

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 private foundations)

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

Information about Form 990 and its instructions is at [www.IRS.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

|                                                                                                                                                                                                                                                                                                           |                                                                                                                             |                                                                                                                                                  |                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>B</b> Check if applicable<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return/terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | <b>C</b> Name of organization<br>ENTERPRISE COMMUNITY PARTNERS INC                                                          |                                                                                                                                                  | <b>D</b> Employer identification number<br><br>52-1231931 |
|                                                                                                                                                                                                                                                                                                           | % CRAIG MELLENDICK<br>Doing business as                                                                                     |                                                                                                                                                  |                                                           |
|                                                                                                                                                                                                                                                                                                           | Number and street (or P O box if mail is not delivered to street address) Room/suite<br>11000 broken land parkway Suite 700 |                                                                                                                                                  | E Telephone number<br><br>(410) 964-1230                  |
|                                                                                                                                                                                                                                                                                                           | City or town, state or province, country, and ZIP or foreign postal code<br>COLUMBIA, MD 21044                              |                                                                                                                                                  | <b>G</b> Gross receipts \$ 69,870,503                     |
|                                                                                                                                                                                                                                                                                                           | <b>F</b> Name and address of principal officer<br>terri ludwig ceo<br>11000 broken land parkway700<br>columbia,MD 21044     |                                                                                                                                                  |                                                           |
| <b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀(insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527                                                                                                            |                                                                                                                             | <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                         |                                                           |
| <b>J</b> Website: ▶ www.enterprisecommunity.org                                                                                                                                                                                                                                                           |                                                                                                                             | <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "No," attach a list (see instructions) |                                                           |
|                                                                                                                                                                                                                                                                                                           |                                                                                                                             | <b>H(c)</b> Group exemption number ▶                                                                                                             |                                                           |
| <b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶                                                                                                                        |                                                                                                                             |                                                                                                                                                  | <b>L</b> Year of formation 1980                           |
|                                                                                                                                                                                                                                                                                                           |                                                                                                                             |                                                                                                                                                  | <b>M</b> State of legal domicile MD                       |

Part I

Summary

|                             |                                                                                                                                                 |                                                                                                                                                                                                       |                                                         |                    |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------|
| Activities & Governance     | <b>1</b>                                                                                                                                        | Briefly describe the organization's mission or most significant activities<br>TO CREATE OPPORTUNITIES FOR LOW- AND moderate-income people through affordable housing in diverse, THRIVING COMMUNITIES |                                                         |                    |
|                             |                                                                                                                                                 |                                                                                                                                                                                                       |                                                         |                    |
|                             |                                                                                                                                                 |                                                                                                                                                                                                       |                                                         |                    |
|                             |                                                                                                                                                 |                                                                                                                                                                                                       |                                                         |                    |
|                             |                                                                                                                                                 |                                                                                                                                                                                                       |                                                         |                    |
|                             | <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets |                                                                                                                                                                                                       |                                                         |                    |
|                             |                                                                                                                                                 |                                                                                                                                                                                                       |                                                         |                    |
| Revenue                     | <b>3</b>                                                                                                                                        | Number of voting members of the governing body (Part VI, line 1a) . . . . .                                                                                                                           | <b>3</b>                                                | 26                 |
|                             | <b>4</b>                                                                                                                                        | Number of independent voting members of the governing body (Part VI, line 1b) . . . . .                                                                                                               | <b>4</b>                                                | 24                 |
|                             | <b>5</b>                                                                                                                                        | Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . . .                                                                                                                | <b>5</b>                                                | 266                |
|                             | <b>6</b>                                                                                                                                        | Total number of volunteers (estimate if necessary) . . . . .                                                                                                                                          | <b>6</b>                                                | 65                 |
|                             | <b>7a</b>                                                                                                                                       | Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .                                                                                                                        | <b>7a</b>                                               | 0                  |
|                             | <b>b</b>                                                                                                                                        | Net unrelated business taxable income from Form 990-T, line 34 . . . . .                                                                                                                              | <b>7b</b>                                               |                    |
|                             | Expenses                                                                                                                                        | <b>8</b>                                                                                                                                                                                              | Contributions and grants (Part VIII, line 1h) . . . . . | <b>Prior Year</b>  |
| <b>9</b>                    |                                                                                                                                                 | Program service revenue (Part VIII, line 2g) . . . . .                                                                                                                                                | 53,644,487                                              | 55,656,679         |
| <b>10</b>                   |                                                                                                                                                 | Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .                                                                                                                              | 10,743,848                                              | 8,873,009          |
| <b>11</b>                   |                                                                                                                                                 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                                                                                                                              | 522,984                                                 | 483,658            |
| <b>12</b>                   |                                                                                                                                                 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .                                                                                                            | 3,823,398                                               | 4,288,490          |
| <b>13</b>                   |                                                                                                                                                 | Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .                                                                                                                           | 68,734,717                                              | 69,301,836         |
| <b>14</b>                   |                                                                                                                                                 | Benefits paid to or for members (Part IX, column (A), line 4) . . . . .                                                                                                                               |                                                         |                    |
| <b>15</b>                   |                                                                                                                                                 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)                                                                                                                     | 14,692,266                                              | 16,995,692         |
| <b>16a</b>                  |                                                                                                                                                 | Professional fundraising fees (Part IX, column (A), line 11e) . . . . .                                                                                                                               | 0                                                       | 0                  |
| Net Assets or Fund Balances | <b>b</b>                                                                                                                                        | Total fundraising expenses (Part IX, column (D), line 25) ▶2,025,842                                                                                                                                  | 25,626,420                                              | 27,364,338         |
|                             | <b>17</b>                                                                                                                                       | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .                                                                                                                                | 0                                                       | 493,437            |
|                             | <b>18</b>                                                                                                                                       | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)                                                                                                                              |                                                         |                    |
|                             | <b>19</b>                                                                                                                                       | Revenue less expenses Subtract line 18 from line 12 . . . . .                                                                                                                                         | 18,010,708                                              | 23,701,689         |
|                             | <b>20</b>                                                                                                                                       | Total assets (Part X, line 16) . . . . .                                                                                                                                                              | 58,329,394                                              | 68,555,156         |
|                             | <b>21</b>                                                                                                                                       | Total liabilities (Part X, line 26) . . . . .                                                                                                                                                         | 10,405,323                                              | 746,680            |
|                             | <b>22</b>                                                                                                                                       | Net assets or fund balances Subtract line 21 from line 20 . . . . .                                                                                                                                   |                                                         |                    |
|                             |                                                                                                                                                 |                                                                                                                                                                                                       | <b>Beginning of Current Year</b>                        | <b>End of Year</b> |

Part II

Signature Block

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

|                        |                                                                                 |                                           |                    |                                                 |                   |
|------------------------|---------------------------------------------------------------------------------|-------------------------------------------|--------------------|-------------------------------------------------|-------------------|
| Sign Here              | *****<br>Signature of officer                                                   |                                           | 2015-06-30<br>Date |                                                 |                   |
|                        | craig mellendick cfo<br>Type or print name and title                            |                                           |                    |                                                 |                   |
| Paid Preparer Use Only | Print/Type preparer's name<br>ANNE SCHRANTZ CPA                                 | Preparer's signature<br>ANNE SCHRANTZ CPA | Date               | Check <input type="checkbox"/> if self-employed | PTIN<br>P00230625 |
|                        | Firm's name ▶ COHNREZNICK LLP                                                   |                                           |                    | Firm's EIN ▶                                    |                   |
|                        | Firm's address ▶ 7501 WISCONSIN AVENUE SUITE 400E<br><br>BETHESDA, MD 208146583 |                                           |                    | Phone no (410) 964-1230                         |                   |

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization’s mission

TO CREATE OPPORTUNITIES FOR LOW AND MODERATE-INCOME PEOPLE THROUGH AFFORDABLE HOUSING AND DIVERSE, THRIVING COMMUNITIES ENTERPRISE PROVIDES DEVELOPMENT CAPITAL AND EXPERTISE TO CREATE DECENT, AFFORDABLE HOMES AND TO REBUILD COMMUNITIES SERVICES PROVIDED BY THE ORGANIZATION TO COMMUNITY ORGANIZATIONS INCLUDE GRANTS FOR THEIR OPERATIONS, SHORT-TERM LOANS RANGING FROM WORKING CAPITAL LINES TO PREDEVELOPMENT, ACQUISITION AND CONSTRUCTION LOANS, TECHNICAL SERVICES AND TRAINING PROGRAMS, AND RESEARCH AND INFORMATION SERVICES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 58,860,343 including grants of \$ 16,995,692 ) (Revenue \$ 8,873,009 )

Enterprise and its subsidiaries have raised and invested more than \$18.6 billion in equity, grants, and loans to create nearly 340,000 affordable homes

