line 12 .				7a	0
			lated business taxable income from Form 990-T, I					7b	
						Prio	Year		Current Year
	8	Contri	butions and grants (Part VIII, line 1h)				30,253,0	43	44,273,272
를	9		nm service revenue (Part VIII, line 2g)		[10,031,6		9,593,200
Revenue	10		tment income (Part VIII, column (A), lines 3, 4, an				530,0	00	565,320
æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c			4,376,7	48	5,843,252	
	12		revenue—add lines 8 through 11 (must equal Part \						
							45,191,4	-	60,275,044
	13		s and similar amounts paid (Part IX, column (A), lin				12,266,5	-	19,914,851
	14		ts paid to or for members (Part IX, column (A), line	F			0		
8	15	5-10)	es, other compensation, employee benefits (Part I)	x, column (A), I	lines		22,030,963		23,976,584
Expenses	16a	•	sional fundraising fees (Part IX, column (A), line 1	1e)	.			0	0
÷	ь		ndraising expenses (Part IX, column (D), line 25) •1,331,812						
Ē	17		expenses (Part IX, column (A), lines 11a-11d, 11				16,300,4	61	18,708,600
	18		expenses Add lines 13-17 (must equal Part IX, co		F		50,597,9	-	62,600,035
	19		ue less expenses Subtract line 18 from line 12 .		·		-5,406,4	-	-2,324,991
₹ 07					-	Beginning		-	
6							ear		End of Year
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)		. [1	78,093,1	99	185,651,350
중	21	Total I	liabilities (Part X, line 26)				7,773,1	99	7,683,350
žĽ	22	Netas	sets or fund balances Subtract line 21 from line 2	0		1	70,320,0	00	177,968,000
Pa	rt II	Sign	ature Block						
(now			erjury, I declare that I have examined this return, inclu f, it is true, correct, and complete. Declaration of prep						
Sign		****					12-08-14		
		F Signa	ature of officer			Da	te		
Her	е		ael mcneely CEO or print name and title						
		 	·				Τ		
_		Preparer		te	Che self-		Preparer's (see instru		ayer identification number s)
Paid		sıgnatur	F 55			ployed F (see insti			,
•	arer's		ame (or yours REZNICK GROUP PC mployed),				EIN Þ		
Jse	Unly		and ZIP + 4 7501 WISCONSIN AVENUE SUITE 400E				ļ		
			BETHESDA, MD 208146583				Phone no) (3	301) 652-9100
			,						

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

Pai	rt III	Statement of Progra Check if Schedule O cont			I	
THR HON INC PRE	CREAT IVING MES AN LUDE (DEVEL	COMMUNITIES ENTERP ID TO REBUILD COMMUN GRANTS FOR THEIR OPER	OW AND MODERATE-II RISE PROVIDES DEVEL ITIES SERVICES PROV ATIONS, SHORT-TERM AND CONSTRUCTION I	OPMENT CAPITAL A IDED BY THE ORGA LOANS RANGING F	ROUGH AFFORDABLE HOUSIN AND EXPERTISE TO CREATE NIZATION TO COMMUNITY ROM WORKING CAPITAL LIN SERVICES AND TRAINING P	DECENT, AFFORDABLE ORGANIZATIONS ES TO
2	the pi	ne organization undertake a rior Form 990 or 990-EZ?		ervices during the yea		_Yes ✓ No
		es," describe these new serv				
3	servi	ne organization cease condices?		nt changes in how it co		Yes 🗸 No
4	Desc exper	ribe the organization's prognses Section 501(c)(3) and	ram service accomplishn d 501(c)(4) organization:	s and section 4947(a)	nree largest program services,)(1) trusts are required to repoi ch program service reported	
4a	(Code	e) (Expe	nses \$ 54,766,990	ıncludıng grants of \$	19,914,851) (Revenue \$	9,593,200)
	•	, , ,			s, and loans to create nearly 300,000	
4b	(Code	e) (Expe	nses \$	ıncludıng grants of \$) (Revenue \$)
4 c	(Code	e) (Expe	nses \$	including grants of \$) (Revenue \$)
	-					
	-					
			<u> </u>			
4d		er program services (Desc penses \$	ribe in Schedule O) including grants o	f\$) (Revenue \$)
4e	Tota	al program service expenses	54 ,766,99	0		

	Part TV	Checklist of	Required	Schedule
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		Νo
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? If "Yes," complete Schedule C, Part II	4	Yes	
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 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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	Yes	
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c	Yes	
	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		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
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, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	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	Yes	
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II \Box	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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 owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	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	Yes	
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	36	Yes	

Dart V	Statements Regarding Other IRS Filings and Tax Compliance
Fallev	Statements Regarding Other IRS Finnies and Tax Compliance

	Check it Schedule O contains a response to any question in this Part V	•	• !	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1 03	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	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 or securities	4.		
L	account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	See instructions for filling requirements for Form FD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	эс 6а		No
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			No
d	file Form 8282?	7c		No
	and the same and t			1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Greec receipts, included on Form 990, Part VIII, line 12, for public use of club.			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	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)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
3	year Section 501(c)(29) qualified popprofit health insurance issuers			
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			
u	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
c	Enter the aggregate amount of reserves on hand			
	13c	امدا		N :
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
•	IT TES, THE TEMPORAL TO THE TEMPORAL THE SE PRYMETICS IT IND. PROVIDE AN EXPIRITATION IN SCHEDULE U	TAD		i

Form 990 (2011) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for Part VI a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax 1a 26 Enter the number of voting members included in line 1a, above, who are 1b 23 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . Νo Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . Νo 6 6 Νo 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Νo 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed▶AL , AK , AZ , AR , CA , CO , CT , DC , FL , GA , HI , IL , KS , KY , ME , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ✓ Own website ✓ Another's website ✓ Upon request
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization MICHAEL MCNEELY

10227 WINCOPIN CIRCLESOO columbia, MD 210443400

(410)772-6016

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

Check if Schedule O contains a response to any question in this Part VII

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the 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 orga	nızatıon nor any re	elated o	rgan	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n one son er ar	e bo: is bo nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe	more than one box, unless person is both an officer and a							(D) portable pensation rom the nization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	Estin amount comper from organiza	nated of other nsation the tion and	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)	rela organız		
See Additional Data Table													
						 							
1b Sub-Total													
c Total from continuation sheets to Part VII, Section A									5	820,096			
d Total (add lines 1b and 1c)										,			
\$100,000 of reportable comp	ensation from the	organız	ation	► 65									
											Yes	No	
3 Did the organization list any f on line 1a? If "Yes," complete.										ated employee	3	No	
4 For any individual listed on lin organization and related organization											4 Yes		
5 Did any person listed on line :	La receive or accri	ue comp	ensa	ition	fror	m any	unre	lated o	rganızatıon (or individual for	1 163	+	
services rendered to the organization? If "Yes," complete Schedule J for such person										5	No		
Section B. Independent Co	ontractors												
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) Name and business ad	dress							Desc	(B) ription of services		C) ensation	
MONITOR COMPANY GROUP LIMITED PARTI 2 CANAL PARK CAMBRIDGE, MA 02141	N								consulting			453,888	
brophy reilly LLC 10490 little patuxent parkway COLUMBIA, MD 21044									sr managme	ent consult		139,435	
blank rome llp 600 new hampshire avenue WASHINGTON, DC 20037									legal			145,680	
JEFFREY A MION 780 REDLION RUN ALPHARETTA, GA 30022			_			_		_	consulting se	ervices		126,312	
mcBee strategic consulting llc 601 pennsylvania avenue nw suite 8 WASHINGTON, DC 20004					mcBee strategic consulting lic 601 pennsylvania avenue nw suite 8 consulting								
Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►7													

Form 9						Page 9
Part	<u>/1111</u>	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated campaigns 1a				
윤	Ь	Membership dues 1b	_			
عرق	c	Fundraising events 1c 1,428,1	75			
ž ž	d	Related organizations 1d	_			
% E	e	Government grants (contributions) 1e 25,489,8	52			
S.	f	All other contributions, gifts, grants, and 1f 17,355,2.	 35			İ
Contributions, gifts, grants and other similar amounts	g	similar amounts not included above Noncash contributions included in lines 1a-1f \$ 37,960	_			
S E	h	Total. Add lines 1a-1f	► 44,273,272			
		Business Cod	e e			
nce.	2a	AFFILIATE SERVICES 531	390 6,538,002	6,538,002		
92 52	ь	TRAINING PROGRAMS 531	390 2,860,392	2,860,392		
ъ. Н	c	OTHER INCOME 531	390 136,924	136,924		
Program Serwce Revenue	d	RENTAL INCOME 531	390 57,513	57,513		
Ž,	e	FLOW THRU FROM LAFITTE 531	390 369	369		
<u>e</u>	_ ا	All other program corvice revenue				
Do_L	f	All other program service revenue				
	g	Total. Add lines 2a−2f	9,593,200			
	3	Investment income (including dividends, interest				
		and other similar amounts)	565,320			565,320
	4	Income from investment of tax-exempt bond proceeds	6,088,516			6,088,516
	5	Royalties	0,088,310			0,088,310
	6a	(i) Real (ii) Personal Gross rents	\dashv			
	b	Less rental				
		expenses				
	°	Rental income or (loss)				
	d	Net rental income or (loss)				
	_	(i) Securities (ii) Other Gross amount	_			
	7a	from sales of assets other than inventory Less cost or				
	b	other basis and				
	_c	sales expenses Gain or (loss)	_			
	d	Net gain or (loss)	0			
ıne	8a	Gross income from fundraising events (not including \$ 1,428,175				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 a 187,4	23			
il e	ь	Less direct expenses b 432,6				
ō	c	Net income or (loss) from fundraising events	-245,264			-245,264
	9a	Gross income from gaming activities See Part IV, line 19 a				
	b	Less direct expenses b Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances .				
	ь	Less cost of goods sold b				
	C	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Cod				
	11a	Dusilless Cou	-			
	b					
	C	All other revenue				ļ
	d	All other revenue				
	e 12	•	0			
	12	Total revenue. See Instructions	60,275,044	9,593,200		6,408,572

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Joint costs. Check here ► 🗀 If following

SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 19,914,851 19,914,851 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 7,058,538 4,841,231 1,816,735 400,572 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 Other salaries and wages 12,798,265 11,391,643 677,179 729,443 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 4,119,781 3,221,669 658,805 Other employee benefits 239,307 Fees for services (non-employees) 11 Management O 0 Legal 0 Accounting 0 Lobbying Professional fundraising See Part IV, line 17 . . 0 0 Investment management fees 0 g Advertising and promotion . . . 0 684,362 Office expenses 619,866 29,352 13 35,144 Information technology 0 Royalties . . 0 3,118,459 16 2,571,691 388,627 158,141 1,427,897 1,336,465 24,439 66,993 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 1,060,603 1,042,040 910 17,653 O Payments to affiliates 22 Depreciation, depletion, and amortization 889,998 398,910 464,952 26,136 O 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) PROFESSIONAL AND CONTRACT SERV 11,153,463 2,652,636 72,093 8,428,734 MISCELLANEOUS 514,762 861 534,640 19,017 MARKETING 485,128 485,128 DIRECT FUNDRAISING -432,687 -432,687 d е All other expenses -213,263 -213,263 25 Total functional expenses. Add lines 1 through 24f

62,600,035

54,766,990

1,331,812

6,501,233

	1990 (· · · · · · · · · · · · · · · · · · ·					Page 11
Pa	rt X	Balance Sheet			l (2)		(=)
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			6,544,348	1	9,031,363
	2	Savings and temporary cash investments	11,976,563	_	9,469,144		
	3	Pledges and grants receivable, net	6,465,079	-	6,563,653		
	4	Accounts receivable, net	4,977,337	_	6,413,408		
	5	Receivables from current and former officers, directors, trustees	s. kev	emplovees, and			, ,
		highest compensated employees Complete Part II of	-,,				
		Schedule L			0	5	0
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of					
		Schedule L			0	6	0
ë	7	Notes and loans receivable, net		4,976,663	7	5,339,740	
Assets	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			232,531	9	212,622
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	1 1				
	ь	Less accumulated depreciation	4,287,658	3,452,130	10c	3,660,749	
	11	Investments—publicly traded securities		19,814,033	11	16,797,803	
	12	Investments—other securities See Part IV, line 11	•	1,083,764	12	993,866	
	13	Investments—program-related See Part IV, line 11		113,659,440	13	122,184,773	
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			4,911,311	15	4,984,229
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			178,093,199	16	185,651,350
	17	Accounts payable and accrued expenses .			5,203,179	17	6,665,092
	18	Grants payable		0	18	0	
	19	Deferred revenue	0	19	0		
	20	Tax-exempt bond liabilities	0	20	0		
10	21	Escrow or custodial account liability Complete Part IV of Schedu	le D .		2,369,020	21	1,018,258
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
- e		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0	
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Par				_	
		D		201,000	_	0	
	26	Total liabilities. Add lines 17 through 25		-	7,773,199	26	7,683,350
Balances		Organizations that follow SFAS 117, check here ▶ and compare through 29, and lines 33 and 34.	olete I	ines 27			
<u>8</u>	27	Unrestricted net assets		129,942,000	27	141,080,000	
ä	28	Temporarily restricted net assets	40,378,000	28	36,888,000		
Σ	29	Permanently restricted net assets			0	29	0
Fund		Organizations that do not follow SFAS 117, check here ► at	nd com	nplete			
ō	30	lines 30 through 34.					
Sts.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	ınas		470 000 000	32	477.000.000
¥	33	Total net assets or fund balances			170,320,000	33	177,968,000
	34	Total liabilities and net assets/fund balances			178,093,199	34	185,651,350

Pair	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		60.2	275,044
2	Total expenses (must equal Part IX, column (A), line 25)	2			500,03
3	Revenue less expenses Subtract line 2 from line 1	3		-2,3	324,991
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		170,3	320,000
5	Other changes in net assets or fund balances (explain in Schedule O)	5		9,9	72,991
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		177,9	68,000
Par	Table 1 The Check of Schedule O contains a response to any question in this Part XII				
		,		Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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 Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

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. See separate instructions.