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses

58,860,343

Part IV Checklist of Required Schedules

|                                                                                                                                                                                                                                                                                                                                                                                   | Yes     | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A                                                                                                                                                              | 1 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       | No |
| 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 I                                         | 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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  | 9 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                                                                                                                                                                                                                                 |         |    |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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 |    |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX                                                                                                         | 11d     | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X                                                                                                                                                                      | 11e Yes |    |
| 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? If "Yes," complete Schedule D, Parts XI and XII                                                                                                                                           | 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 and XII 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, Parts I and IV                                                                       | 14b     | No |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV                                                                                                                                                                                 | 15      | No |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV                                                                                                                                                                           | 16      | 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? If "Yes," complete Schedule G, Part I (see instructions)                                                                             | 17 Yes  |    |
| 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 hospital facilities? If "Yes," complete Schedule H                                                                                                                                                                                                                                                                                   | 20a     | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?                                                                                                                                                                                                                                                                    | 20b     |    |

Part IV

Checklist of Required Schedules (continued)

|     |                                                                                                                                                                                                                                                                                                                            |     |     |    |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|----|
| 21  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .                                                                                             | 21  | Yes |    |
| 22  | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .                                                                                                                 | 22  |     | No |
| 23  | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .                                                      | 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .                            | 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 | <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .                                       | 25b |     | No |
| 26  | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .                                 | 26  |     | No |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . . | 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)                                                                                                                               |     |     |    |
| a   | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .                                                                                                                                                                                                   | 28a |     | No |
| b   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .                                                                                                                                                                                | 28b |     | No |
| c   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .                                                                                    | 28c |     | No |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .                                                                                                                                                                                                  | 29  | Yes |    |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .                                                                                                                                  | 30  |     | No |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .                                                                                                                                                                                        | 31  |     | No |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .                                                                                                                                                                      | 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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .                                                                                                                      | 33  | Yes |    |
| 34  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .                                                                                                                                                                  | 34  | Yes |    |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                                                                                                                                                                                                                    | 35a |     | No |
| b   | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .                                                                                         | 35b |     |    |
| 36  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .                                                                                                                           | 36  | Yes |    |
| 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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .                                                                             | 37  |     | No |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .                                                                                                                              | 38  | Yes |    |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☐

|                                                                                                                                                                                                                                               |                                                                                                                                                                                |     |     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
|                                                                                                                                                                                                                                               |                                                                                                                                                                                | Yes | No  |
| 1a                                                                                                                                                                                                                                            | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.                                                                                                  | 232 |     |
| 1b                                                                                                                                                                                                                                            | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.                                                                                               | 0   |     |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?                                                                                    |                                                                                                                                                                                | 1c  | Yes |
| 2a                                                                                                                                                                                                                                            | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. | 266 |     |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).         |                                                                                                                                                                                | 2b  | Yes |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                              |                                                                                                                                                                                | 3a  | No  |
| b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O.</i>                                                                                                                         |                                                                                                                                                                                | 3b  |     |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? |                                                                                                                                                                                | 4a  | No  |
| b If "Yes," enter the name of the foreign country:<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).                                                                     |                                                                                                                                                                                |     |     |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                                                                                                                                      |                                                                                                                                                                                | 5a  | No  |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                                                                                                            |                                                                                                                                                                                | 5b  | No  |
| c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?                                                                                                                                                                          |                                                                                                                                                                                | 5c  |     |
| 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?                                    |                                                                                                                                                                                | 6a  | No  |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?                                                                                               |                                                                                                                                                                                | 6b  |     |
| 7 Organizations that may receive deductible contributions under section 170(c).                                                                                                                                                               |                                                                                                                                                                                |     |     |
| a 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 file Form 8282?                                                                                                        |                                                                                                                                                                                | 7c  | No  |
| d If "Yes," indicate the number of Forms 8282 filed during the year.                                                                                                                                                                          |                                                                                                                                                                                | 7d  |     |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                                             |                                                                                                                                                                                | 7e  | No  |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                                |                                                                                                                                                                                | 7f  | No  |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?                                                                                                            |                                                                                                                                                                                | 7g  |     |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?                                                                                                          |                                                                                                                                                                                | 7h  |     |
| 8 Sponsoring organizations maintaining donor advised funds.<br>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?                                                  |                                                                                                                                                                                | 8   |     |
| 9a Did the sponsoring organization make any taxable distributions under section 4966?                                                                                                                                                         |                                                                                                                                                                                | 9a  |     |
| b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?                                                                                                                                           |                                                                                                                                                                                | 9b  |     |
| 10 Section 501(c)(7) organizations. Enter                                                                                                                                                                                                     |                                                                                                                                                                                |     |     |
| a Initiation fees and capital contributions included on Part VIII, line 12.                                                                                                                                                                   |                                                                                                                                                                                | 10a |     |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.                                                                                                                                                |                                                                                                                                                                                | 10b |     |
| 11 Section 501(c)(12) organizations. Enter                                                                                                                                                                                                    |                                                                                                                                                                                |     |     |
| a Gross income from members or shareholders.                                                                                                                                                                                                  |                                                                                                                                                                                | 11a |     |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).                                                                                                                |                                                                                                                                                                                | 11b |     |
| 12a 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 year.                                                                                                                                                      |                                                                                                                                                                                | 12b |     |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers.                                                                                                                                                                           |                                                                                                                                                                                |     |     |
| a Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.                                            |                                                                                                                                                                                | 13a |     |
| b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.                                                                                  |                                                                                                                                                                                | 13b |     |
| c Enter the amount of reserves on hand.                                                                                                                                                                                                       |                                                                                                                                                                                | 13c |     |
| 14a Did the organization receive any payments for indoor tanning services during the tax year?                                                                                                                                                |                                                                                                                                                                                | 14a | No  |
| b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O.</i>                                                                                                                           |                                                                                                                                                                                | 14b |     |

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for 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 or note to any line in this Part VI

Section A. Governing Body and Management

|    |                                                                                                                                                                                                                     |     |    |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
|    |                                                                                                                                                                                                                     | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year                                                                                                                                 |     |    |
|    | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O    |     |    |
| b  | Enter the number of voting members included in line 1a, above, who are independent                                                                                                                                  |     |    |
| 2  | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?                                               |     | No |
| 3  | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? |     | No |
| 4  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?                                                                                                    | Yes |    |
| 5  | Did the organization become aware during the year of a significant diversion of the organization's assets?                                                                                                          |     | No |
| 6  | Did the organization have members or stockholders?                                                                                                                                                                  |     | No |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?                                                                  |     | No |
| b  | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?                                                           |     | No |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following                                                                                    |     |    |
| a  | The governing body?                                                                                                                                                                                                 | Yes |    |
| b  | Each committee with authority to act on behalf of the governing body?                                                                                                                                               | Yes |    |
| 9  | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O        |     | No |

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?                                                                                                                                                                                                                           |     | No |
| 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?                                                                   |     |    |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?                                                                                                                                                                  | Yes |    |
| b   | Describe in Schedule O the process, if any, used by the organization to review this Form 990                                                                                                                                                                                                 |     |    |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13                                                                                                                                                                                                      | Yes |    |
| b   | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?                                                                                                                                                          | 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                                                                                                                                           | Yes |    |
| 13  | Did the organization have a written whistleblower policy?                                                                                                                                                                                                                                    | Yes |    |
| 14  | Did the organization have a written document retention and destruction policy?                                                                                                                                                                                                               | 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?                                                                         |     |    |
| a   | The organization's CEO, Executive Director, or top management official                                                                                                                                                                                                                       | Yes |    |
| b   | Other officers or key employees of the organization                                                                                                                                                                                                                                          | 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?                                                                                                                                        |     | 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? |     |    |

Section C. Disclosure

|    |                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                        |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17 | 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 |
| 18 | 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.<br><input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O) |                                                                                                                                                        |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year                                                                                                                                                                                                                                     |                                                                                                                                                        |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records                                                                                                                                                                                                                                                                                                                       | CRAIG MELLENDICK<br>11000 BROKEN LAND PARKWAY<br>700 columbia, MD 21044 (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 or note to any line 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. 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 organization nor any related organization compensated any current officer, director, or trustee

| (A)<br>Name and Title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                       |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
|                       |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |

Part VII

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

| (A)<br>Name and Title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                       |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
|                       |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |

|    |                                                       |            |         |           |
|----|-------------------------------------------------------|------------|---------|-----------|
| 1b | Sub-Total                                             |            |         |           |
| c  | Total from continuation sheets to Part VII, Section A |            |         |           |
| d  | Total (add lines 1b and 1c)                           | 11,006,717 | 391,459 | 1,543,784 |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 49

|                                                                                                                                                                                                                                       | Yes   | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----|
| 3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>                                        | 3 Yes |    |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | 4 Yes |    |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>                       | 5     | No |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

| (A)<br>Name and business address                                                        | (B)<br>Description of services | (C)<br>Compensation |
|-----------------------------------------------------------------------------------------|--------------------------------|---------------------|
| matter unlimited llc,<br>175 varck street<br>NEW YORK, NY 10014                         | consulting                     | 789,754             |
| deloitte tax llc,<br>po box 844708<br>DALLAS, TX 75284                                  | CONSULTING                     | 778,239             |
| apa ten g llc,<br>750 first street ne<br>WASHINGTON, DC 20002                           | CONSULTING                     | 488,246             |
| home llp,<br>1020 highland colony parkway 400<br>RIDGELAND, MS 39157                    | consulting                     | 357,623             |
| 101 montgomery street company,<br>101 montgomery street 2350<br>SAN FRANCISCO, CA 94104 | consulting                     | 221,979             |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 5

Part VIII

Statement of Revenue

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

|                                                           |                       |                                                                                                                                                |                | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512-514 |
|-----------------------------------------------------------|-----------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------|----------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------|
| Contributions, Gifts, Grants<br>and Other Similar Amounts | 1a                    | Federated campaigns . . .                                                                                                                      | 1a             |                      |                                                    |                                         |                                                                     |
|                                                           | b                     | Membership dues . . . . .                                                                                                                      | 1b             |                      |                                                    |                                         |                                                                     |
|                                                           | c                     | Fundraising events . . . . .                                                                                                                   | 1c             | 1,200,030            |                                                    |                                         |                                                                     |
|                                                           | d                     | Related organizations . . . .                                                                                                                  | 1d             | 3,700,000            |                                                    |                                         |                                                                     |
|                                                           | e                     | Government grants (contributions)                                                                                                              | 1e             | 33,222,188           |                                                    |                                         |                                                                     |
|                                                           | f                     | All other contributions, gifts, grants, and<br>similar amounts not included above                                                              | 1f             | 17,534,461           |                                                    |                                         |                                                                     |
|                                                           | g                     | Noncash contributions included in lines<br>1a-1f \$                                                                                            |                | 28,704               |                                                    |                                         |                                                                     |
|                                                           | h                     | Total. Add lines 1a-1f . . . . .                                                                                                               |                | 55,656,679           |                                                    |                                         |                                                                     |
| Program Service Revenue                                   |                       |                                                                                                                                                | Business Code  |                      |                                                    |                                         |                                                                     |
|                                                           | 2a                    | AFFILIATE SERVICES                                                                                                                             | 531390         | 5,931,925            | 5,931,925                                          |                                         |                                                                     |
|                                                           | b                     | TRAINING PROGRAMS                                                                                                                              | 531390         | 2,581,978            | 2,581,978                                          |                                         |                                                                     |
|                                                           | c                     | OTHER INCOME                                                                                                                                   | 531390         | 37,490               | 37,490                                             |                                         |                                                                     |
|                                                           | d                     | FLOW THRU FROM LAFITTE<br>REDEVELOPMENT LLC                                                                                                    | 531390         | 321,616              | 321,616                                            |                                         |                                                                     |
|                                                           | e                     |                                                                                                                                                |                |                      |                                                    |                                         |                                                                     |
|                                                           | f                     | All other program service revenue                                                                                                              |                |                      |                                                    |                                         |                                                                     |
|                                                           | g                     | Total. Add lines 2a-2f . . . . .                                                                                                               |                | 8,873,009            |                                                    |                                         |                                                                     |
| Other Revenue                                             | 3                     | Investment income (including dividends, interest,<br>and other similar amounts) . . . . .                                                      |                | 483,658              |                                                    |                                         | 483,658                                                             |
|                                                           | 4                     | Income from investment of tax-exempt bond proceeds . .                                                                                         |                | 0                    |                                                    |                                         |                                                                     |
|                                                           | 5                     | Royalties . . . . .                                                                                                                            |                | 4,621,467            |                                                    |                                         | 4,621,467                                                           |
|                                                           |                       |                                                                                                                                                | (i) Real       | (ii) Personal        |                                                    |                                         |                                                                     |
|                                                           | 6a                    | Gross rents                                                                                                                                    |                |                      |                                                    |                                         |                                                                     |
|                                                           | b                     | Less rental expenses                                                                                                                           |                |                      |                                                    |                                         |                                                                     |
|                                                           | c                     | Rental income or (loss)                                                                                                                        | 0              | 0                    |                                                    |                                         |                                                                     |
|                                                           | d                     | Net rental income or (loss) . . . . .                                                                                                          |                | 0                    |                                                    |                                         |                                                                     |
|                                                           |                       |                                                                                                                                                | (i) Securities | (ii) Other           |                                                    |                                         |                                                                     |
|                                                           | 7a                    | Gross amount from sales of assets other than inventory                                                                                         |                |                      |                                                    |                                         |                                                                     |
|                                                           | b                     | Less cost or other basis and sales expenses                                                                                                    |                |                      |                                                    |                                         |                                                                     |
|                                                           | c                     | Gain or (loss)                                                                                                                                 |                |                      |                                                    |                                         |                                                                     |
|                                                           | d                     | Net gain or (loss) . . . . .                                                                                                                   |                | 0                    |                                                    |                                         |                                                                     |
|                                                           | 8a                    | Gross income from fundraising events (not including<br>\$ 1,200,030<br>of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . |                |                      |                                                    |                                         |                                                                     |
|                                                           |                       | a                                                                                                                                              | 235,690        |                      |                                                    |                                         |                                                                     |
|                                                           | b                     | Less direct expenses . . . . .                                                                                                                 | b              | 568,667              |                                                    |                                         |                                                                     |
|                                                           | c                     | Net income or (loss) from fundraising events . .                                                                                               |                | -332,977             |                                                    |                                         | -332,977                                                            |
|                                                           | 9a                    | Gross income from gaming activities<br>See Part IV, line 19 . . . . .                                                                          |                |                      |                                                    |                                         |                                                                     |
|                                                           |                       | a                                                                                                                                              |                |                      |                                                    |                                         |                                                                     |
|                                                           | b                     | Less direct expenses . . . . .                                                                                                                 | b              |                      |                                                    |                                         |                                                                     |
|                                                           | c                     | Net income or (loss) from gaming activities . .                                                                                                |                | 0                    |                                                    |                                         |                                                                     |
|                                                           | 10a                   | Gross sales of inventory, less returns and allowances .                                                                                        |                |                      |                                                    |                                         |                                                                     |
|                                                           |                       | a                                                                                                                                              |                |                      |                                                    |                                         |                                                                     |
|                                                           | b                     | Less cost of goods sold . . . . .                                                                                                              | b              |                      |                                                    |                                         |                                                                     |
|                                                           | c                     | Net income or (loss) from sales of inventory . .                                                                                               |                | 0                    |                                                    |                                         |                                                                     |
|                                                           | Miscellaneous Revenue |                                                                                                                                                | Business Code  |                      |                                                    |                                         |                                                                     |
|                                                           | 11a                   |                                                                                                                                                |                |                      |                                                    |                                         |                                                                     |
|                                                           | b                     |                                                                                                                                                |                |                      |                                                    |                                         |                                                                     |
|                                                           | c                     |                                                                                                                                                |                |                      |                                                    |                                         |                                                                     |
|                                                           | d                     | All other revenue . . . . .                                                                                                                    |                |                      |                                                    |                                         |                                                                     |
|                                                           | e                     | Total. Add lines 11a-11d . . . . .                                                                                                             |                | 0                    |                                                    |                                         |                                                                     |
|                                                           | 12                    | Total revenue. See Instructions . . . . .                                                                                                      |                | 69,301,836           | 8,873,009                                          |                                         | 4,772,148                                                           |

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).

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. |                                                                                                                                                                                                                                         | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1                                                                              | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.                                                                                                                                   | 16,995,692            | 16,995,692                      |                                        |                             |
| 2                                                                              | Grants and other assistance to domestic individuals. See Part IV, line 22.                                                                                                                                                              | 0                     |                                 |                                        |                             |
| 3                                                                              | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.                                                                                                       | 0                     |                                 |                                        |                             |
| 4                                                                              | Benefits paid to or for members.                                                                                                                                                                                                        | 0                     |                                 |                                        |                             |
| 5                                                                              | Compensation of current officers, directors, trustees, and key employees.                                                                                                                                                               | 11,306,037            | 9,853,724                       | 958,876                                | 493,437                     |
| 6                                                                              | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).                                                                                          | 0                     |                                 |                                        |                             |
| 7                                                                              | Other salaries and wages.                                                                                                                                                                                                               | 11,718,700            | 8,355,564                       | 2,033,145                              | 1,329,991                   |
| 8                                                                              | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).                                                                                                                                     | 4,833,038             | 3,826,195                       | 648,392                                | 358,451                     |
| 9                                                                              | Other employee benefits.                                                                                                                                                                                                                | 0                     |                                 |                                        |                             |
| 10                                                                             | Payroll taxes.                                                                                                                                                                                                                          | 0                     |                                 |                                        |                             |
| 11                                                                             | Fees for services (non-employees):                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| a                                                                              | Management.                                                                                                                                                                                                                             | 0                     |                                 |                                        |                             |
| b                                                                              | Legal.                                                                                                                                                                                                                                  | 0                     |                                 |                                        |                             |
| c                                                                              | Accounting.                                                                                                                                                                                                                             | 0                     |                                 |                                        |                             |
| d                                                                              | Lobbying.                                                                                                                                                                                                                               | 0                     |                                 |                                        |                             |
| e                                                                              | Professional fundraising services. See Part IV, line 17.                                                                                                                                                                                | 0                     |                                 |                                        |                             |
| f                                                                              | Investment management fees.                                                                                                                                                                                                             | 0                     |                                 |                                        |                             |
| g                                                                              | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).                                                                                                                             | 0                     |                                 |                                        |                             |
| 12                                                                             | Advertising and promotion.                                                                                                                                                                                                              | 712,374               | 662,343                         | 16,605                                 | 33,426                      |
| 13                                                                             | Office expenses.                                                                                                                                                                                                                        | 0                     |                                 |                                        |                             |
| 14                                                                             | Information technology.                                                                                                                                                                                                                 | 0                     |                                 |                                        |                             |
| 15                                                                             | Royalties.                                                                                                                                                                                                                              | 0                     |                                 |                                        |                             |
| 16                                                                             | Occupancy.                                                                                                                                                                                                                              | 2,576,714             | 2,163,943                       | 220,203                                | 192,568                     |
| 17                                                                             | Travel.                                                                                                                                                                                                                                 | 1,659,861             | 1,532,149                       | 38,025                                 | 89,687                      |
| 18                                                                             | Payments of travel or entertainment expenses for any federal, state, or local public officials.                                                                                                                                         | 0                     |                                 |                                        |                             |
| 19                                                                             | Conferences, conventions, and meetings.                                                                                                                                                                                                 | 1,089,603             | 1,088,222                       | 1,006                                  | 375                         |
| 20                                                                             | Interest.                                                                                                                                                                                                                               | 0                     |                                 |                                        |                             |
| 21                                                                             | Payments to affiliates.                                                                                                                                                                                                                 | 0                     |                                 |                                        |                             |
| 22                                                                             | Depreciation, depletion, and amortization.                                                                                                                                                                                              | 1,155,555             | 215,839                         | 929,829                                | 9,887                       |
| 23                                                                             | Insurance.                                                                                                                                                                                                                              | 0                     |                                 |                                        |                             |
| 24                                                                             | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):                                       |                       |                                 |                                        |                             |
| a                                                                              | PROFESSIONAL AND CONTRACT SERV                                                                                                                                                                                                          | 15,079,260            | 12,046,166                      | 2,970,063                              | 63,031                      |
| b                                                                              | MISCELLANEOUS                                                                                                                                                                                                                           | 1,704,578             | 1,828,095                       | -147,173                               | 23,656                      |
| c                                                                              | MARKETING                                                                                                                                                                                                                               | 292,411               | 292,411                         |                                        |                             |
| d                                                                              | DIRECT FUNDRAISING                                                                                                                                                                                                                      | -568,667              |                                 |                                        | -568,667                    |
| e                                                                              | All other expenses                                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| 25                                                                             | Total functional expenses. Add lines 1 through 24e.                                                                                                                                                                                     | 68,555,156            | 58,860,343                      | 7,668,971                              | 2,025,842                   |
| 26                                                                             | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). |                       |                                 |                                        |                             |

Part X

Balance Sheet

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

|                             |                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                              |               | (A)               |     | (B)         |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------|-----|-------------|
|                             |                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                              |               | Beginning of year |     | End of year |
| Assets                      | 1                                                                                                                                                   | Cash—non-interest-bearing                                                                                                                                                                                                                                                                                                    |               | 20,641,762        | 1   | 14,374,816  |
|                             | 2                                                                                                                                                   | Savings and temporary cash investments                                                                                                                                                                                                                                                                                       |               | 7,553,597         | 2   | 5,669,511   |
|                             | 3                                                                                                                                                   | Pledges and grants receivable, net                                                                                                                                                                                                                                                                                           |               | 11,963,784        | 3   | 15,065,402  |
|                             | 4                                                                                                                                                   | Accounts receivable, net                                                                                                                                                                                                                                                                                                     |               | 6,042,027         | 4   | 6,064,446   |
|                             | 5                                                                                                                                                   | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L                                                                                                                                                           |               | 0                 | 5   | 0           |
|                             | 6                                                                                                                                                   | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L |               | 0                 | 6   | 0           |
|                             | 7                                                                                                                                                   | Notes and loans receivable, net                                                                                                                                                                                                                                                                                              |               | 22,922,111        | 7   | 23,966,257  |
|                             | 8                                                                                                                                                   | Inventories for sale or use                                                                                                                                                                                                                                                                                                  |               | 0                 | 8   | 0           |
|                             | 9                                                                                                                                                   | Prepaid expenses and deferred charges                                                                                                                                                                                                                                                                                        |               | 235,635           | 9   | 292,984     |
|                             | 10a                                                                                                                                                 | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D                                                                                                                                                                                                                                            | 10a11,513,684 |                   |     |             |
|                             | b                                                                                                                                                   | Less accumulated depreciation                                                                                                                                                                                                                                                                                                | 10b6,923,244  | 4,298,086         | 10c | 4,590,440   |
|                             | 11                                                                                                                                                  | Investments—publicly traded securities                                                                                                                                                                                                                                                                                       |               | 13,118,421        | 11  | 23,667,794  |
|                             | 12                                                                                                                                                  | Investments—other securities See Part IV, line 11                                                                                                                                                                                                                                                                            |               | 653               | 12  | 236,924     |
|                             | 13                                                                                                                                                  | Investments—program-related See Part IV, line 11                                                                                                                                                                                                                                                                             |               | 146,199,362       | 13  | 164,434,232 |
|                             | 14                                                                                                                                                  | Intangible assets                                                                                                                                                                                                                                                                                                            |               | 0                 | 14  | 0           |
|                             | 15                                                                                                                                                  | Other assets See Part IV, line 11                                                                                                                                                                                                                                                                                            |               | 8,656,673         | 15  | 6,218,539   |
|                             | 16                                                                                                                                                  | Total assets. Add lines 1 through 15 (must equal line 34)                                                                                                                                                                                                                                                                    |               | 241,632,111       | 16  | 264,581,345 |
| Liabilities                 | 17                                                                                                                                                  | Accounts payable and accrued expenses                                                                                                                                                                                                                                                                                        |               | 6,525,948         | 17  | 8,672,164   |
|                             | 18                                                                                                                                                  | Grants payable                                                                                                                                                                                                                                                                                                               |               | 0                 | 18  | 0           |
|                             | 19                                                                                                                                                  | Deferred revenue                                                                                                                                                                                                                                                                                                             |               | 0                 | 19  | 0           |
|                             | 20                                                                                                                                                  | Tax-exempt bond liabilities                                                                                                                                                                                                                                                                                                  |               | 0                 | 20  | 0           |
|                             | 21                                                                                                                                                  | Escrow or custodial account liability Complete Part IV of Schedule D                                                                                                                                                                                                                                                         |               | 2,881,687         | 21  | 2,950,285   |
|                             | 22                                                                                                                                                  | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L                                                                                                                                          |               | 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 related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D                                                                                                                                                         |               | 17,557,113        | 25  | 18,701,853  |
|                             | 26                                                                                                                                                  | Total liabilities. Add lines 17 through 25                                                                                                                                                                                                                                                                                   |               | 26,964,748        | 26  | 30,324,302  |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. |                                                                                                                                                                                                                                                                                                                              |               |                   |     |             |
|                             | 27                                                                                                                                                  | Unrestricted net assets                                                                                                                                                                                                                                                                                                      |               | 164,255,125       | 27  | 180,931,456 |
|                             | 28                                                                                                                                                  | Temporarily restricted net assets                                                                                                                                                                                                                                                                                            |               | 50,412,238        | 28  | 53,325,587  |
|                             | 29                                                                                                                                                  | Permanently restricted net assets                                                                                                                                                                                                                                                                                            |               | 0                 | 29  | 0           |
|                             | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.                          |                                                                                                                                                                                                                                                                                                                              |               |                   |     |             |
|                             | 30                                                                                                                                                  | Capital stock or trust principal, or current funds                                                                                                                                                                                                                                                                           |               |                   | 30  |             |
|                             | 31                                                                                                                                                  | Paid-in or capital surplus, or land, building or equipment fund                                                                                                                                                                                                                                                              |               |                   | 31  |             |
|                             | 32                                                                                                                                                  | Retained earnings, endowment, accumulated income, or other funds                                                                                                                                                                                                                                                             |               |                   | 32  |             |
|                             | 33                                                                                                                                                  | Total net assets or fund balances                                                                                                                                                                                                                                                                                            |               | 214,667,363       | 33  | 234,257,043 |
|                             | 34                                                                                                                                                  | Total liabilities and net assets/fund balances                                                                                                                                                                                                                                                                               |               | 241,632,111       | 34  | 264,581,345 |