Inspection **Employer identification number**

ENTERPRISE COMMUNITY PARTNERS INC 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 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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 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) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) Νo (ii) a family member of a person described in (i) above? 11g(ii) Νo (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Νo

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) lis your gove docume	e Ion In ted In Frning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizati col (i) orga in the U	ion in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support		•		, ,	•		
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	L	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	49,222,00	0 40,413,000	28,958,000	30,253,043	44,273	3,272	193,119,315
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 5	Total. Add lines 1 through 3 The portion of total contributions	49,222,00	0 40,413,000	28,958,000	30,253,043	44,273	3,272	193,119,315
,	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							12,350,213
6	Public Support. Subtract line 5 from line 4							180,769,102
S	ection B. Total Support							
	endar year (or fiscal year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011		(f) Total
_	beginning in)	49,222,000	40,413,000	28,958,000	30,253,043	44,273		193,119,315
7 8	A mounts from line 4 Gross income from interest,	49,222,000	40,413,000	28,938,000	30,233,043	44,273	,2/2	193,119,313
•	dividends, payments received on securities loans, rents, royalties and income from similar sources	4,413,000	4,193,000	2,847,000	5,111,324	6,653	,836	23,218,160
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets							
11	Total support (Add lines 7 through 10)							216,337,475
12	Gross receipts from related activit	ies, etc (See ins	tructions)			12		56,704,874
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ion's first, second	, thırd, fourth, or f	ifth tax year as a	501(c)(3) o	rgan	ization,
	ection C. Computation of Pu							
14	Public Support Percentage for 201	-		11 column (f))		14		83 559 %
15	Public Support Percentage for 201	•	•			15		83 293 %
16a	33 1/3% support test—2011. If the and stop here. The organization qu				line 14 is 33 1/3%	or more, cl	ıeck	this box ►✓
b	33 1/3% support test—2010. If th	_			a, and line 15 is	33 1/3% orı	nore	, check this_
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization metric IV how the organization metric IV h	: —2011. If the org	janization did not o facts and circumst	check a box on lir cances" test, che	ck this box and s t	op here. Ex	plaın	
b	organization 10%-facts-and-circumstances test	: —2010. If the org	ganızatıon dıd not d	check a box on lir	ne 13, 16a, 16b, o	or 17a and li	ne	►
18	15 is 10% or more, and if the organize Explain in Part IV how the organize supported organization Private Foundation If the organiza	ation meets the "	facts and circumst	ances" test The	organization qua	lifies as a pu	ıblıcl	▶ □
	instructions							▶ □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

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▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).							
Facts And Circumstances Test								
	Explanation							

Schedule A (Form 990 or 990-EZ) 2011

Software ID: Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

Form 990, Special Condition Description:

Special Condition Description

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

Compensated Employees, and	Independ	lent C	onti	act	tors	<u> </u>				1
(A) Name and Title	(B) Average hours per		tion (that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Terri L Ludwig PRESIDENT & CEO	400	Х		х				427,281	0	30,015
bill beckmann trustee	10	Х						0	0	0
patricia Rouse trustee, CO-FOUNDER AND VP	1 0	Х		Х				0	0	0
RENATA SIMRIL trustee	1 0	Х						0	0	0
raymond christman trustee	1 0	Х						0	0	0
sheila crowley trustee	1 0	Х						0	0	0
ronald grzywinski trustee	1 0	Х						0	0	0
alıcıa glen trustee	1 0	Х						0	0	0
edward norton trustee	1 0	Х						0	0	0
carol parry trustee	1 0	Х						0	0	0
franklin raines trustee	1 0	Х						0	0	0
nıcolas retsınas trustee	1 0	Х						0	0	0
jonathan rose trustee	1 0	Х						0	0	0
michael roth trustee	1 0	Х						0	0	0
tony salazar trustee	1 0	Х						0	0	0
J ronald terwilliger trustee, chairman	1 0	Х		Х				0	0	0
reginald williams trustee	1 0	Х						0	0	0
Jaime yordan trustee	1 0	Х						0	0	0
Barry zigas trustee	1 0	Х						0	0	0
CHARLES WERHANE DIRECTOR	1 0	Х						0	720,799	109,262
adam r flatto trustee	1 0	Х						0	0	0
dora leong gallo trustee	1 0	х						0	0	0
priscilla almodovar trustee	1 0	х						0	0	0
gregory baer trustee	1 0	х						0	0	0
maria barry trustee	1 0	х						0	0	0
	•		•		-	•		•		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (B) Average (C)
Position (check all **(D)** Reportable **(E)** Reportable **(F)** Estimated (A) Name and Title

Name and Title	A verage hours	that apply)					 Reportable compensation from the	Reportable compensation	Estimated amount of other compensation	
	per week	Institutional Trustae Officel Institutional Trustae Individual trustae Individual trustae Institutional Trust		(W- 2/1099-	from the organization and related organizations					
joseph brown trustee	1 0	Х					0	0	0	
rıck lazıo trustee	1 0	Х					0	0	0	
donna milrod trustee	1 0	х					0	0	О	
mıchael slocum trustee	1 0	Х					0	0	0	
rıchard coles trustee	1 0	Х					0	0	0	
JEFFREY SCHAFFER vice president	40 0			х			206,216	0	18,933	
WILLIAM R FREY senior VICE PRESIDENT	40 0			х			281,349	0	21,722	
CHRISTINE K CARTALES VICE PRESIDENT	40 0			х			198,955	0	19,733	
NAOMI BAYER senior VICE PRESIDENT	40 0			х			286,974	0	26,777	
LORI CHATMAN senior VICE PRESIDENT	1 0			х			0	206,587	18,618	
RICHARD GROSS VICE PRESIDENT	40 0			х			211,649	0	19,858	
MARK MCDERMOTT VICE PRESIDENT	40 0			х			197,739	0	14,530	
LAURA MCGRATH VICE PRESIDENT	40 0			х			139,261	0	13,085	
MICHAEL MCNEELY sVP, TREASURER, & CFO	40 0			х			283,196	0	18,846	
ABBY JO SIGAL VICE PRESIDENT	40 0			х			210,068	0	23,769	
Alan Scott Anderson VICE PRESIDENT	40 0			х			155,872	0	5,721	
ALAZNE SOLIS senior VICE PRESIDENT	40 0			х			295,813	0	29,544	
FAITH E THOMAS sVP &general counsel/secretary	40 0			х			227,085	0	23,616	
Matthew D Hoffman vice president	40 0			х			150,535	0	15,278	
Meaghan E Vlkovic vice president	40 0			х			142,041	0	14,796	
PAUL M CUMMINGS svp	40 0			х			316,373	0	23,475	
DANA L BOURLAND VICE PRESIDENT	40 0			х			186,047	0	15,215	
AMALIA M KASTBERG VICE PRESIDENT	40 0			х			239,216	0	23,038	
MICHELLE WHETTEN VICE PRESIDENT	40 0			х			165,271	0	13,230	
DAVID CHARLES BOWERS VICE PRESIDENT	40 0			x			161,405	0	12,214	

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours		that a		y)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DORIS W KOO OFFICER	40 0			х				295,028	0	23,133
Edward David Manekin vice president	40 0			х				150,958	0	17,330
mary ann leonard vice president	40 0			х				193,105	0	17,353
keith e fairey vice president	40 0			х				187,674	0	21,559
alex s avitabile vice president	40 0			х				169,623	0	15,760
jeanette I daymude vice president	40 0			х				161,252	0	15,472
petra d montague vice president	40 0			х				152,637	0	11,878
karen lado vice president	40 0			х				146,883	0	19,074
katherine w swenson vice president	40 0			х				138,749	0	20,778
edward d rosenthal vice president	40 0			х				149,745	0	13,333
anthony joseph dispigno senior vice president	40 0			х				244,701	0	20,822
robert s grossinger vice president	40 0			х				179,536	0	8,780
Andrew Edward Geer vice president	40 0			х				137,003	0	5,565
Melinda J Pollack vice president	40 0			х				136,917	0	18,364
Kım A Weaver-McDonald vice president	40 0			х				132,380	0	8,301
oyeshola olatoye DRM & Deputy Director	40 0					х		173,146		25,897
jacqueline waggoner DRM & DEputy director	40 0					Х		167,104		14,310
dmitri wasilewski DRM	40 0					Х		161,108		10,248
jon searles deputy director	40 0					х		154,438		10,545
karen e lord loan fund controller	40 0					х		130,797		10,319

DLN: 93493227008132

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

Se Se f the	e organization answered "res," to Form 930, Part IV, Line 4, Of Form 930-LZ, Part VI, line 47 (Loction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part le organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 350 (2014))	Oonoto II-B Do	omplet not co	e Part II-B mplete Part		
Na	TERPRISE COMMUNITY PARTNERS INC	yer ide 23193:		ition numbe	er	_
Par	t I-A Complete if the organization is exempt under section 501(c) or is a section	on 52	7 org	janizatio	n.	_
1	Provide a description of the organization's direct and indirect political campaign activities on behalf of in opposition to candidates for public office in Part IV	or				
2 3	Political expenditures Volunteer hours	•	\$ <u> </u>			-
Par	t I-B Complete if the organization is exempt under section 501(c)(3).					-
1	Enter the amount of any excise tax incurred by the organization under section 4955	-	\$			_
2	Enter the amount of any excise tax incurred by organization managers under section 4955	F	\$			_
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No	
4a	Was a correction made?			☐ Yes	┌ No	
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the organization is exempt under section 501(c) except section	on 50)1(c)	(3).		_
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	s 🕨	\$			_
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	•	\$ <u></u>			_
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	•	\$			
4	Did the filing organization file Form 1120-POL for this year?			┌ Yes	┌ No	
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount payd from the filing organization.					

organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

section 4911 tax for this year?

	······································	ı ug
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768	(election
	under section 501(h)).	

Α	Check	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		expenses, and share of excess lobbying expenditures)

	Limits on Lobbying E (The term "expenditures" means an		(a) Filing Organization's Totals	(b) Affiliated Group Totals
.a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	24,596	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	620,728	
C	Total lobbying expenditures (add lines 1a and 1b	645,324		
d	O ther exempt purpose expenditures	61,954,711		
e	Total exempt purpose expenditures (add lines 1	62,600,035		
f	Lobbying nontaxable amount Enter the amount f columns	1,000,000		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ente	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente			

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2008 **(b)** 2009 (d) 2011 (c) 2010 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 Lobbying non-taxable amount 4,000,000 Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 889,656 771,237 699,288 645,324 3,005,505 Total lobbying expenditures Grassroots non-taxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) 88,966 24,596 77,124 216,617 Grassroots lobbying expenditures

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		(a)	(b)
		Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

DLN: 93493227008132

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization ENTERPRISE COMMUNITY PARTNERS INC **Employer identification number**

Pa	Organizations Maintaining Donor organization answered "Yes" to Form	Advised Funds or Other Similar For 1990, Part IV, line 6.	unds or Accounts. Complete if the
	-	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a funds are the organization's property, subject to the	3	nor advised Yes No
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit		
Pa	rt II Conservation Easements. Comple	ete if the organization answered "Yes" t	o Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreprotection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a general space.	eation or pleasure)	n historically importantly land area certified historic structure
_	easement on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easeme	ents	2b
c	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d
3	Number of conservation easements modified, training the taxable year -	nsferred, released, extinguished, or terminate	ed by the organization during
4	Number of states where property subject to cons	ervation easement is located ►	_
5	Does the organization have a written policy regar enforcement of the conservation easements it ho		dling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting and enforcing conservation easem	nents during the year 🟲
7	Amount of expenses incurred in monitoring, insper	ecting, and enforcing conservation easement:	s during the year
8	Does each conservation easement reported on lii 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financial	
Par	Complete if the organization answers	etions of Art, Historical Treasures, ed "Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
1a	If the organization elected, as permitted under Si art, historical treasures, or other similar assets h provide, in Part XIV, the text of the footnote to its	neld for public exhibition, education or researc	ch in furtherance of public service,
b	If the organization elected, as permitted under Si historical treasures, or other similar assets held provide the following amounts relating to these it	for public exhibition, education, or research i	
	(i) Revenues included in Form 990, Part VIII, lir	ne 1	▶ -\$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, he following amounts required to be reported under S		or financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Trea</u>	sures, or	<u> Othe</u>	<u>r Similar Ass</u>	ets (c	ontınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing that	are a signi	ficant u	se of its collection	n	
а	Public exhibition		d	Γ	Loan or e	xchange pr	ograms			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ıın hov	w they	/ further th	ne organızat	ion's ex	kempt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an					ion answe	ered "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	forc	ontributior	ns or other a	assets		Yes	✓ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	able			Amo	unt	
С	Beginning balance						1c	Ame	unc	
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990 Part V lin	മ 212					<u>ت</u>	Yes	□ No
	If "Yes," explain the arrangement in Part XIV	•	C 21'					Ι*	163	, 140
	t V Endowment Funds. Complete		n and	Were	h "Yes" t	to Form 90	90 Par	t IV line 10		
	Endownient Fands: Complete	(a)Current Year)Prior \		Two Years B			e) Four Y	ears Back
1a	Beginning of year balance									
b	Contributions									
c	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the yea	r end balance held	as							
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
c	Term endowment ▶									
За	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	ire held an	d administe	ered for	the	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•						3b		
4	Describe in Part XIV the intended uses of th									
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	70, Pa			1		Γ		
	Description of property				Cost or other			(c) Accumulated depreciation	(d) B	ook value
	and									
	and									
b E						1,	,816,131	678,365		1,137,766
b E c l	Buildings					_	,816,131 ,629,265			1,137,766 549,205
b 6 c 1 d 6 e (Buildings					1,		1,080,060		