Part XI Reconciliation of Net Assets

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

|    |                                                                                                               |    |             |
|----|---------------------------------------------------------------------------------------------------------------|----|-------------|
| 1  | Total revenue (must equal Part VIII, column (A), line 12)                                                     | 1  | 69,301,836  |
| 2  | Total expenses (must equal Part IX, column (A), line 25)                                                      | 2  | 68,555,156  |
| 3  | Revenue less expenses Subtract line 2 from line 1                                                             | 3  | 746,680     |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                     | 4  | 214,667,363 |
| 5  | Net unrealized gains (losses) on investments                                                                  | 5  |             |
| 6  | Donated services and use of facilities                                                                        | 6  |             |
| 7  | Investment expenses                                                                                           | 7  |             |
| 8  | Prior period adjustments                                                                                      | 8  |             |
| 9  | Other changes in net assets or fund balances (explain in Schedule O)                                          | 9  | 18,843,000  |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 234,257,043 |

Part XII Financial Statements and Reporting

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

|    |                                                                                                                                                                                                                                                                                                                                                                                                                          | Yes | No |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1  | Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O                                                                                                                                              |     |    |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis |     | No |
| 2b | Were the organization's financial statements audited by an independent accountant?<br>If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both<br><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                | Yes |    |
| 2c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O                                                                    | Yes |    |
| 3a | 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?                                                                                                                                                                                                                                                                 | Yes |    |
| 3b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits                                                                                                                                                                                                     | Yes |    |

Additional Data

Software ID:

Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

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

| (A)<br>Name and Title                                   | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                         |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (1) Terri L Ludwig<br>.....<br>trustee, PRESIDENT & CEO | 40 0<br>.....                                                                              | X                                                                                                         |                       | X       |              |                              |        | 539,007                                                              | 0                                                                         | 38,488                                                                                        |
| (1) bill beckmann<br>.....<br>trustee                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (2) raymond christman<br>.....<br>trustee               | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (3) sheila crowley<br>.....<br>trustee                  | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (4) edward norton<br>.....<br>trustee                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (5) tony salazar<br>.....<br>trustee                    | 1 0<br>.....<br>0 0                                                                        | X                                                                                                         |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (6) J ronald terwilliger<br>.....<br>trustee, chairman  | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (7) CHARLES r WERHANE<br>.....<br>TRUSTEE               | 40 0<br>.....                                                                              | X                                                                                                         |                       | X       |              |                              |        | 885,189                                                              |                                                                           | 117,643                                                                                       |
| (8) adam r flatto<br>.....<br>trustee                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (9) dora leong gallo<br>.....<br>trustee                | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (10) priscilla almodovar<br>.....<br>trustee            | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (11) gregory baer<br>.....<br>trustee                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (12) maria barry<br>.....<br>trustee                    | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (13) joseph brown<br>.....<br>trustee                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (14) rick lazio<br>.....<br>trustee                     | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (15) richard coles<br>.....<br>trustee                  | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (16) RAPHAEL BOSTIC<br>.....<br>TRUSTEE                 | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (17) LANCE FORS<br>.....<br>TRUSTEE                     | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (18) JOHN M REILLY<br>.....<br>TRUSTEE                  | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (19) chnstopher collins<br>.....<br>trustee             | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (20) beth myers<br>.....<br>trustee                     | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (21) BABARA POPPE<br>.....<br>TRUSTEE                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (22) DINA HABIB POWELL<br>.....<br>TRUSTEE              | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (23) RONALD RATNOR<br>.....<br>TRUSTEE                  | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (24) MEGAN SANDEL<br>.....<br>TRUSTEE                   | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| (A)<br>Name and Title                                                                                                                         | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|                                                                                                                                               |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (26) ROY SWAN<br>.....<br>TRUSTEE                                                                                                             | 1 0<br>.....                                                                               | X                                                                                                         |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (1) JEFFREY SCHAFFER<br>.....<br>vice president                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 220,967                                                              |                                                                           | 39,067                                                                                        |
| (2) WILLIAM R FREY<br>.....<br>senior VICE PRESIDENT                                                                                          | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 242,522                                                              |                                                                           | 33,972                                                                                        |
| (3) RICHARD d GROSS<br>.....<br>VICE PRESIDENT                                                                                                | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 228,907                                                              |                                                                           | 37,319                                                                                        |
| (4) MARK MCDERMOTT<br>.....<br>VICE PRESIDENT                                                                                                 | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 210,260                                                              |                                                                           | 39,850                                                                                        |
| (5) LORI michelle CHATMAN<br>.....<br>SENIOR VICE PRESIDENT                                                                                   | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 279,381                                                              |                                                                           | 19,890                                                                                        |
| (6) MICHAEL MCNEELY<br>.....<br>sR VP                                                                                                         | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 324,340                                                              |                                                                           | 19,890                                                                                        |
| (7) ABBY JO SIGAL<br>.....<br>SENIOR VICE PRESIDENT                                                                                           | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 166,395                                                              |                                                                           | 15,459                                                                                        |
| (8) Alan Scott Anderson<br>.....<br>VICE PRESIDENT                                                                                            | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 185,603                                                              |                                                                           | 39,622                                                                                        |
| (9) ALAZNE miren SOLIS<br>.....<br>senior VICE PRESIDENT                                                                                      | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 319,252                                                              |                                                                           | 35,195                                                                                        |
| (10) FAITH E THOMAS<br>.....<br>sVP &general counsel/secretary                                                                                | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 263,972                                                              |                                                                           | 34,023                                                                                        |
| (11) Matthew D Hoffman<br>.....<br>vice president                                                                                             | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 186,226                                                              |                                                                           | 40,501                                                                                        |
| (12) Meaghan E Vlkovic<br>.....<br>vice president                                                                                             | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 181,431                                                              |                                                                           | 35,165                                                                                        |
| (13) AMALIA M KASTBERG<br>.....<br>VICE PRESIDENT                                                                                             | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 262,167                                                              |                                                                           | 43,453                                                                                        |
| (14) MICHELLE WHETTEN<br>.....<br>VICE PRESIDENT                                                                                              | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 201,115                                                              |                                                                           | 22,193                                                                                        |
| (15) DAVID CHARLES BOWERS<br>.....<br>VICE PRESIDENT                                                                                          | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 203,847                                                              |                                                                           | 23,155                                                                                        |
| (16) Edward David Manekin<br>.....<br>vice president                                                                                          | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 169,005                                                              |                                                                           | 38,586                                                                                        |
| (17) mary ann leonard<br>.....<br>vice president                                                                                              | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 201,966                                                              |                                                                           | 31,825                                                                                        |
| (18) keith e fairey<br>.....<br>vice president                                                                                                | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 240,458                                                              |                                                                           | 36,703                                                                                        |
| (19) alex s avitabile<br>.....<br>vice president                                                                                              | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 184,300                                                              |                                                                           | 31,466                                                                                        |
| (20) petra d montaque<br>.....<br>vice president                                                                                              | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 167,974                                                              |                                                                           | 25,350                                                                                        |
| (21) karen lado<br>.....<br>vice president                                                                                                    | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 163,655                                                              |                                                                           | 31,659                                                                                        |
| (22) katherine w swenson<br>.....<br>vice president                                                                                           | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 175,860                                                              |                                                                           | 33,310                                                                                        |
| (23) anthony joseph dispigno<br>.....<br>senior vice president                                                                                | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 307,835                                                              |                                                                           | 45,511                                                                                        |
| (24) robert s grossinger<br>.....<br>vice president                                                                                           | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 206,706                                                              |                                                                           | 14,977                                                                                        |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors |                                                                                            |                                                                                                           |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| (A)<br>Name and Title                                                                                                                         | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|                                                                                                                                               |                                                                                            | Individual trustee or director                                                                            | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (51) Andrew Edward Geer<br>.....<br>vice president                                                                                            | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 179,712                                                              |                                                                           | 36,442                                                                                        |
| (1) Melinda J Pollack<br>.....<br>vice president                                                                                              | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 183,222                                                              |                                                                           | 33,779                                                                                        |
| (2) MARY JO BARRANCO<br>.....<br>VICE PRESIDENT                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 222,284                                                              |                                                                           | 42,883                                                                                        |
| (3) TIFFANY MANUEL<br>.....<br>VICE PRESIDENT                                                                                                 | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 172,017                                                              |                                                                           | 39,215                                                                                        |
| (4) benjamin nichols<br>.....<br>vice president                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 150,809                                                              |                                                                           | 34,398                                                                                        |
| (5) victoria sUSAN shire<br>.....<br>vice president                                                                                           | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 144,902                                                              |                                                                           | 37,285                                                                                        |
| (6) diane yental<br>.....<br>vice president                                                                                                   | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 172,416                                                              |                                                                           | 36,473                                                                                        |
| (7) angela boyd<br>.....<br>VICE PRESIDENT                                                                                                    | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 162,131                                                              |                                                                           | 17,972                                                                                        |
| (8) maryann Leshin<br>.....<br>vice president                                                                                                 | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 167,328                                                              |                                                                           | 36,168                                                                                        |
| (9) LAUREL BLACHFORD<br>.....<br>VICE PRESIDENT                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 252,319                                                              |                                                                           |                                                                                               |
| (10) ANDREW JOHNSTON<br>.....<br>VICE PRESIDENT                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 150,489                                                              | 85,232                                                                    | 17,676                                                                                        |
| (11) CRAIG MELLEDICK<br>.....<br>SENIOR VP, TREASURER, & CFO                                                                                  | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 256,314                                                              | 237,814                                                                   | 38,489                                                                                        |
| (12) JUDITH KENDe<br>.....<br>VICE PRESIDENT                                                                                                  | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 123,707                                                              |                                                                           | 7,749                                                                                         |
| (13) BRYAN PITTENGER<br>.....<br>VICE PRESIDENT                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 103,180                                                              | 68,364                                                                    | 30,503                                                                                        |
| (14) EUN SHIN<br>.....<br>VICE PRESIDENT                                                                                                      | 40 0<br>.....                                                                              |                                                                                                           |                       | X       |              |                              |        | 187,230                                                              |                                                                           | 15,048                                                                                        |
| (15) jacqueline waggoner<br>.....<br>DRM & DEputy director                                                                                    | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              | X                            |        | 180,938                                                              |                                                                           | 21,966                                                                                        |
| (16) jon searles<br>.....<br>deputy director & PR Director                                                                                    | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              | X                            |        | 180,138                                                              |                                                                           | 19,453                                                                                        |
| (17) andrew jakabovics<br>.....<br>senior director                                                                                            | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              | X                            |        | 172,838                                                              |                                                                           | 34,497                                                                                        |
| (18) CATHERINE HYDE<br>.....<br>SENIOR DIRECTOR                                                                                               | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              | X                            |        | 149,096                                                              |                                                                           | 35,708                                                                                        |
| (19) KAREN LORD<br>.....<br>CONTROLLER                                                                                                        | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              | X                            |        | 148,815                                                              |                                                                           | 17,692                                                                                        |
| (20) NAOMI s BAYER<br>.....<br>senior VICE PRESIDENT                                                                                          | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              |                              | X      | 318,867                                                              |                                                                           | 41,216                                                                                        |
| (21) PAUL M CUMMINGS<br>.....<br>senior vice president                                                                                        | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              |                              | X      | 327,457                                                              |                                                                           | 7,569                                                                                         |
| (22) thomas osboda<br>.....<br>vice president                                                                                                 | 40 0<br>.....                                                                              |                                                                                                           |                       |         |              |                              | X      | 182,168                                                              | 49                                                                        | 17,331                                                                                        |