Part VII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of end of year market value
(2)Closely-held equity interests Other		
Citiei		
	-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line 1	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
(1) ENTERPRISE COMMUNITY INVEST	93,955,624	F
(2) STOCK-EMI	1,500,000	F
(3) OTHERS	-264,255	F
(4) EHOP	-5,517,794	F
(5) CORNERSTONE	3,090,322	F
(6) ENTERPRISE COMMUNITY LOAN FUND	29,420,876	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	122,184,773	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line		
	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	tion	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	e 15. tion 5.)	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X	5.) , line 25.	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	e 15. tion 5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X	5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10
Par	TXII Reconciliation of Revenue per Audited Financial Statements With Revenue p	per Return
1	Total revenue, gains, and other support per audited financial statements	1
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments]
b	Donated services and use of facilities	
C	Recoveries of prior year grants]
d	Other (Describe in Part XIV)]
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	-
b	Other (Describe in Part XIV)	1
C	Add lines 4a and 4b	4c
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	s per keturn
_	statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
b	Prior year adjustments	
C	Other losses	
d	Other (Describe in Part XIV)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV)	
C	Add lines 4a and 4b	4c
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5
	rt XIV Supplemental Information	
Cor	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines $1a$ and 4 , Pa	art IV , lines 1b and 2b,

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
FUNDS HELD FOR OTHERS	PART IV LINE 2B	The organization holds assets, primarily cash and cash equivalents, for third parties pursuant to fiscal agency and similar contractual arrangements. The assets held are classified as restricted and the related liability is included in funds held for others.
FEDERAL INCOME TAXES	PART X LINE 1	ENTERPRISE COMMUNITY PARTNERS, INC DID NOT HAVE ANY UNRELATED BUSINESS INCOME DURING THE YEAR ENDED DECEMBER 31, 2011 ACCORDINGLY, NO PROVISION OR BENEFIT FROM INCOME TAXES HAS BEEN RECORDED
UNCERTAIN TAX POSITIONS	PART X LINE 2	FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010, THE ORGANIZATION DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS

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As Filed Data -

DLN: 93493227008132

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE G

(Form 990 or 990-EZ)

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

	ie of the organization ERPRISE COMMUNITY PA	DINEDS INC						Employer idei	ntification number										
	ERI RISE COMMONITY YA	KTNEKS INC						52-1231931											
Pa	rt I Fundraising Ac	tivities. Complete	e if the o	organiza	tıon a	nswered "Yes"	to Form	990, Part IV	, line 17.										
1	Indicate whether the orgai	nızatıon raısed funds	through	any of the	follow	ng activities Ch	eck all th	at apply											
а	Mail solicitations			е		Solicitation of noi	n-govern	ment grants											
b	Internet and e-mail so	olicitations		f		Solicitation of go		_											
c	Phone solicitations			g		Special fundraisir	ng events	;											
d	In-person solicitation	s																	
2a	Did the organization have or key employees listed in								Г Yes Г No										
b	If "Yes," list the ten highes to be compensated at leas																		
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser have custody or control of contributions?		fundraiser hav custody or control of			Gross receipts om activity	(or re fundra	nount paid to etained by) iser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Tes																
Tota	1			•															
3	List all states in which the licensing	organization is regis	stered or	licensed t	to solic	it funds or has b	een notifi	ed it is exempt	t from registration or										

Pai	t II	Fundraising Events. Commore than \$15,000 on Form				
			(a) Event #1 NY EVENT (event type)	(b) Event #2 LA SOCIAL (event type)	(c) O ther Events 1 (total number)	(d) Total Events (Add col (a) through col (c))
Æ	1	Gross receipts	1,116,77!			1,428,175
Revenue	2	Less Charitable contributions	983,802	107,050	149,900	1,240,752
<u>.</u>	3	Gross income (line 1 minus line 2)	132,973	23,250	31,200	187,423
	4	Cash prizes				
မှာ	5	Non-cash prizes				
Expenses	6	Rent/facility costs	184,399	70,990	83,698	339,087
ă ă	7	Food and beverages				
Direct Direct	8	Entertainment				
Δ	9	Other direct expenses .	77,660	5,917	10,023	93,600
	10	Direct expense summary Add lin	es 4 through 9 ın columr	n (d)	🛌	(432,687)
	11	Net income summary Combine li				-245,264
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
် မ	2	Cash prizes				
xpenses	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	V olunteer labor	┌ Yes	┌ Yes	┌ Yes ┌ No	
	7	Direct expense summary Add line	s 2 through 5 in column i	(d)		()
	8	Net gaming income summary Com	bine lines 1 and 7 in col	ımn (d)	<u> ► </u>	
9 a b	Is th	er the state(s) in which the organization licensed to operate	gaming activities in eac	h of these states?		
10a b		e any of the organization's gaming	icenses revoked, suspe	nded or terminated during	the tax year?	· · 「Yes 「No

Sche	dule G (Form 990 or 990-EZ) 20	11				Page 3
11	Does the organization operate ga	aming activities with nonmembers? $oldsymbol{\cdot}$			es [No No
12		neficiary or trustee of a trust or a mem				
	formed to administer charitable of	gaming?		Г ү	es 「	No
13	Indicate the percentage of gamir	ng activity operated in		1 1		
а				13a		
b	An outside facility			13b		
14	Provide the name and address of records	the person who prepares the organiza	tion's gaming/special events book	s and		
	Name 🟲					
	Address ►					
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming			
	revenue?			Гү	es F	- No
b		ning revenue received by the organizat				.,,
	amount of gaming revenue retain	ed by the thırd party 🟲 \$				
c	If "Yes," enter name and address	5				
	Name 🟲					
	Address ►					
16	Gaming manager information					
	Name 🟲					
	Gaming manager compensation I	\$ \$				
	Description of services provided	>				
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions					
а	Is the organization required unde	er state law to make charitable distribu	tions from the gaming proceeds to			
	= =				es [No
b		required under state law distributed tactivities during the tax year > \$	o other exempt organizations or sp	ent		
Par		provide additional information for	responses to quuestion on Sc	hedule G (see		
	Identifier	ReturnReference	Explana	tıon		
<u></u>						

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DLN: 93493227008132

OMB No 1545-0047

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Department of the Treasury Internal Revenue Service		Complete		nswered "Yes," to Form ► Attach to Form 990	1990, Part 1V, line 21 or	22.		oen to Public Inspection
Name of the organization	V DADTNEDG ING						Employer identification	on number
ENTERPRISE COMMUNIT							52-1231931	
	ormation on Gr							
	used to award the g	rants or assis	stance?					✓ Yes
				f grant funds in the Unite				
Form 990, Pa	art IV, line 21 for	any recipie	nt that received m	r ganizations in the nore than \$5,000. Che needed	eck this box if no one	recipient received	l more than \$5,000.	Use
(a) Name and address of organization or government	of (b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Tab	ole							
2 Enter total number of				ed in the line 1 table .			· · · · •	

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	•				

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.							
Identifier	Return Reference	Explanation					
part I , Line 2	Grant monitoring process	HUD Section 4 Program The majority of pass through funding utilized by Enterprise is through the Section 4 program, a capacity building program administered by the Department of Housing & Urban Development Each year since the early 1990's, Congress have appropriated funds to the Section 4 program Eligible applicants for this funding haves been limited to Habitat for Humanity, Local Initiative Support Corporation, and Enterprise Community Partners. Of each annual award received a portion of the funds are restricted to use within rural areas of the country. Eligible activities under the Section 4 program are capacity building activities, provided directly to CDCs and CHDOs by Enterprise staff, consultants, trainings and grants, predevelopment activities via grants, and loans and other activities authorized by the secretary of HUD. After receipt of the award, Enterprise's senior management allocates funding to initiatives and markets through an allocation process. After funds are allocated, specific work plans and detailed budgets are developed and submitted to HUD for approval. Once work plans are approved, funds can be committed and drawn. Coding expenses and time to a specific work plan draws funds utilized internally. Pass through funding in a work plan is awarded to organizations through a RFP process, or in unique situations, through a sole source process. After the grantee selection process is complete, a grant request package is submitted to Contracts Administration for processing. Some work plans include funding for predevelopment and working capital loans. These loans are administration for processing. Some work plans include funding for predevelopment and working capital loans. These loans are administration by the provate funding sources. Some funders include, Citi Foundation, Bank of America, Kresge Foundation, etc. Many of the private funding sources. Some funders include, Citi Foundation, Bank of America, Kresge Foundation, etc. Many of the private funding includes staff time, pass through grants an					

forwarded to Accounting for payment

documentation is in order, project codes are correct and that there is available funding, the disbursement request is

Software ID: **Software Version:**

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

Form 990,Schedule 1					ments and		in the United St
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1260 HOUSING DEVELOPMENT CORPORATION2042- 48 ARCH STREET PHILADELPHIA, PA 19103	23- 2536730	501(c)(3)	25,000				CAPACITY BUILDING
A COMMUNITY OF FRIENDS3701 WILSHIRE BLVD LOS ANGELES, CA 90010	95- 4203106	501(c)(3)	119,922				CAPACITY BUILDING
ABODE COMMUNITIES701 EAST 3RD STREET LOS ANGELES, CA 90013	95- 6377511	501(c)(3)	70,362				CAPACITY BUILDING
AEON822 SOUTH 3RD STREET MINNEAPOLIS, MN 55415	41- 1558711	501(c)(3)	30,000				CAPACITY BUILDING
AFFORDABLE HOUSING ASSOCIATES1250 ADDISON STREET BERKELEY,CA 94702	94- 6762509	501(c)(3)	109,959				CAPACITY BUILDING
LEADINGAGE INC 2519 CONNECTICUT AVENUE NW WASHINGTON, DC 200081520	13- 6213525	501(c)(3)	53,252				CAPACITY BUILDING
ARCHDIOCESAN HSING AUTH OF SEATTLE100 23RD AVENUE S SEATTLE,WA 98144	91- 1099134	501(c)(3)	20,000				CAPACITY BUILDING
ASIAN AMERICANS FOR EQUALITY108 NORFOLK STREET NEW YORK, NY 10002	13- 3187792	501(c)(3)	97,000				CAPACITY BUILDING
ATLANTA HOUSING ASSOCIATION OF NEIGHBORHOOD BASED633 PRYOR STREET SW ATLANTA,GA 30312	58- 2187131	501(c)(3)	19,219				CAPACITY BUILDING
ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHIP INC 235 PEACHTREET STREET NE ATLANTA, GA 30303	58- 1946632	501(c)(3)	147,347				CAPACITY BUILDING
ATLANTA REGIONAL HOUSING PARTNERS 2619 CHARLES GATE AVENUE DECATUR, GA 30030	27- 0344659	501(c)(3)	8,738				CAPACITY BUILDING
BICKERDIKE REDEVLOPMENT CORPORATION2550 WEST NORTH AVENUE CHICAGO,IL 606475216	23- 7087890	501(c)(3)	116,500				CAPACITY BUILDING
BRINSHORE 2800 CORPORATION (HAIRPIN LOFTS)666 DUNDEE ROAD NORTHBROOK,IL 60062	27- 1537300		22,500				CAPACITY BUILDING
BROADMOOR DEVELOPMENT CORPORATION4520 S DERBIGNY STREET NEW ORLEANS, LA 70125	20- 4885751	501(c)(3)	25,958				CAPACITY BUILDING
BUILDERS OF HOPE COMMUNITY DEVELOPMENT CORPORATION333 NORTH STEMMONS FREEWAY DALLAS,TX 75207	75- 2756681	501(c)(3)	36,364				CAPACITY BUILDING
CAMBA INC1720 CHURCH AVENUE BROOKLYN,NY 11226	11- 2480339	501(c)(3)	307,000				CAPACITY BUILDING
CAPITOL HILL HOUSING IMPROVEMENT PROGRAM1406 TENTH AVENUE SEATTLE,WA 98122	91- 0979968	PUBLIC DEV AUTH	25,000				CAPACITY BUILDING
CASS CORRIDOR NEIGHBORHOOD DEVELOPMENT CORPORATION3535 CASS AVENUE DETROIT,MI 48201	38- 2442238	501(c)(3)	35,000				CAPACITY BUILDING
CATHOLIC CHARITIES HOUSING SERVICES DIOCESE OF YAK5301 TIETON DRIVE YAKIMA,WA 98908	91- 1955616	501(c)(3)	25,000				CAPACITY BUILDING
CATHOLIC CHARITIES PROGRESS OF PEOPLE DEVELOPMENT191 JORALEMON STREET BROOKLYN,NY 11201	11- 2431586	501(c)(3)	100,000				CAPACITY BUILDING

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United S							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR URBAN COMMUNITY SERVICES INC198 EAST 121ST STREET NEW YORK, NY 10035	13- 3687891	501(c)(3)	14,529				CAPACITY BUILDING
CHRISTOPHER COMMUNITY INC990 JAMES STREET SYRACUSE, NY 13203	16- 1006727	501(c)(3)	16,809				CAPACITY BUILDING
CITIZENS' HOUSING AND PLANNING ASSOC18 TREMONT STREET BOSTON, MA 02108	04- 6138418	501(c)(3)	12,500				CAPACITY BUILDING
CLEVELAND HOUSING NETWORK INC2999 PAYNE AVENUE CLEVELAND,OH 44114	34- 1346763	501(c)(3)	494,569				CAPACITY BUILDING
CLIFFORD BEERS HOUSING INC1200 WILSHIRE BLVD STE 205 LOS ANGELES, CA 90017	95- 4485263	501(c)(3)	60,000				CAPACITY BUILDING
COBB HOUSING INC 268 LAWRENCE STREET MARIETTA, GA 30060	58- 2081893	501(c)(3)	37,993				CAPACITY BUILDING
COLOR COUNTRY COMMUNITY HOUSING INC139 NO 100 W ST GEORGE,UT 84770	87- 0617908	501(c)(3)	46,400				CAPACITY BUILDING
COLORADO HOUSING AND FINANCE AUTHORITY 1981 BLAKE STREET DENVER, CO 80202	84- 0676451	501(c)(3)	19,770				CAPACITY BUILDING
COLORADO HOUSING INCPO BOX 5918 PAGOSA SPRINGS, CO 81147	84- 0612665	501(c)(3)	15,000				CAPACITY BUILDING
COLUMBUS HOUSING PARTNERSHIP INC 562 EAST MAIN STREET COLUMBUS,OH 43215	31- 1208260	501(c)(3)	118,677				CAPACITY BUILDING
COMMUNITY DEVELOPMENT COLLABORATIVE OF GREATER COL185 S FIFTH STREET COLUMBUS, OH 43215	31- 1595197	501(c)(3)	30,000				CAPACITY BUILDING
COMMUNITY FOUNDATION OF CARROLL COUNTY INCPO BOX 1853 SYKESVILLE, MD 21784	52- 1865244	501(c)(3)	35,000				CAPACITY BUILDING
COMMUNITY HOUSING PARTNERSHIP280 TURK STREET SAN FRANCISCO,CA 94102	94- 3112338	501(c)(3)	117,500				CAPACITY BUILDING
COMMUNITY LEAGUE OF THE HEIGHTS INC 500 WEST 159TH STREET NEW YORK, NY 10032	13- 2564241	501(c)(3)	18,750				CAPACITY BUILDING
COMMUNITY PARTNERS FOR AFFORDABLE HOUSINGPO BOX 23206 TIGARD, OR 972813206	93- 1155559	501(c)(3)	62,106				CAPACITY BUILDING
DALLAS CITY HOMES 729 N BISHOP STREET DALLAS,TX 75208	75- 2305037	501(c)(3)	86,369				CAPACITY BUILDING
DENVER HOUSING AUTHORITY777 GRANT STREET DENVER, CO 80203	84- 6002414	PUBLIC HSG AUTH	34,500				CAPACITY BUILDING
DETROIT SHOREWAY COMMUNITY DEV ORG6516 DETROIT AVENUE CLEVELAND, OH 44102	23- 7376130	501(c)(3)	10,000				CAPACITY BUILDING
DRUID HEIGHTS COMMUNITY DEVELOPMENT CORPORATION2140 MCCULLOH STREET BALTIMORE, MD 21217	52- 1021726	501(c)(3)	86,548				CAPACITY BUILDING
EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATION310 8TH STREET OAKLAND,CA 94607	51- 0171851	501(c)(3)	15,954				CAPACITY BUILDING

Form 990,Schedule	I, Part II, G (b) EIN	rants and Ot	her Assistan	ce to Govern	I	Organizations (g) Description	(h) Purpose of
of organization or government	(D) EIN	section if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	of non-cash assistance	grant or assistance
EAST LA COMMUNITY CORPORATION530 SOUTH BOYLE AVENUE LOS ANGELES, CA 90033	95- 4531076	501(c)(3)	124,558		othery		CAPACITY BUILDING
EDEN HOUSING INC 22645 GRAND STREET HAYWARD, CA 94541	23- 1716750	501(c)(3)	75,000				CAPACITY BUILDING
EMERALD DEVELOPMENT & ECONOMIC NETWORK7812 MADISON AVENUE CLEVELAND, OH 44102	34- 1667990	501(c)(3)	6,382				CAPACITY BUILDING
EMPIRE HOMES OF MARYLAND INC 1800 N CHARLES STREET BALTIMORE, MD 21201	20- 3521473	501(c)(3)	55,000				CAPACITY BUILDING
ENTERPRISE COMMUNITY LOAN FUND10227 WINCOPIN CIRCLE SUITE 500 COLUMBIA, MD 21044	52- 0192004	501(c)(3)	5,513,750				CAPACITY BUILDING
ENTERPRISE HOME OWNERSHIP PARTNERS INC 315 W 9TH ST SUITE 801 LOS ANGELES, CA 90015	31- 1737642	501(c)(3)	300,000				CAPACITY BUILDING
ENTERPRISE LOUISIANA LOAN FUND INC10227 WINCOPIN CIRCLE COLUMBIA, MD 21044	47- 1718653	501(c)(3)	197,887				CAPACITY BUILDING
FAMICOS FOUNDATION INC 1325 ANSEL ROAD CLEVELAND, OH 44106	34- 1053534	501(c)(3)	135,072				CAPACITY BUILDING
FAR SW-SE CDC 3939 SOUTH CAPITOL STREET SW WASHINGTON, DC 20032	52- 2134061	501(c)(3)	25,500				CAPACITY BUILDING
FARMWORKER HOUSING DEVELOPMENT CORPORATION1274 5TH STREET 1A WOODBURN, OR 97071	93- 1055994	501(c)(3)	50,000				CAPACITY BUILDING
FORDHAM BEDFORD HOUSING CORPORATION2751 GRAND CONCOURSE BRONX,NY 10468	13- 3010578	501(c)(3)	64,500				CAPACITY BUILDING
FOUNDATION COMMUNITIES INC 3036 SOUTH 1ST STREET AUSTIN,TX 78704	74- 2563260	501(c)(3)	25,000				CAPACITY BUILDING
FULTON COUNTY- CITY OF ATLANTA LAND BANK AUTHORITY34 PEACHTREE STREET ATLANTA, GA 30303	58- 2119754	501(c)(3)	17,587				CAPACITY BUILDING
GEORGIA STATE TRADE ASSOCIATION OF NONPROFIT DEVEL 260 PEACHTREE STREET ATLANTA, GA 30303	58- 2661528	501(c)(3)	10,000				CAPACITY BUILDING
GREATER ROCHESTER HOUSING PARTNERSHIP183 E MAIN STREET ROCHESTER, NY 14604	16- 1399793	501(c)(3)	53,594				CAPACITY BUILDING
GREENSPACE NCR PO BOX 42676 WASHINGTON, DC 20015	52- 2141752	501(c)(3)	64,905				CAPACITY BUILDING
GULF COAST HOUSING PARTNERSHIP INC 1610-A ORETHA CASTLE HALEY BOULEVAR NEW ORLEANS, LA 70113	20- 4216595	501(c)(3)	95,000				CAPACITY BUILDING
HABITAT FOR HUMANITY OF THE CHESAPEAKE INC 3741 COMMERCE DRIVE BALTIMORE, MD 212271664	52- 1226188	501(c)(3)	80,705				CAPACITY BUILDING
HALLMARK COMMUNITY SERVICES1242 MARKET STREET SAN FRANCISCO, CA 94102	14- 1870357	501(c)(3)	20,000				CAPACITY BUILDING
HISTORIC EAST BALTIMORE COMMUNITY ACTION COALITION1212 N WOLFE STREET BALTIMORE, MD 21213	52- 1903732	501(c)(3)	19,625				CAPACITY BUILDING

Form 990,Schedule	I, Part II, G	rants and Ot	her Assistan	ce to Goverr	ments and	Organizations	in the United St
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOUSING ASSISTANCE COUNCIL1025 VERMONT AVENUE NW WASHINGTON, DC 20005	52- 0939288	PUBLIC HSG AUTH	109,738		ou.e.,		CAPACITY BUILDING
HOUSING AUTHORITY OF THE CITY OF MERIDEN22 CHURCH STREET MERIDEN,CT 06451	06- 6000410	501(c)(3)	25,000				CAPACITY BUILDING
HOUSING DEVELOPMENT CENTER847 NE 19TH AVENUE PORTLAND, OR 97232	93- 1116265	501(c)(3)	7,601				CAPACITY BUILDING
HOUSING DEVELOPMENT CORPORATION MIDATLANTIC439 EAST KING STREET LANCASTER, PA 17602	23- 1861343	501(c)(3)	31,870				CAPACITY BUILDING
HOUSING RESOURCES GROUP 1651 BELLEVUE AVENUE SEATTLE,WA 98122	91- 1116960	501(c)(3)	25,000				CAPACITY BUILDING
HUMAN SOLUTIONS INC12350 SE POWELL BOULEVARD PORTLAND, OR 97236	93- 0977166	501(c)(3)	24,405				CAPACITY BUILDING
INTERIM COMMUNITY DEVELOPMENT ASSOC310 MAYNARD AVENUE SOUTH SEATTLE, WA 98104	91- 1071277	501(c)(3)	51,400				CAPACITY BUILDING
JOHENNING BAPTIST CHURCH DBA TEMPLE OF PRAISE700 SOUTHERN AVENUE SE WASHINGTON, DC 20032	52- 1130560	501(c)(3)	15,000				CAPACITY BUILDING
JUBILEE BALTIMORE INC1228 N CALVERT STREET BALTIMORE, MD 21202	52- 1222237	501(c)(3)	57,500				CAPACITY BUILDING
JUBILEE HOUSING INC1640 COLUMBIA ROAD NW WASHINGTON, DC 20009	52- 0986261	501(c)(3)	117,994				CAPACITY BUILDING
LA PLATA HOMES FUND701 CAMINO DEL RIO STREET DURANGO,CO 81301	80- 0266636	501(c)(3)	28,643				CAPACITY BUILDING
LINC HOUSING CORPORATION110 PINE AVENUE SUITE 500 LONG BEACH,CA 90802	33- 0578620	501(c)(3)	86,000				CAPACITY BUILDING
LITTLE TOKYO SERVICE CENTER CDC231 EAST THIRD STREET LOS ANGELES, CA 90013	95- 3451280	501(c)(3)	77,000				CAPACITY BUILDING
LOCAL INITIATIVES SUPPORT CORPORATION501 SEVENTH AVENUE NEW YORK, NY 10018	13- 3030229	501(c)(3)	34,300				CAPACITY BUILDING
LOS ANGELES HOUSING PARTNERSHIP INC 1200 WILSHIRE BOULEVARD LOS ANGELES, CA 90017	95- 4238596	501(c)(3)	30,000				CAPACITY BUILDING
LOWINCOME HOUSING INSTITUTE2407 FIRST AVE SUITE 200 SEATTLE, WA	94- 3155150	501(c)(3)	51,823				CAPACITY BUILDING
981211311 MANNA INC828 EVARTS STREET NE WASHINGTON, DC 20018	52- 1260698	501(c)(3)	67,823				CAPACITY BUILDING
MERCY HOUSING & HUMAN DEVELOPMENT INC 1010 FORD STREET GULFPORT, MS 39507	72- 1354070	501(c)(3)	40,000				CAPACITY BUILDING
MERCY HOUSING CALIFORNIA1360 MISSION STREET SAN FRANCISCO, CA 94103	94- 3081666	501(c)(3)	36,768				CAPACITY BUILDING
MERCY HOUSING INC SOUTHEAST621 NORTH AVENUE NE ATLANTA, GA 303082841	56- 1993872	501(c)(3)	45,780				CAPACITY BUILDING