SCHEDULE A  
(Form 990 or 990EZ)

Department of the  
Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

|                                                               |                                              |
|---------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>ENTERPRISE COMMUNITY PARTNERS INC | Employer identification number<br>52-1231931 |
|---------------------------------------------------------------|----------------------------------------------|

Part I

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 )

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9

☐

An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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 See **section 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g
- a

☐

**Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

**Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

**Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

**Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☒

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations . . . . . \_\_\_\_\_
- g

Provide the following information about the supported organization(s)

| (i)Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|-----------------------------------|----------|----------------------------------------------------------------------------------------------|-------------------------------------------------------------|----|---------------------------------------------------|-------------------------------------------------|
|                                   |          |                                                                                              | Yes                                                         | No |                                                   |                                                 |
|                                   |          |                                                                                              |                                                             |    |                                                   |                                                 |
|                                   |          |                                                                                              |                                                             |    |                                                   |                                                 |
| Total                             |          |                                                                                              |                                                             |    |                                                   |                                                 |

Part II

Support Schedule for Organizations Described in Sections 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.)

| Section A. Public Support                                                                                                                                                                             |            |            |            |            |            |             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|------------|------------|-------------|
| Calendar year (or fiscal year beginning in) ▶                                                                                                                                                         | (a) 2010   | (b) 2011   | (c) 2012   | (d) 2013   | (e) 2014   | (f) Total   |
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")                                                                                                   | 30,253,043 | 44,273,272 | 45,074,369 | 53,644,487 | 55,656,679 | 228,901,850 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf                                                                                                     |            |            |            |            |            | 0           |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge                                                                                             |            |            |            |            |            | 0           |
| 4 Total. Add lines 1 through 3                                                                                                                                                                        | 30,253,043 | 44,273,272 | 45,074,369 | 53,644,487 | 55,656,679 | 228,901,850 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) |            |            |            |            |            | 8,075,164   |
| 6 Public support. Subtract line 5 from line 4                                                                                                                                                         |            |            |            |            |            | 220,826,686 |

| Section B. Total Support                                                                                                                                                                   |            |            |            |            |            |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|------------|------------|-------------|
| Calendar year (or fiscal year beginning in) ▶                                                                                                                                              | (a) 2010   | (b) 2011   | (c) 2012   | (d) 2013   | (e) 2014   | (f) Total   |
| 7 Amounts from line 4                                                                                                                                                                      | 30,253,043 | 44,273,272 | 45,074,369 | 53,644,487 | 55,656,679 | 228,901,850 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources                                                           | 5,111,324  | 6,653,836  | 5,536,575  | 4,691,954  | 5,105,125  | 27,098,814  |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on                                                                                       |            |            |            |            |            | 0           |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)                                                                                         |            |            |            |            |            | 0           |
| 11 Total support. Add lines 7 through 10                                                                                                                                                   |            |            |            |            |            | 256,000,664 |
| 12 Gross receipts from related activities, etc. (see instructions)                                                                                                                         |            |            |            |            | 12         | 51,260,317  |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . . |            |            |            |            |            |             |

| Section C. Computation of Public Support Percentage                                                                                                                                                                                                                                                                                                                                          |    |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------|
| 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))                                                                                                                                                                                                                                                                                                    | 14 | 86 260 % |
| 15 Public support percentage for 2013 Schedule A, Part II, line 14                                                                                                                                                                                                                                                                                                                           | 15 | 82 574 % |
| 16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization                                                                                                                                                                           |    |          |
| b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization                                                                                                                                                                        |    |          |
| 17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization    |    |          |
| b 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization |    |          |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions                                                                                                                                                                                                                                                        |    |          |

Part IIISupport Schedule for Organizations Described in Section 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 in) ▶                                                                                                                              | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")                                                                        |          |          |          |          |          |           |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513                                                                             |          |          |          |          |          |           |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf                                                                          |          |          |          |          |          |           |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge                                                                  |          |          |          |          |          |           |
| 6 Total. Add lines 1 through 5                                                                                                                                             |          |          |          |          |          |           |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons                                                                                                |          |          |          |          |          |           |
| b 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                                                                                                                                                      |          |          |          |          |          |           |
| 8 Public support (Subtract line 7c from line 6.)                                                                                                                           |          |          |          |          |          |           |

| Section B. Total Support                                                                                                                                                           |          |          |          |          |          |           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) ▶                                                                                                                                      | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 9 Amounts from line 6                                                                                                                                                              |          |          |          |          |          |           |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources                                                 |          |          |          |          |          |           |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975                                                                          |          |          |          |          |          |           |
| c Add lines 10a and 10b                                                                                                                                                            |          |          |          |          |          |           |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on                                                     |          |          |          |          |          |           |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)                                                                                 |          |          |          |          |          |           |
| 13 Total support. (Add lines 9, 10c, 11, and 12.)                                                                                                                                  |          |          |          |          |          |           |
| 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ |          |          |          |          |          |           |

| Section C. Computation of Public Support Percentage                                       |    |  |  |
|-------------------------------------------------------------------------------------------|----|--|--|
| 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) | 15 |  |  |
| 16 Public support percentage from 2013 Schedule A, Part III, line 15                      | 16 |  |  |

| Section D. Computation of Investment Income Percentage                                                                                                                                                                                                               |    |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|--|
| 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))                                                                                                                                                                       | 17 |  |  |
| 18 Investment income percentage from 2013 Schedule A, Part III, line 17                                                                                                                                                                                              | 18 |  |  |
| 19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶        |    |  |  |
| b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ |    |  |  |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶                                                                                                                                        |    |  |  |