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MI CASA INC6230 3RD STREET NW WASHINGTON, DC 20011	52- 1796840	501(c)(3)	17,383				CAPACITY BUIDLING
MISSISSIPPI STATE UNIVERSITY425 DIVISION STREET BILOXI,MS 39530 NATIONAL	64- 6000819	501(c)(3)	33,000				CAPACITY BUIDLING
AFFORDABLE HOUSING TRUST 2335 NORTH BANK DRIVE COLUMBUS,OH 43220	52- 1450306	501(c)(3)	8,355				CAPACITY BUIDLING
NATIONAL ASSOCIATION FOR LATINO COMMUNITY ASSET BU1313 GUADALUPE STREET SAN ANTONIO,TX 78207	20- 0774672	501(c)(3)	28,489				CAPACITY BUIDLING
NATIONAL HOUSING CONFERENCE INC 1801 K STREET NW WASHINGTON, DC 20006	53- 0208180	501(c)(3)	7,898				CAPACITY BUIDLING
NATIONAL HOUSING TRUST1101 30TH STREET NW WASHINGTON, DC 20007	52- 1477599	501(c)(3)	126,098				CAPACITY BUIDLING
NATIONAL URBAN LEAGUE120 WALL STREET NEW YORK, NY 10005	13- 1840489	501(c)(3)	12,400				CAPACITY BUIDLING
NEIGHBORHOOD HOUSING SERVICES OF NEW ORLEANS INC4528 FRERET STREET NEW ORLEANS, LA 70115	72- 0801513	501(c)(3)	45,000				CAPACITY BUIDLING
NEIGHBORHOOD PROGRESS INC1956 WEST 25 STREET CLEVELAND,OH 44113	34- 1611055	501(c)(3)	68,206				CAPACITY BUIDLING
NEW ORLEANS NEIGHBORHOOD DEVELOPMENT FOUNDATION1429 SOUTH RAMPART STREET NEW ORLEANS, LA	58- 1681468	501(c)(3)	21,008				CAPACITY BUIDLING
70113 OFFICE OF RURAL & FARMWORKER HOUSING1400 SUMMITVIEW AVE 203	91- 1218499	501(c)(3)	40,484				CAPACITY BUIDLING
PALLADIA INC2006 MADISON AVENUE NEW YORK, NY 10035	23- 7089380	501(c)(3)	410,830				CAPACITY BUIDLING
PATHSTONE CORPORATION400 EAST AVENUE ROCHESTER, NY 14607	16- 0984913	501(c)(3)	129,493				CAPACITY BUIDLING
PEOPLES HOMESTEADING GROUP INC410 EAST NORTH AVENUE BALTIMORE, MD 212025904	52- 1317246	501(c)(3)	93,000				CAPACITY BUIDLING
PHIONE TRINITY DRIVE EAST DILLSBURG, PA 170198522	23- 1381404	501(c)(3)	110,000				CAPACITY BUIDLING
POHL REAL ESTATE LLC3571 STONE RIDGE DRIVE DOUGLASVILLE,GA 30134	26- 4739651		35,000				CAPACITY BUIDLING
PROJECT FOR PRIDE IN LIVING INC1035 EAST FRANKLIN AVENUE MINNEAPOLIS, MN 55404	23- 7232208	501(c)(3)	22,000				CAPACITY BUIDLING
PROVIDENCE COMMUNITY HOUSING1050 SOUTH JEFFERSON DAVIS PARKWAY NEW ORLEANS, LA 70125	20- 4627275	501(c)(3)	478,783				CAPACITY BUIDLING
PROVIDENCE HOUSING DEVELOPMENT CORP 1136 BUFFALO RD ROCHESTER, NY 14624	22- 3311544	501(c)(3)	51,001				CAPACITY BUIDLING
RENAISSANCE NEIGHBORHOOD DEVELOPMENT CORPORATION4162 CANAL STREET NEW ORLEANS, LA 70119	20- 8947208	501(c)(3)	160,288				CAPACITY BUIDLING

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RESOURCES FOR COMMUNITY DEVELOPMENT2730 TELEGRAPH AVENUE BERKELEY, CA 94705	94- 2952466	501(c)(3)	40,749				CAPACITY BUIDLING
RESOURCES FOR RESIDENTS AND COMMUNITIES OF GEORGIAPO BOX 89082 ATLANTA,GA 30312	58- 1869105	501(c)(3)	71,103				CAPACITY BUIDLING
ROC USA LLC7 WALL STREET CONCORD, NH 03301	35- 2319441	501(c)(3)	149,250				CAPACITY BUIDLING
SATELLITE HOUSING 1521 UNIVERSITY AVENUE BERKELEY, CA 94703	94- 3031375	501(c)(3)	22,614				CAPACITY BUIDLING
SELFHELP COMMUNITY SERVICES INC520 EIGHTH AVENUE NEW YORK, NY 10018	13- 1624178	501(c)(3)	46,700				CAPACITY BUIDLING
SKID ROWHOUSING TRUST1317 EAST SEVENTH STREET LOS ANGELES, CA 90021	95- 4205316	501(c)(3)	213,459				CAPACITY BUIDLING
SOUTH COUNTY COMMUNITY BUILDERS7455 CARMEL STREET GILROY, CA 95020	77- 0395998	501(c)(3)	9,900				CAPACITY BUIDLING
ST AMBROSE HOUSING AID CENTER321 E 25TH ST BALTIMORE, MD 21218	52- 1729460	501(c)(3)	10,000				CAPACITY BUIDLING
SUMMECH COMMUNITY DEV CORP633 PRYOR STREET SW ATLANTA,GA 30312	58- 1895918	501(c)(3)	88,020				CAPACITY BUIDLING
SUPPORTIVE HOUSING COALITION OF NEW MEXICOPO BOX 27459 ALBUQUERQUE,NM 87125	85- 0439315	501(c)(3)	35,000				CAPACITY BUIDLING
TENDERLOIN NEIGHBORHOOD DEVELOP CORP201 EDDY STREET SAN FRANCISCO, CA 94102	94- 2761808	501(c)(3)	50,000				CAPACITY BUIDLING
THE BON SECOURS OF MARYLAND FOUNDATION INC26 NORTH FULTON AVENUE BALTIMORE, MD 21223	52- 1732800	501(c)(3)	52,337				CAPACITY BUIDLING
UNIVERSITY NEIGHBORHOOD HOUSING PROGRAM 2751 GRAND CONCOURSE BRONX,NY 104683001	13- 3206603	501(c)(3)	68,234				CAPACITY BUIDLING
URBAN LAND CONSERVANCY305 PARK AVENUE WEST DENVER,CO 80205	20- 0405066	501(c)(3)	59,230				CAPACITY BUIDLING
URBAN LAND INSTITUTE SEATTLE 700 5TH AVENUE SEATTLE, WA 98104	53- 0159845	501(c)(3)	15,000				CAPACITY BUIDLING
VISION OF VICTORY COMMUNITY DEVELOPMENT CORPORATIO 2443 AINGER PLACE SE WASHINGTON, DC 20020	75- 3205094	501(c)(3)	10,000				CAPACITY BUIDLING
WASHINGTON REGIONAL ASSOCIATION OF GRANTMAKERS1400 16TH STREET NW WASHINGTON, DC 20036	52- 1756853	501(c)(3)	20,000				CAPACITY BUIDLING
WEST HOLLYWOOD COMMUNITY HOUSING CORPORATION7530 SANTA MONICA BOULEVARD WEST HOLLYWOOD, CA 90046	95- 4122368	501(c)(3)	53,200				CAPACITY BUIDLING
WILLIAM C SMITH & COMPANY1100 NEW JERSEY AVENUE SE WASHINGTON, DC 20003	07- 4808007		18,750				CAPACITY BUIDLING
WOMEN'S HOUSING COALITION119 EAST 25TH STREET BALTIMORE, MD 21218	52- 1189812	501(c)(3)	14,709				CAPACITY BUIDLING

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WYOMING HOUSING NETWORK300 S WOLCOTT CASPER,WY 826012861	75- 3155083	501(c)(3)	33,933				CAPACITY BUIDLING
UMPQUA COMMUNITY DEVELOPMENT CORPORATION605 SE KANE STREET ROSEBURG,OR 97470	93- 1057208	501(c)(3)	25,000				CAPACITY BUIDLING
NRG SOLUTIONS LLC6 FANEUIL HALL MARKETPLACE BOSTON,MA 02109	26- 4771056		947,574				CAPACITY BUILDING
TECHNOLOGY ACCESS FOUNDATION4436 RAINIER AVE S SUITE B SEATTLE, WA 98118	91- 1731833		275,000				CAPACITY BUILDING
MERCY HOUSING INC120 S LASALLE CHICAGO,IL 60603	47- 0646706	501(c)(3)	250,000				CAPACITY BUILDING
THE SAN FRANCISCO FOUNDATION225 BUSH STREET STE 500 SAN FRANCISCO, CA 94104	01- 0679337		375,000				CAPACITY BUILDING
COMMUNITY SERVICES OF ARIZONA INC650 N ARIZONA AVENUE CHANDLER, AZ 85225	23- 7181540		149,500				CAPACITY BUILDING
HOLLYWOOD COMMUNITY HOUSING CORPORATION5020 SANTA MONICA BLVD LOS ANGELES, CA 90029	95- 4198215		145,000				CAPACITY BUILDING
NEW COMMUNITY HOMES LLC1101 30TH STREET NW WASHINGTON, DC 20007	52- 1361024		133,342				CAPACITY BUILDING
BUILDERS OF HOPE INC310 N HARRINGTON STREET RALEIGH, NC 27603	20- 5724075	501(C)(3)	132,044				CAPACITY BUILDING
FRONT RANGE ECONOMIC STRATEGY CENTER 140 SHERIDAN BOULEVARD DENVER, CO 80226	26- 0019190		130,000				CAPACITY BUILDING
MERCY HOUSING LAKEFRONT120 SOUTH LASALLE STREET CHICAGO,IL 60603	36- 3453183	501(C)(3)	106,250				CAPACITY BUILDING
ENTERPRISE HOUSING CORPORATION312 N MARTIN LUTHER KING JR BOULE BALTIMORE, MD 21201	52- 1888775		100,000				CAPACITY BUILDING
THE BRIDGE INC248 W 108TH STREET NEW YORK, NY 10025	13- 1919799	501(C)(3)	96,000				CAPACITY BUILDING
SRO HOUSING CORPORATION354 S SPRING STREET LOS ANGELES, CA 90013	95- 3909215		86,500				CAPACITY BUILDING
CENTER FOR COMMUNITY PROGRESS421 GARLAND STREET FLINT,MI 48503	27- 0718458		75,000				CAPACITY BUILDING
HOUSING COLORADO225 EAST 16TH AVENUE DENVER,CO 80203	84- 1234119	501(c)(3)	65,000				CAPACITY BUILDING
WESLEY HOUSING DEVELOPMENT CORPORATION5515 CHEROKEE AVENUE ALEXANDRIA, VA 22312	51- 0155779		57,500				CAPACITY BUILDING
CITY WIDE COMMUNITY DEVELOPMENT CORPORATION3440 SOUTH POLK STREET DALLAS,TX 75224	75- 2928514	501(c)(3)	54,350				CAPACITY BUILDING
COMMUNITY ASSISTED TENANT CONTROLLED HOUSING INC121 SIXTH AVENUE NEW YORK, NY 10013	13- 3706959		50,000				CAPACITY BUILDING

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PEP HOUSING951 PETALUMA BOULEVARD S PETALUMA,CA 94952	94- 2565270		50,000				CAPACITY BUILDING
RECONNECTING AMERICA1707 L STREET NW WASHINGTON, DC 20036	52- 2020542		50,000				CAPACITY BUILDING
WESTHABINC85 EXECUTIVE BOULEVARD ELMSFORD,NY 10523	06- 1064281		50,000				CAPACITY BUILDING
B'NAI B'RITH HOUSING NEW ENGLAND INC34 WASHINGTON STREET BOSTON,MA 02135	56- 2423180		50,000				CAPACITY BUILDING
INGLESIDE HOMES INC1005 N FRANKLIN STREET WILMINGTON, DE 19806	51- 0113243		50,000				CAPACITY BUILDING
JAMAICA PLAIN NEIGHBORHOOD DEVELOPMENT CORPORATION31 GERMANIA STREET JAMAICA PLAIN, MA 02130	04- 2652919		50,000				CAPACITY BUILDING
HEALTHY NEIGHBORHOODS INC2 E READ STREET BALTIMORE, MD 21202	30- 0272104	501(c)(3)	50,000				CAPACITY BUILDING
HABITAT FOR HUMANITY BAY- WAVELAND AREA INC 414 HWY 90 BAY ST LOUIS, MS 39520	26- 1325894		50,000				CAPACITY BUILDING
CUYAHOGA COUNTY LAND REUTILIZATION CORPORATION323 LAKESIDE AVENUE W CLEVELAND, OH 44113	26- 4753241		49,986				CAPACITY BUILDING
BELLINGHAM HOUSING AUTHORITY 208 UNITY STREEET BELLINGHAM, WA 98227	91- 0816170		45,000				CAPACITY BUILDING
NEIGHBORHOOD HOUSING SERVICES OF SOUTH FLORIDA 300 NW 12 AVENUE MIAMI,FL 33128	59- 1845761		45,000				CAPACITY BUILDING
MONTGOMERY HOUSING PARTNERSHIP INC 12200 TECH ROAD SILVER SPRING, MD 20904	52- 1631939		45,000				CAPACITY BUILDING
CENTRAL DALLAS COMMUNITY DEVELOPMENT CORPORATION511 N AKARD DALLAS,TX 75218	75- 2948028		44,500				CAPACITY BUILDING
EAST DALLAS COMMUNITY ORGANIZATION4610 JUNIUS STREET DALLAS,TX 75246	31- 1513768		41,528				CAPACITY BUILDING
HOUR CHILDREN INC 36-11A 12TH STREET LONG ISLAND CITY, NY 11106	13- 3647412	501(c)(3)	39,013				CAPACITY BUILDING
SUSTAINABLE NEIGHBORHOOD DEVELOPMENT STRATEGIESIN477 WINDSOR STREET SW STE 304 ATLANTA,GA 30312	26- 4009403		38,851				CAPACITY BUILDING
HOMEOWNER'S REHABINC280 FRANKLIN STREET CAMBRIDGE, MA 02139	04- 2519279		37,000				CAPACITY BUILDING
DOWNTOWN EMERGENCY SERVICE CENTER515 THIRD AVENUE SEATTLE, WA 98104	91- 1275815		36,700				CAPACITY BUILDING
EAH INC2169 E FRANCISCO BOULEVARD SAN RAFAEL,CA 94904	94- 1699153		36,595				CAPACITY BUILDING
SHERIDAN LIMITED PARTNERSHIP1100 NEW JERSEY AVENUE SE WASHINGTON, DC 20003	27- 1368425		34,863				CAPACITY BUILDING

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CLEVELAND MUSEUM OF NATURAL HISTORY 1 WADE OVAL CLEVELAND, OH 44106	34- 0714338		34,000				CAPACITY BUILDING
PARK HEIGHTS RENAISSANCE INC 4151 PARKS HEIGHTS AVENUE BALTIMORE, MD 21215	77- 0673126		33,210				CAPACITY BUILDING
COMMUNITY CORPORATION OF SANTA MONICA1423 SECOND STREET SANTA MONICA,CA 90401	95- 3795161		33,038				CAPACITY BUILDING
BELAIR-EDISON NEIGHBORHOODS INC 3412 BELAIR ROAD BALTIMORE, MD 21213	52- 1755185		31,000				CAPACITY BUILDING
FLAGSHIP UNITED COMMUNITY DEVELOPMENT CORPORATION640 HIGHWAY 90 WAVELAND,MS 39576	20- 5769751		30,885				CAPACITY BUILDING
HEARTLAND HOUSING INC208 S LASALLE	36- 3642952		30,699				CAPACITY BUILDING
CHICAGO,IL 60604 STEUBEN CHURCHPEOPLE AGAINST POVERTY16 WEST WILLIAM STREET BATH,NY 14810	16- 1166737		30,530				CAPACITY BUILDING
CARRFOUR SUPPORTIVE HOUSING INC1398 SOUTHWEST 1ST STREET MIAMI,FL 33135	65- 0387766		30,149				CAPACITY BUILDING
COMMUNITYWORKS NORTH DAKOTA200 1ST AVENUE NW MANDAN,ND 58554	45- 0440770		30,000				CAPACTIY BUILDING
THC AFFORDABLE HOUSING INC5101 16TH STREET NW WASHINGTON, DC 20011	52- 1675958		30,000				CAPACITY BUILDING
COMMUNITY RESOURCE & HOUSING DEVELOPMENT CORP 7305 LOWELL BOULEVARD WESTMINSTER,CO 80030	23- 7102834		30,000				CAPACITY BUILDING
RENAISSANCE VILLAGE LDHA LLC 1100 CORPORATE OFFICE DRIVE MILFORD,MI 48381	27- 4317652		29,500				CAPACITY BUILDING
UNITED WAY FOR THE GREATER NEW ORLEANS AREA2515 CANAL STREET NEW ORLEANS, LA 70119	72- 0471369		28,729				CAPACITY BUILDING
BAY AREA WOMEN COALITION INC1700 JESSIE STREET MOBILE,AL 36617	63- 1195628		26,594				CAPACITY BUILDING
NEW MEDIA ADVOCACY PROJECT 1878 COUNTY ROUTE 21 VALATIE, CA 12184	90- 0451693		25,500				CAPACITY BUILDING
THE COMMUNITY BUILDERS INC135 S LASALLE STREET CHICAGO,IL 60603	04- 2324773		25,000				CAPACITY BUILDING
THE DALLAS FOUNDATION900 JACKSON STREET DALLAS,TX 75202	75- 2890371		25,000				CAPACITY BUILDING
CABRILLO ECONOMIC DEVELOPMENT CORPORATION702 COUNTY SQUARE DRIVE VENTURA,CA 93003	95- 3681521		25,000				CAPACITY BUILDING
SO OTHERS MIGHT EAT71 O STREET NW WASHINGTON, DC 20001	23- 7098123		25,000				CAPACITY BUILDING
CAPITAL HILL HOUSING1406 10TH AVENUE SUITE 101 SEATTLE,WA 98122	91- 2032882		25,000				CAPACITY BUILDING

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PIEDMONT ENVIRONMENTAL COUNCIL FISCAL AGENTPO BOX 460 WARRENTON, VA 20188	54- 0935569		25,000				CAPACITY BUILDING
HOUSING VISIONS UNLIMITED1201 E FAYETTE STREET STE 26 SYRACUSE, NY 13210	16- 1598458		25,000				CAPACITY BUILDING
EAST BAY HOUSING ORGANIZATIONS538 - 9TH STREET OAKLAND,CA 94607	94- 3232405		25,000				CAPACITY BUILDING
AVESTA HOUSING DEVELOPMENT CORPORATION307 CUMBERLAND AVENUE PORTLAND, ME 04101	01- 0315296		25,000				CAPACITY BUILDING
PROJECT HOME1515 FAIRMOUNT AVENUE PHILADELPHIA, PA 19130	23- 2555950		25,000				CAPACITY BUILDING
FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA1720 BIG LAKE ROAD CLOQUET,MN 55720	41- 0965719		25,000				CAPACITY BUILDING
ST VINCENT DE PAUL SOCIETY OF LANE COUNTY VOCATIONAL SERVICE EUGENE, OR 97402	93- 0454786		25,000				CAPACITY BUILDING
NEW DESTINY HOUSING CORPORATION12 W 37TH STREET NEW YORK, NY 10018	13- 3778489		25,000				CAPACITY BUILDING
INTERFAITH HOUSING DEVELOPMENT CORPORATION103 GAY STREET DENTON, MD 21629	52- 1648513		25,000				CAPACITY BUILDING
UNITY PROPERTIES INC26 N FULTON AVENUE BALTIMORE, MD 21223	52- 1857768		25,000				CAPACITY BUILDING
OGLALA SIOUX TRIBE PARTNERSHIP FOR HOUSING INCPO BOX 3001 PINE RIDGE, SD 57770	46- 0451277		25,000				CAPACITY BUILDING
GODDARD RIVERSIDE COMMUNITY CENTER 593 COLUMBUS AVENUE NEWYORK,NY 10024	13- 1893908		25,000				CAPACITY BUILDING
CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORPORATION587 WASHINGTON STREET DORCHESTER, MA 02124	04- 2752507		25,000				CAPACITY BUILDING
THE OAKLAND COMMUNITY LAND TRUST672 13TH STREET OAKLAND,CA 94612	32- 0285788		25,000				CAPACITY BUILDING
LIFETIME HOUSING GROUP INC13091 BENEDICT DRIVE DILLSBORO,IN 47018	35- 1341343		25,000				CAPACITY BUILDING
GM UPTOWN TOWER APARTMENTS LLC710 NW 14TH AVENUE PORTLAND, OR 97209	26- 2209469		25,000				CAPACITY BUILDING
MENTAL HEALTH SERVICES FOR HOMELESS PERSONS INC1744 PAYNE AVENUE CLEVELAND, OH 44114	34- 1607734		25,000				CAPACITY BUILDING
THE WARTBURG HOME OF THE EVANGELICAL LUTHERAN CHUR1 WARTBURG PLACE MT VERNON,NY 10552	13- 1740497		25,000				CAPACITY BUILDNIG
MERCY HOUSING NORTHWEST2505 THIRD AVENUE SEATTLE, WA 98121	91- 1546525		25,000				CAPACITY BUILDING
SERVICES FOR THE UNDERSERVED INC 305 SEVENTH AVENUE 10TH FL NEW YORK, NY 10001	91- 1918247		25,000				CAPACITY BUILDING

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COMMON GROUND COMMUNITIES INC 14 EAST 28TH STREET NEW YORK, NY 10016	27- 3523909		25,000				CAPACITY BUILDING
COMMUNITY CENTER FOR EDUCATION RESULTS1200 FIFTH AVENUE SEATTLE, WA 98101	27- 1667560		25,000				CAPACITY BUILDING
GARRETT COUNTY CAC104 E CENTER STREET OAKLAND, CA 21550	52- 0820662		24,999				CAPACITY BUILDING
NOGALES COMMUNITY DEVELOPMENT CORPORATION124 N TERRACE AVENUE NOGALES, AZ 85621	86- 0878561		24,975				CAPACITY BUILDINKG
WHITE EARTH RESERVATION TRIBAL COUNCILPO BOX 70 NAYTAHWAUSH, MN 56566	41- 1737979		24,898				CAPACITY BUILDING
ST BERNARD PROJECT8324 PARC PLACE CHALMETTE, LA 70043	26- 2189665		22,963				CAPACITY BUILDING
ROSE COMMUNITY DEVELOPMENT5215 SE DUKE STREET PORTLAND, OR 97206	94- 3144895		22,719				CAPACITY BUILDING
AUBURN UNIVERSITY104 DUDLEY HALL AUBURN,AL 36849	63- 6000724		22,439				CAPACITY BUILDING
CARITAS COMMUNITIES INC 25 BRAINTREE HILL OFFICE PARK BRAINTREE, MA 02184	04- 2875899		22,000				CAPACITY BUILDING
WESTERN MAINE COMMUNITY ACTION INCPO BOX 200 EAST WILTON, ME 04234	01- 0275156		21,843				CAPACITY BUILDING
WINDHAM & WINDSOR HOUSING TRUST INC68 BIRGE STREET BRATTLEBORO, VT 05301	22- 2878487		20,308				CAPACITY BUILDING
FAMILIES FORWARD INC405 SW 6TH STREET REDMOND, OR 97756	76- 0738741		20,034				CAPACITY BUILDING
CNT ENERGY2125 WEST NORTH AVENUE CHICAGO,IL 60647	36- 4443093		20,000				CAPACITY BUILDING
SOUTHEAST COMMUNITY DEVELOPMENT CORPORATION3700 EASTERN AVENUE BALTIMORE, MD 21224	52- 1034466		20,000				CAPACITY BUILDING
AQUINAS HOUSING CORPORATION1945 VYSE AVENUE BRONX,NY 10460	13- 3076810		20,000				CAPACITY BUILDING
NEW DIRECTIONS INC11303 WILSHIRE BOULEVARD LOS ANGELES, CA 90073	95- 4242745		19,660				CAPACITY BUILDING
COMMUNITY HOUSING OF MAINE INC309 CUMBERLAND AVENUE PORTLAND, ME 04101	01- 0490195		19,647				CAPACITY BUILDING
REAL ESTATE ALLIANCE PARTNERS LLC633 PRYOR STREET SW ATLANTA,GA 30312	27- 0354657		19,506				CAPACITY BUILDING
AFFORDABLE COMMUNITY ENVIRONMENTSPO BOX 61446 VANCOUVER, WA 98666	91- 1898061		18,546				CAPACITY BUILDING
TURTLE MOUNTAIN HOUSING AUTHORITYPO BOX 620 BELCOURT, ND 58316	45- 0282869		18,400				CAPACITY BUILDING

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH MISSISSIPPI HOUSING AND DEVELOPMENT CORP PO BOX 2099 GULFPORT,MS 39505	20- 5640452		18,366				CAPACITY BUILDING
CITY FIRST ENTERPRISES1436 U STREET NW WASHINGTON, DC 20009	52- 2101165		18,000				CAPACITY BUILDING
URBAN EDGE HOUSING CORPORATION1542 COLUMBUS AVENUE ROXBURY,MA 02119	22- 2483475		17,500				CAPACITY BUILDING
EAST OF THE RIVER CLERGY POLICE COMMUNITY PARTNERS4105 1ST STREET SE WASHINGTON, DC 20032	52- 2278623		16,875				CAPACITY BUILDING
NEW MEXICO COALITION TO END HOMELESSNESSPO BOX 865 SANTA FE,NM 87504	85- 0482896		16,736				CAPACITY BUILDING
N STREET VILLAGE INC1333 N STREET NW WASHINGTON, DC 20005	52- 1007373		16,000				CAPACITY BUILDING
HOMESTART INC9080 SPRINGBORO PIKE MIAMISBURG, OH 45342	31- 1244736		15,000				CAPACITY BUILDING
RUTHE & ISADORE FREED HOUSING CORPORATION400 E TUSCARAWAS STREET CANTON,OH 44702	34- 1871908		15,000				CAPACITY BUILDING
LATINO ECONOMIC DEVELOPMENT CORPORATION2316 18TH STREET NW WASHINGTON, DC 20009	52- 1749216		15,000				CAPACITY BUILDING
GREATER BALTIMORE AHC INC1501 SAINT PAUL STREET BALTIMORE, MD 21202	33- 1084573		15,000				CAPACITY BUILDING
MAXIMUM ACCESSIBLE HOUSING OF OHIO 11607 EUCLID AVENUE CLEVELAND, OH 44106	34- 1607289		15,000				CAPACITY BUILDING
WEINLAND PARK HOMES LLC5309 TRANSPORTATION BOULEVARD CLEVELAND, OH 44125	27- 3164623		15,000				CAPACITY BUILDING
THE URBAN INSTITUTE METROPOLITAN HOUSING COMMUNITIES WASHINGTON, DC 20037	52- 0880375		14,849				CAPACITY BUILDING
METROPOLITAN TENANTS ORGANIZATION2150 S CANALPORT CHICAGO,IL 60608	36- 3351193		14,340				CAPACITY BUILDING
CORPORATION FOR SUPPORTIVE HOUSING50 BROADWAY 17TH FLOOR NEW YORK, NY 10004	13- 3600232		173,587				CAPACITY BUILDING
NORTHWEST CHURCH FAMILY NETWORK INC 1151 NEW JERSEY AVENUE NW WASHINGTON, DC 20001	52- 1942747		13,767				CAPACITY BUILDING
HOUSING COUNSELING SERVICES2410 17TH STREET NW WASHINGTON, DC 20009	52- 0958568		13,000				CAPACITY BUILDING
COMMUNITY HOUSING INC5513 CONNECTICUT AVENUE NW WASHINGTON, DC 20015	52- 1804975		12,663				CAPACITY BUILDING
ENVIRONS RESIDENTIAL DESIGN & CONSTRUCTION LLC 1189 PONCE DE LEON AVENUE ATLANTA, GA 30306	58- 2660476		12,000				CAPACITY BUILDING
GREEN DOORS1503 S I-35 AUSTIN,TX 78768	74- 2582369		11,400				CAPACITY BUILDING