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.                                                                                                                                                                                                         | 1   |    |
| 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).                                                                                                                                                                                                                                      | 2   |    |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.                                                                                                                                                                                                                                                                                                                                                                                       | 3a  |    |
| b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.                                                                                                                                                                                                                                                    | 3b  |    |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.                                                                                                                                                                                                                                                                                             | 3c  |    |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.                                                                                                                                                                                                                                                                                                                                         | 4a  |    |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.                                                                                                                                                                                                        | 4b  |    |
| c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.                                                                                                                                                                           | 4c  |    |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a  |    |
| b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?                                                                                                                                                                                                                                                                                                                                                           | 5b  |    |
| c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?                                                                                                                                                                                                                                                                                                                                                                                                                  | 5c  |    |
| 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .                                                     | 6   |    |
| 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).                                                                                                                                                                                              | 7   |    |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).                                                                                                                                                                                                                                                                                                                                                       | 8   |    |
| 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .                                                                                                                                                                                                                              | 9a  |    |
| b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .                                                                                                                                                                                                                                                                                                                | 9b  |    |
| c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .                                                                                                                                                                                                                                                                                     | 9c  |    |
| 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.                                                                                                                                                                                                                                                             | 10a |    |
| b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).                                                                                                                                                                                                                                                                                                                                                   | 10b |    |
| 11 Has the organization accepted a gift or contribution from any of the following persons?                                                                                                                                                                                                                                                                                                                                                                                                                                   |     |    |
| a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?                                                                                                                                                                                                                                                                                                                                                        | 11a |    |
| b A family member of a person described in (a) above?                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 11b |    |
| c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.                                                                                                                                                                                                                                                                                                                                                                                                      | 11c |    |

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. |     |    |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.                                                                                                                                                                                                                                                                              |     |    |

Section C. Type II Supporting Organizations

|                                                                                                                                                                                                                                                                                                                                                                               | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). |     |    |

Section D. All Type III Supporting Organizations

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? |     |    |
| 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).                                                                                                                    |     |    |
| 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.                                                                                       |     |    |

Section E. Type III Functionally-Integrated Supporting Organizations

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|--|
| 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)                                                                                                                                                                                                                                                                                                                                                                                               |    |  |  |
| a <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.                                                                                                                                                                                                                                                                                                                                                                                                                         |    |  |  |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.                                                                                                                                                                                                                                                                                                                                                                                                  |    |  |  |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).                                                                                                                                                                                                                                                                                                                                                                       |    |  |  |
| 2 <u>Activities Test</u> <b>Answer (a) and (b) below.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |  |  |
| a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a |  |  |
| b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.                                                                                                                              | 2b |  |  |
| 3 <u>Parent of Supported Organizations</u> <b>Answer (a) and (b) below.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |  |  |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.                                                                                                                                                                                                                                                                                                                                       | 3a |  |  |
| b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.                                                                                                                                                                                                                                                                                           | 3b |  |  |

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

| Section A - Adjusted Net Income |                                                                                                                                                                                                          | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------|
| 1                               | Net short-term capital gain                                                                                                                                                                              | 1              |                             |
| 2                               | Recoveries of prior-year distributions                                                                                                                                                                   | 2              |                             |
| 3                               | Other gross income (see instructions)                                                                                                                                                                    | 3              |                             |
| 4                               | Add lines 1 through 3                                                                                                                                                                                    | 4              |                             |
| 5                               | Depreciation and depletion                                                                                                                                                                               | 5              |                             |
| 6                               | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6              |                             |
| 7                               | Other expenses (see instructions)                                                                                                                                                                        | 7              |                             |
| 8                               | <b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)                                                                                                                                       | 8              |                             |

| Section B - Minimum Asset Amount |                                                                                                                                | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------|
| 1                                | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1              |                             |
| a                                | Average monthly value of securities                                                                                            | 1a             |                             |
| b                                | Average monthly cash balances                                                                                                  | 1b             |                             |
| c                                | Fair market value of other non-exempt-use assets                                                                               | 1c             |                             |
| d                                | <b>Total</b> (add lines 1a, 1b, and 1c)                                                                                        | 1d             |                             |
| e                                | <b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI) _____                                     |                |                             |
| 2                                | Acquisition indebtedness applicable to non-exempt use assets                                                                   | 2              |                             |
| 3                                | Subtract line 2 from line 1d                                                                                                   | 3              |                             |
| 4                                | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)                                  | 4              |                             |
| 5                                | Net value of non-exempt-use assets (subtract line 4 from line 3)                                                               | 5              |                             |
| 6                                | Multiply line 5 by .035                                                                                                        | 6              |                             |
| 7                                | Recoveries of prior-year distributions                                                                                         | 7              |                             |
| 8                                | <b>Minimum Asset Amount</b> (add line 7 to line 6)                                                                             | 8              |                             |

| Section C - Distributable Amount |                                                                                                                                                                          |   | Current Year |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|--------------|
| 1                                | Adjusted net income for prior year (from Section A, line 8, Column A)                                                                                                    | 1 |              |
| 2                                | Enter 85% of line 1                                                                                                                                                      | 2 |              |
| 3                                | Minimum asset amount for prior year (from Section B, line 8, Column A)                                                                                                   | 3 |              |
| 4                                | Enter greater of line 2 or line 3                                                                                                                                        | 4 |              |
| 5                                | Income tax imposed in prior year                                                                                                                                         | 5 |              |
| 6                                | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)                                             | 6 |              |
| 7                                | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) |   |              |

| Section D - Distributions                                                                                                                  | Current Year |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes                                                                    |              |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity    |              |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations                                                    |              |
| 4 Amounts paid to acquire exempt-use assets                                                                                                |              |
| 5 Qualified set-aside amounts (prior IRS approval required)                                                                                |              |
| 6 Other distributions (describe in Part VI) See instructions                                                                               |              |
| 7 Total annual distributions. Add lines 1 through 6                                                                                        |              |
| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions |              |
| 9 Distributable amount for 2014 from Section C, line 6                                                                                     |              |
| 10 Line 8 amount divided by Line 9 amount                                                                                                  |              |

| Section E - Distribution Allocations (see instructions)                                                                                             | (i)<br>Excess Distributions | (ii)<br>Underdistributions<br>Pre-2014 | (iii)<br>Distributable<br>Amount for 2014 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------|-------------------------------------------|
| 1 Distributable amount for 2014 from Section C, line 6                                                                                              |                             |                                        |                                           |
| 2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)                                                 |                             |                                        |                                           |
| 3 Excess distributions carryover, if any, to 2014                                                                                                   |                             |                                        |                                           |
| a From 2009. . . . .                                                                                                                                |                             |                                        |                                           |
| b From 2010. . . . .                                                                                                                                |                             |                                        |                                           |
| c From 2011. . . . .                                                                                                                                |                             |                                        |                                           |
| d From 2012. . . . .                                                                                                                                |                             |                                        |                                           |
| e From 2013. . . . .                                                                                                                                |                             |                                        |                                           |
| f Total of lines 3a through e                                                                                                                       |                             |                                        |                                           |
| g Applied to underdistributions of prior years                                                                                                      |                             |                                        |                                           |
| h Applied to 2014 distributable amount                                                                                                              |                             |                                        |                                           |
| i Carryover from 2009 not applied (see instructions)                                                                                                |                             |                                        |                                           |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f                                                                                                   |                             |                                        |                                           |
| 4 Distributions for 2014 from Section D, line 7<br>\$                                                                                               |                             |                                        |                                           |
| a Applied to underdistributions of prior years                                                                                                      |                             |                                        |                                           |
| b Applied to 2014 distributable amount                                                                                                              |                             |                                        |                                           |
| c Remainder Subtract lines 4a and 4b from 4                                                                                                         |                             |                                        |                                           |
| 5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) |                             |                                        |                                           |
| 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)                        |                             |                                        |                                           |
| 7 Excess distributions carryover to 2015. Add lines 3j and 4c                                                                                       |                             |                                        |                                           |
| 8 Breakdown of line 7                                                                                                                               |                             |                                        |                                           |
| a From 2010. . . . .                                                                                                                                |                             |                                        |                                           |
| b From 2011. . . . .                                                                                                                                |                             |                                        |                                           |
| c From 2012. . . . .                                                                                                                                |                             |                                        |                                           |
| d From 2013. . . . .                                                                                                                                |                             |                                        |                                           |
| e From 2014. . . . .                                                                                                                                |                             |                                        |                                           |