Form 990,Schedule	i, Part II, Gi	rants and Oti	ier Assistai	ice to Govern	nments and	organizations	in the United S
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOLDEN RULE PLAZA INC1100 NEW JERSEY AVENUE NW WASHINGTON, DC 20001	52- 1890029		10,000				CAPACITY BUILDING
CENTER CITY HOUSING CORPORATION105 1/2 W SUPERIOR STREET DULUTH, MN 55802	36- 3485584		10,000				CAPACITY BUILDING
FALLS CHURCH HOUSING CORPORATION330- B SOUTH VIRGINIA AVENUE FALLS CHURCH, VA 22046	52- 1253695		10,000				CAPACITY BUILDING
OREGON OPPORTUNITY NETWORK847 NE 19TH AVENUE PORTLAND, OR 97232	93- 1174536		10,000				CAPACITY BUILDING
PATH VENTURES340 NORTH MADISON AVENUE LOS ANGELES, CA 90004	20- 1892523		10,000				CAPACITY BUILDING
GREATER WASHINGTON URBAN LEAGUE2901 14TH STREET NW WASHINGTON, DC 20009	53- 0208981		7,580				CAPACITY BUILDING
THE MAYOR'S FUND TO ADVANCE NEW YORK CITY253 BROADWAY NEW YORK, NY 10007	13- 3783906		7,398				CAPACITY BUILDING
SILVER GARDENS I LLC5021 INDIAN SCHOOL ROAD NE ALBUQUERQUE,NM 87110	61- 1523368		6,600				CAPACITY BUILDING

DLN: 93493227008132

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization ENTERPRISE COMMUNITY PARTNERS INC **Employer identification number**

52-1231931

Pa	It I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement orprovision of all the expenses des			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organiza organization's CEO/Executive Director Check all		y			
	Compensation committee		Written employment contract			
	✓ Independent compensation consultant	<u> </u>	·			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization), Part VII	I, Section A, line $1 a$ with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	nt?	4a		No
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only r	nust comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b	Yes	
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7	Yes	
8	Were any amounts reported in Form 990, Part VII					
	subject to the initial contract exception described in Part III	in Kegs	section 53 4958-4(a)(3)/11 "Yes," describe			N a
_		ala a san U san	alla marananti an marandana di Sala Barati	8		No
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	ne rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Nume	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ	
See Additional Data Table								

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
schedule J	l' '	the supplemental nonqualified retirement plan amount is partially calculated based on the net income of the related organization as well as specific goals met by the employee
schedule j	part I, line 7	officers & key employees have a performance plan based on achieving certain financial targets and other individual performance criteria
schedule J	part I , Line 4b	charles werhane

Schedule J (Form 990) 2011

Software ID: Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
JEFFREY SCHAFFER	(1) (11)	175,402 0	29,767 0	1,047 0	15,587 0	3,346 0	225,149 0	0
Terrı L Ludwıg	(I) (II)	348,831 0	78,000 0	450 0	18,846 0	11,169 0	457,296 0	0
WILLIAM R FREY	(ı) (ıı)	233,702 0	46,000 0	1,647 0	18,846 0	2,876 0	303,071 0	0
CHRISTINE K CARTALES	(1) (11)	168,915 0	29,233 0	807 0	13,104 0	6,629 0	•	0
NAOMI BAYER	(ı) (ıı)	223,194 0	61,800 0	1,980 0	18,846 0	7,931 0	313,751 0	0
LORI CHATMAN	(ı) (ıı)	0 181,005	0 23,973	0 1,609	0 15,618	0 3,000	0 225,205	0
RICHARD GROSS	(ı) (ıı)	174,295 0	28,016 0	9,338 0	15,405 0	4,453 0	231,507 0	0
MARK MCDERMOTT	(ı) (ıı)	168,233 0	28,016 0	1,490 0	14,530 0	0	212,269 0	0
LAURA MCGRATH	(ı) (ıı)	126,887 0	11,907 0	467 0	9,613 0	3,472 0	152,346 0	0
MICHAEL MCNEELY	(ı) (ıı)	235,106 0	46,000 0	2,090 0	18,846 0	0	302,042	0
ABBY JO SIGAL	(ı) (ıı)	178,473 0	30,958 0	637 0	16,343 0	7,426 0	233,837	0
Alan Scott Anderson	(ı) (ıı)	144,279 0	10,000	1,593 0	0	5,721 0	161,593 0	0
ALAZNE SOLIS	(ı) (ıı)	225,631 0	69,525 0	657 0	18,597 0	10,947 0	325,357 0	0
FAITH E THOMAS	(ı) (ıı)	192,404 0	33,034 0	1,647 0	17,654 0	5,962 0	250,701 0	0
Matthew D Hoffman	(ı) (ıı)	145,235 0	5,000 0	300 0	6,346 0	8,932 0	165,813 0	0
Meaghan E VIkovic	(1) (11)	131,592 0	10,147 0	302 0	9,864 0	4,932 0	156,837 0	0
PAUL M CUMMINGS	(1) (11)	258,236 0	57,500 0	637 0	18,846 0	4,629 0	339,848 0	0
DANA L BOURLAND	(ı) (ıı)	171,739 0	14,008 0	300 0	13,654 0	1,561 0	201,262	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
AMALIA M KASTBERG	(1) (11)) 218,018) 0	3 20,748 0 0	450 0 0		4,932 0	2 262,254	
MICHELLE WHETTEN	(I) (II)) 139,980) 0	,	571		1,454 0	178,501 0	
DAVID CHARLES BOWERS	(I) (II)		21,250	280	1 ' 1	1,792		0 0
CHARLES WERHANE	(I) (II)		0 300,000	0 70,009	1	0 5,876	0 0 830,061	1
DORIS W KOO	(I) (II)			2,249	18,846 0	4,287	7 318,161	
Edward David Manekin	(I) (II)		7 11,577		10,901	6,429		
mary ann leonard	(I) (II)) 165,415) 0	,	1,290		3,022	2 210,458	
keith e fairey	(I) (II)		27,141	637	14,312	7,247	7 209,233	0
alex s avitabile	(I) (II)		13,133	· ·	-	3,556		1
jeanette l daymude	(I) (II)		12,614	1,022		3,876	176,724	I .
petra d montague	(I) (II)		11,907	651	•	2,927	7 164,515	0 0
karen lado	(I) (II)		22,063	679		8,343		I .
katherine w swenson	(I) (II)		11,050	313	9,830	10,948	159,527	I .
edward d rosenthal	(I) (II)		11,050	3,454	· ·	3,093	163,078	I .
anthony joseph dispigno	(I) (II)			690	'	1		1
robert s grossinger	(I) (II)		6,623	1,290		0 0	188,316	I .
Melinda J Pollack	(I) (II)		9,630			8,502	155,281	1
oyeshola olatoye	(I) (II)		36,975	5 574	13,473	12,424	199,043	

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)		
jacqueline waggoner	(ı) (ıı)	132,818	33,750	536	12,018	2,292	181,414		
dmıtrı wasılewskı	(I) (II)	130,563	30,283	262	6,662	3,586	171,356		
jon searles	(I) (II)	151,831	2,000	607	9,563	982	164,983		

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As Filed Data -

DLN: 93493227008132

Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

	of the organization PRISE COMMUNITY PARTNERS INC							Eı	mployer id	lent if ica	tion numbe	r
									2-12319			
Part 1											4.0.1	
	Complete if the organizat	ion ans	werea "	Yes" on For	m 990, i	art IV, line 25a d	or 250, 0	or Form	990-EZ, I	art V, II		(c)
1	(a) Name of disq	ualıfıed	person			(b) Desc	cription	of trans	action			ected?
											Yes	No
					<u> </u>							
	nter the amount of tax imposection 4958		_			disqualified pers		_	ear under ••••••••••••••••••••••••••••••••••••	s ——		
3 E	nter the amount of tax, if any	, on line							🕨	\$		
Part	Loans to and/or F		Tetovo	stad Dave								
Part	Complete if the organiz), Part IV, line 26	, or Forr	n 990-E	Z, Part V	, line 38;	ā	
	·		oan to				ĺ		(f)			
(a) Na	me of interested person and	or fro	m the	l l		(d)Balance due	(e) In default?		Approved by board or		(g)Written agreement?	
	purpose	organı	zation?	principal a	amount	(d)Balance due			committee?		agreement.	
		То	From				Yes	No	Yes	No	Yes	No
								1	1			
								 				
								+	1			
Total					▶ \$							
Part I	Grants or Assistar Complete if the orga						/ line 3	7				
						een interested per					_	
	(a) Name of interested pers	on				ganızatıon		(c) A m	ount of gr	ant or ty	pe of assis	tance

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	ni alisweled les oil	TOTTI 330, Part IV, III	ie 20a, 20b, 01 20c.			
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	arıng of zatıon's nues?	
	organization			Yes	No	
(1) paul brophy	former trustee	139,435	consulting		Νo	

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation	n
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Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493227008132

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number

					52-1231931			
Pai	Types of Property							
	Aut. Maulia af aut	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	Method of contribution			
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	Х	8	37,960	FMV ON DATE AC	QUIRE	D	
0	Securities—Closely held stock .							
1	Securities—Partnership, LLC, or trust interests							
2	Securities—Miscellaneous							
.3	Qualified conservation contribution—Historic structures							
4	Qualified conservation contribution—Other							
5	Real estate—Residential .							
6	Real estate—Commercial							
7	Real estate—O ther							
8	Collectibles							
9	Food inventory							
0	Drugs and medical supplies .							
1	Taxıdermy							
2	Historical artifacts							
3	Scientific specimens							
4	Archeological artifacts							
5	O ther ► ()							
6	O ther ▶()							
7	O ther ►()							
8	O ther ► ()							
9	Number of Forms 8283 received for which the organization compl				29			0
							Yes	No
0a	During the year, did the organiza							
	must hold for at least three year	s from the	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
1	Does the organization have a gif	t acceptan	ce policy that requires the	review of any non-standard	contributions?	31		Νo
2a	Does the organization hire or us contributions?	e third part • • •	les or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
b	If "Yes," describe in Part II							
	If the organization did not report	: revenues i	n column (c) for a type of p	roperty for which column (a) is checked.			
	describe in Part II		(-,,,, -	, , ,				

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
use of third parties to sell non-cash	· · · · · ·	FINANCIAL INSTITUTIONS ARE USED TO REDEEM/SELL DONATED STOCK
items		DONATED STOCK

Schedule M (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization ENTERPRISE COMMUNITY PARTNERS INC **Employer identification number**

52-1231931

ldentifier	Return Reference	Explanation
governance	part vi section B question 11B	The entire Board is given a copy of the 990 return to review prior to filing the 990 return. The Audit Committee of the Board reviews and approves the 990 return in a meeting
governance	part vi section B question 12C	An annual conflict of interest disclosure exercise is performed by the organization each January. This exercise requires each employee to read the Business Ethics Policy and complete the conflict of interest disclosure form identifying any possible conflicts known by the employee. New employees are also required to complete this conflict of interest disclosure form upon hiring. The Executive Office includes the conflict of interest policy and the conflict of interest disclosure statement in its mailing to the Trustees in advance of the annual meeting of the Board (usually held in March). We ask that Trustees return the disclosure form by the annual meeting. The chief audit executive reviews and approves the document (Conflict of Interest Disclosure Form) content and follows up on any concerns with the employee. For new hires, a log is maintained of any documented conflicts for future referencing. The Executive Office monitors and follows up on the status of any unreturned disclosure forms. The General Counsel reviews all disclosure forms and follows up if there are any issues, in accordance with the procedures set forth in the policy.
governance	part vi section b question 15	THE PROCESS FOR DETERMINING COMPENSATION FOR THE CEO AND OFFICER positions OF ENTERPRISE COMMUNITY PARTNERS IS AS FOLLOWS Partners engages an independent consulting firm to provide a compensation study for the CEO & Officer positions to establish a market value. The market analysis is reviewed by the Board of Trustees. The Board of Trustees discusses and sets the CEO compensation. The Board also reviews and approves the CEO's recommendations for the other officers' compensation. This process is documented through the Board meeting minutes.
governance	part vi section C question 19	documents made available to public upon request and our website
reconcilation of net assets	part xı line 5	change in net assets of subsisiaries and affiliaites 10,525,000 net unrealized gain on investment (551,640) Tax TO GAAP ADJUStMent - (369) lafitte redevelopment Total 9,972,991
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME CHARLES WERHANE TITLE DIRECTOR HOURS 39
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME LORI CHATMAN TITLE senior VICE PRESIDENT HOURS 39

DLN: 93493227008132

OMB No 1545-0047 2011

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization ENTERPRISE COMMUNITY PARTNERS INC 52-1231931

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)										
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity					
(1) ENTERPRISE LOUISIANA LOAN FUND LLC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 47-1718653	FINANCING	DE	335,628	4,291,184	ECP INC					
(2) New generation fund LLC 10227 wincopin circle columbia, MD 21044 26-2105382	financing	DE	1,924,973	31,657,939	ecp inc					
(3) National community stabilization trust 10227 wincopin circle columbia, MD 21044 26-3703347	afford hsg	DE	0	0	еср іпс					
(4) Enterprise New Orleans NT LLC 10227 Wincopin Circle Suite 800 columbia, MD 21044 52-1231931	afford hsg	MD	0	0	ecp inc					
Part II Identification of Related Tax-Exempt Organi	zations (Complete	if the organization	n answered "Y	es" on Form 990,	Part IV, line 34 because it had one					

or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13 controlled organization	
						Yes	No
See Additional Data Table							

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end-of- year assets	Disprop	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		(k) Percentage ownership
						Yes	No		Yes	No			
FINANCING	DE	ECLF	RELATED	52,225	52,325		No			No	99 990 %		
											i		
											- 		
_ F	Primary activity	(b) Primary activity (state or foreign country)	Primary activity Regal domicile (state or foreign country) (state or foreign country)	Primary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Direct controlling entity entity Predominant income (related, unrelated, excluded from tax under sections 512-514)	Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income (related, unrelated, excluded from tax under sections 512-514)	Primary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Legal domicile (state or foreign country) ECLE (d) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income very ear assets	Primary activity Primary activity Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income Share of total income Year assets Yes	Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income Share of end-of-year assets Yes No	Primary activity Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Primary activity Primary activity Primary activity Primary activity Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) Yes No Predominant income (related, unrelated, excluded from tax under sections 512-514) Yes Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) Yes	Primary activity Primary activity Primary activity Primary activity Primary activity Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Predominant income (related, unrelated, excluded from tax under sections 512-514) Yes No Predominant income (related, unrelated, excluded from tax under sections 512-514) Yes No		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) ENTERPRISE COMMUNITY INVESTMENT INC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 52-1206840	AFF HOUSING	MD	ECP INC	C CORP	3,914,615	93,955,624	100 000 %
(2) ENTERPRISE GROUP INC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 52-1348286	AFF HOUSING	MD	ECP INC	C CORP	0	0	100 000 %
(3) ENTERPRISE NEW ORLEANS LLC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 26-4201991	AFFORDABLE HS	MD	ECP INC	C CORP	369	1,162,294	100 000 %

chedu	ule R (Form 990) 2011		Pε	age 3
Part	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
N	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Dur	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a F	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Yes	
b	Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c (Gift, grant, or capital contribution from related organization(s)	1 c	Yes	
d l	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e l	Loans or loan guarantees by related organization(s)	1e		No
f c	Sale of assets to related organization(s)	1f	_	No
	Purchase of assets from related organization(s)	1g	+	No
-	Exchange of assets with related organization(s)	1h	\vdash	No
	Lease of facilities, equipment, or other assets to related organization(s)	1i	+	No
	Lease of facilities, equipment, of other assets to related organization(s)		\vdash	+
j L	Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k F	Performance of services or membership or fundraising solicitations for related organization(s)	1k	Yes	
I P	Performance of services or membership or fundraising solicitations by related organization(s)	11	Yes	
m S	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	
n S	Sharing of paid employees with related organization(s)	1n		No
o F	Reimbursement paid to related organization(s) for expenses	10	Yes	1
рΕ	Reimbursement paid by related organization(s) for expenses	1р	Yes	
q (Other transfer of cash or property to related organization(s)	1q		No
r C	O ther transfer of cash or property from related organization(s)	1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) ENTERPRISE COMMUNITY INVESTMENT INC	А	6,088,516	cost
(2) ENTERPRISE COMMUNITY INVESTMENT INC	к	7,106,340	cost
(3) ENTERPRISE COMMUNITY INVESTMENT INC	L	4,451,083	cost
(4) ENTERPRISE COMMUNITY INVESTMENT INC	0	1,136,300	cost
(5) ENTERPRISE COMMUNITY INVESTMENT INC	Р	577,436	cost
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		
			314)	Yes	No			Yes	No		Yes	No	
													·

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Id	entification of R	elated Tax-	Exempt Orga	anizations		
(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	g Section 512 (b)(13) controlled organization
ENTERPRISE COMMUNITY LOAN FUND INC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 52-0192004	FINANCING	MD	501(c) (3)	509(a)(3)	ECP INC	No
ENTERPRISE HOME OWNERSHIP PARTNERS INC 600 wilshire blvd LOS ANGELES, CA 90017 31-1737642	AFF HOUSING	CA	501(c) (3)	509(a)(3)	ECP INC	No
EHOP- DALLAS INC 500 akard street DALLAS, TX 75201 72-1590088	AFF HOUSING	TX	501(c) (3)	509(a)(3)	ECP INC	No
NEIGHBORHOOD PARTNERSHIP HOUSING DEVELOP 1 WHITEHALL STREET NEW YORK, NY 10004 13-3811616	AFF HOUSING	NY	501(c) (3)	509(a)(3)	ECP INC	No
ENTERPRISE MARYLAND LLC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 26-3262997	AFF HOUSING	MD	501(c) (3)	509(a)(3)	ECP INC	No
IACENTERPRISE NEHEMIAH DEVELOPMENT 505 AMERICAN CITY BUILDING COLUMBIA, MD 21044 52-1742031	AFF HOUSING	MD	501(c) (3)	509(a)(3)	ECP INC	No
CORNERSTONE HOUSING CORPORATION 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 52-1742293	AFF HOUSING	MD	501(c) (3)	509(a)(3)	ECP INC	No
CITY HOMES INC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 52-1479114	AFF HOUSING	MD	501(c) (3)	509(a)(3)	ECP INC	No
ENTERPRISE ADVISORS INC 10227 WINCOPIN CIRCLE COLUMBIA, MD 21044 27-3846733	aff housing	MD	501(c) (3)	509(a)(3)	ecp inc	No
Affordable Housing Solutions Inc 10227 Wincopin Circle Columbia, MD 21044 35-2389470	aff housing	MD	501(c) (3)	509(a)(3)	ecp inc	No

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493227008132

OMB No 1545-0172

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury nternal Revenue Service (99)	See separate instructions. Attach to your tax return.								Attachment Sequence No 179
Name(s) shown on return ENTERPRISE COMMUNI	TY PARTNERS I	NC	Business	or activity to w	hich this	form	relates]	Identifying number
				L DEPRECIATI				į	52-1231931
	To Expense (•				alata Dant I		
	ou have any li	stea propert	<u>y, compie</u>	te Part V bero	ore you	com	oiete Part I.	Τ.	T + 500.000
1 Maximum amount (see	-							1	\$ 500,000
2 Total cost of section 1			•	•				2	
3 Threshold cost of sect	tion 179 property	/ before reduct	ion in limit	ation (see instr	uctions)	•		3	\$ 2,000,000
4 Reduction in limitation	Subtract line 3	from line 2 If	zero or les	s, enter -0-				4	
5 Dollar limitation for ta	x year Subtract	line 4 from line	1 Ifzero	orless, enter-C)- If ma	rried fi	ılıng		
separately, see instru	ctions							5	
									1
6 (a)	Description of pr	operty		(b) Cost (bu		ıse	(c) Elected (ost	
									-
7 Listed property Enter	the amount from	line 29 .				7			1
8 Total elected cost of s			ınts ın colu	ımn (c), lines 6	and 7			8	7
9 Tentative deduction E		•		(5),55		-		9	
10 Carryover of disallowe				· · · · ·	• •	•		10	
11 Business income limitation		•			· ·	• one\		-	
								11	
12 Section 179 expense					n line 11	•		12	
13 Carryover of disallowe					. 🏲	13			
Note: Do not use Part									
									ty) (See instructions)
14 Special depreciation a tax year (see instruction)		ified property	(otner than	listed property) piaced	ın ser	vice during the	14	
		Jackian						15	
15 Property subject to se		election .				•		-	
16 O ther depreciation (in		No mot upolius	· · ·		· ·	·		16	889,998
Part III MACRS De	epreciation (I	o not includ		ction A	e mstrt	iction	5.)		
17 MACRS deductions for	rassets placed u	n service in ta			011			17	
18 If you are electing	•		-	_		into	one or more		1
general asset accou					•		▶□		
Section B—Ass	•							reci	ation System
		(c) Bası							
(a) Classification of property	(b) Month and year placed in service	deprecia (business/in- use only—see ins	vestment	(d) Recovery period	(e) Cor	oventio	on (f) Meth	od	(g) Depreciation deduction
19a 3-year property		,, Jac 1113							
b 5-year property	1						1		
c 7-year property									
d 10-year property									
e 15-year property									_
f 20-year property									
g 25-year property				25 yrs			S/L		
h Residential rental	27 5 yrs MM S/L						S/L		
property				27 5 yrs	МІ	М	S/L		
i Nonresidential real	ial real 39 yrs MM				М	S/L			
property		L			I MI	-	S/L		
	on C—Assets Plac	ced in Service I	Ouring 2011	L Tax Year Using	the Alt	ernati		n Sys	tem
20a Class life	-			1.2			S/L		
b 12-year	1			12 yrs	М	м	S/L S/L		
c 40-year Part IV Summa	l r y (see instruc	tions)		40 yrs	1 141	1*1] 5/L		l
21 Listed property Enter								21	
22 Total. Add amounts from and on the appropriate	om line 12, lines	14 through 17							
23 For assets shown above portion of the basis at:	ve and placed in	service during	the current	-		23		1	<u> </u>

Form 4562 (2011) Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

Section A—Depre	ciation a	<u>na Otner In</u>	тогта	tion (C	aution	<u>: 5ee</u>	uie i	<u>HSU UCU</u>	<u>ions tor</u>	IIIIIII	тот ра	isserig	<u>er au</u>	LOITIOL	nies.
24a Do you have eviden	ce to support	the business/inve	estment u	ıse claımed	d? ┌ Yes	Гио		24	b If "Yes,	" is the e	ev idence	written?	Гүе	sГn	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost o	i) r other sıs	Basis for (busines us			(f) Recovery period	(g) Metho Conven		(h Deprec dedud	iation/		(i) Electe section cost	179
25 Special depreciation allow 50% in a qualified busing	y placed	in service o	during the	tax yea	r and ι	ised more	I .	25							
26 Property used more	•	•	usiness	use											
Le i repercy asea more		%	45111055	450											
		%													
27 Property used 50%	orlessina	% %	nace lie					l							
27 i Toperty used 50 70	01 1633 111 6	%	1033 43						S/L -	Т			П		
		%							S/L -]		
20 4 1 1		%			<u> </u>				S/L -				Ц		
28 Add amounts in co						ne 21,	page	1 .	28		T				
29 Add amounts in co	olumn (ı), lın					•	<u></u>		<u> </u>		29				
Complete this section	for vehicles			—Infor						or rela	tad nar	con			
If you provided vehicles to	your employe	es, first answer th	e questioi	ns in Sectio	n C to see	e if you r	neet a	ın excepti	on to comp	ol rela	is section	for thos	e vehic	les	
30 Total business/inv	estment mi	les driven duri	na the		a)		b)		(c)		(d)		e)		(f)
year (do not includ			•	Vehi	cle 1	Veh	icle 2	Ve	hicle 3	Veh	ııcle 4	Vehi	cle 5	Veh	ıcle 6
31 Total commuting r	nulae drivan	during the year	r							+					
_								-		+		-			
32 Total other person	•	-,						+		+					
33 Total miles driven through 32 .	auring the y	year Add lines													
34 Was the vehicle av	/aılable for p	personal use		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
during off-duty hou	ırs? .														
35 Was the vehicle us	•	y by a more tha	ın 5%												
owner or related po							-	+		+			 		
36 Is another vehicle		•			<u> </u>	<u> </u>	<u> </u>			<u>. </u>	<u> </u>	L	<u></u>		
Sectio Answer these question 5% owners or related	ns to determ		t an exc											not mo	re than
37 Do you maintain a				nibits all į	personal	use of	vehi	cles, inc	luding c	ommuti	ng, by	your	T	'es	No
employees? .						•	٠			•		•			
38 Do you maintain a employees? See th															
39 Do you treat all us	e of vehicle	s by employee	s as per	rsonal us	e? .										
40 Do you provide movehicles, and retain				oyees, ob	otaın ınfo	ormatic	n fro	m your e	mployee	s abou	t the us	e of the	a 🔽		
41 Do you meet the re				automobi	le demor	nstratio	on us	e? (See	ınstructı	ons)					
Note: If your answ	er to 37, 38	3, 39, 40, or 41	ıs "Ye:	s," do not	t comple	te Sec	tion E	3 for the	covered	vehicle	es				
	rtization													<u> </u>	
		(b)		/-				(d)		(e)			(f)		
(a) Date			(c A morti			((d) Code		tızatıoı	۱	A mo	rtızatı	on for		
Description of c	osts	amortization begins		amo				ection		iod or entage			hıs ye		
42 A mortization of co	sts that bed		r 2011	tax year	(see ins	tructio	ns)		1 2010	<u></u>	1				
	T			<u> </u>	-										
43 A mortization of co	sts that beg	gan before your	2011 t	ax year						43					

44 Total. Add amounts in column (f) See the instructions for where to report

44