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

**Facts And Circumstances Test**

Return Reference

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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.**

▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at**

***www.irs.gov/form990.***

OMB No 1545-0047

2014

Open to Public Inspection

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

- 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

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

|                                                               |                                              |
|---------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>ENTERPRISE COMMUNITY PARTNERS INC | Employer identification number<br>52-1231931 |
|---------------------------------------------------------------|----------------------------------------------|

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

|   |                                                                                                          |      |
|---|----------------------------------------------------------------------------------------------------------|------|
| 1 | Provide a description of the organization's direct and indirect political campaign activities in Part IV |      |
| 2 | Political expenditures                                                                                   | ▶ \$ |
| 3 | Volunteer hours                                                                                          |      |

Part 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 | ▶ \$                                                     |
| 3  | If the organization incurred a section 4955 tax, did it file Form 4720 for this year?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made?                                                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b  | If "Yes," describe in Part IV                                                           |                                                          |

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                          |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities                                                                                                                                                                                                                                                                                                                                                                                                                                | ▶ \$                                                     |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities                                                                                                                                                                                                                                                                                                                                                                                                       | ▶ \$                                                     |
| 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 <b>Form 1120-POL</b> for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5 | Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 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) Amount paid from filing organization's funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|----------|-------------|---------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
|          |             |         |                                                                     |                                                                                                                                            |
|          |             |         |                                                                     |                                                                                                                                            |
|          |             |         |                                                                     |                                                                                                                                            |
|          |             |         |                                                                     |                                                                                                                                            |
|          |             |         |                                                                     |                                                                                                                                            |
|          |             |         |                                                                     |                                                                                                                                            |
|          |             |         |                                                                     |                                                                                                                                            |

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- 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)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures<br>(The term "expenditures" means amounts paid or incurred.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                   | (a) Filing organization's totals                                    | (b) Affiliated group totals        |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------|------------------------------------|--------------------|------------------------------|-----------------------------------------|-------------------------------------------------|-------------------------------------------|---------------------------------------------------|--------------------------------------------|--------------------------------------------------|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                   | 165,316                                                             |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| b Total lobbying expenditures to influence a legislative body (direct lobbying)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                   | 592,560                                                             |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| c Total lobbying expenditures (add lines 1a and 1b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   | 757,876                                                             |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| d Other exempt purpose expenditures                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   | 67,797,279                                                          |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| e Total exempt purpose expenditures (add lines 1c and 1d)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                   | 68,555,155                                                          |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                   | 1,000,000                                                           |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table> |                                                   | If the amount on line 1e, column (a) or (b) is:                     | The lobbying nontaxable amount is: | Not over \$500,000 | 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 |  |  |
| If the amount on line 1e, column (a) or (b) is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | The lobbying nontaxable amount is:                |                                                                     |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Not over \$500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 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                                       |                                                                     |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| g Grassroots nontaxable amount (enter 25% of line 1f)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                   | 250,000                                                             |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| h Subtract line 1g from line 1a If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                   |                                                                     |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| i Subtract line 1f from line 1c If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                   |                                                                     |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |

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 separate instructions for lines 2a through 2f.)

| Lobbying Expenditures During 4-Year Averaging Period         |           |           |           |           |           |
|--------------------------------------------------------------|-----------|-----------|-----------|-----------|-----------|
| Calendar year (or fiscal year beginning in)                  | (a) 2011  | (b) 2012  | (c) 2013  | (d) 2014  | (e) Total |
| 2a Lobbying nontaxable amount                                | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 | 4,000,000 |
| b Lobbying ceiling amount<br>(150% of line 2a, column(e))    |           |           |           |           | 6,000,000 |
| c Total lobbying expenditures                                | 645,324   | 877,469   | 584,872   | 757,876   | 2,865,541 |
| d Grassroots nontaxable amount                               | 250,000   | 250,000   | 250,000   | 250,000   | 1,000,000 |
| e Grassroots ceiling amount<br>(150% of line 2d, column (e)) |           |           |           |           | 1,500,000 |
| f Grassroots lobbying expenditures                           | 24,596    | 26,718    | 25,385    | 165,316   | 242,015   |

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. |                                                                                                                                                                                                                              | (a) |    | (b)    |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------|
|                                                                                                                           |                                                                                                                                                                                                                              | Yes | No | Amount |
| 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 |     |    |        |
| a                                                                                                                         | 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?                                                                                                                                                                             |     |    |        |
| e                                                                                                                         | 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                                                                                                                         | Other activities?                                                                                                                                                                                                            |     |    |        |
| j                                                                                                                         | Total. Add 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?                                                                                                                                 |     |    |        |

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

|   |                                                                                                   |   |     |    |
|---|---------------------------------------------------------------------------------------------------|---|-----|----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members?                      | 1 | Yes | No |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less?                 | 2 |     |    |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 |     |    |

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

|   |                                                                                                                                                                                                                                            |    |  |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|
| 1 | Dues, assessments and similar amounts from members                                                                                                                                                                                         | 1  |  |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).                                                                                 |    |  |
| a | 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

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

| Return Reference | Explanation |
|------------------|-------------|
|                  |             |
|                  |             |
|                  |             |
|                  |             |
|                  |             |
|                  |             |
|                  |             |

[illegible]

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, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

|                                                               |                                              |
|---------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>ENTERPRISE COMMUNITY PARTNERS INC | Employer identification number<br>52-1231931 |
|---------------------------------------------------------------|----------------------------------------------|

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

|   | (a) Donor advised funds                                                                                                                                                                                                                                                                                                                 | (b) Funds and other accounts |
|---|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| 1 | Total number at end of year                                                                                                                                                                                                                                                                                                             |                              |
| 2 | Aggregate value of contributions to (during year)                                                                                                                                                                                                                                                                                       |                              |
| 3 | Aggregate value of grants from (during year)                                                                                                                                                                                                                                                                                            |                              |
| 4 | Aggregate value at end of year                                                                                                                                                                                                                                                                                                          |                              |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>                                                            |                              |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> |                              |

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

|   |                                                                                                                                          |
|---|------------------------------------------------------------------------------------------------------------------------------------------|
|   | Held at the End of the Year                                                                                                              |
| a | Total number of conservation easements                                                                                                   |
| b | Total acreage restricted by conservation easements                                                                                       |
| c | Number of conservation easements on a certified historic structure included in (a)                                                       |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register |

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2014

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3 Using the organization’s acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other
- 4 Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII
- 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection? 

☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 

☐ Yes ☒ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table
- |                                  |        |
|----------------------------------|--------|
|                                  | Amount |
| 1c Beginning balance             |        |
| 1d Additions during the year     |        |
| 1e Distributions during the year |        |
| 1f Ending balance                |        |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 

☒ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII 

☒

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

|                                                            | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|------------------------------------------------------------|-----------------|---------------|---------------------|---------------------|--------------------|
| 1a Beginning of year balance . . . . .                     |                 |               |                     |                     |                    |
| b Contributions . . . . .                                  |                 |               |                     |                     |                    |
| c Net investment earnings, gains, and 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 current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

3a(i)

3a(ii)

3b

Yes

No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

4 Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property                                                                                      | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land . . . . .                                                                                            |                                      |                                |                              |                |
| b Buildings . . . . .                                                                                        |                                      |                                |                              |                |
| c Leasehold improvements . . . . .                                                                           |                                      | 1,877,675                      | 1,094,919                    | 782,756        |
| d Equipment . . . . .                                                                                        |                                      | 2,483,898                      | 1,794,202                    | 689,696        |
| e Other . . . . .                                                                                            |                                      | 7,152,111                      | 4,034,123                    | 3,117,988      |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶ |                                      |                                |                              | 4,590,440      |



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

|   |                                                                                          |    |    |  |
|---|------------------------------------------------------------------------------------------|----|----|--|
| 1 | Total revenue, gains, and other support per audited financial statements . . . . .       |    | 1  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12                       |    |    |  |
| a | Net unrealized gains (losses) on investments . . . . .                                   | 2a |    |  |
| b | Donated services and use of facilities . . . . .                                         | 2b |    |  |
| c | Recoveries of prior year grants . . . . .                                                | 2c |    |  |
| d | Other (Describe in Part XIII ) . . . . .                                                 | 2d |    |  |
| e | Add lines 2a through 2d . . . . .                                                        |    | 2e |  |
| 3 | Subtract line 2e from line 1 . . . . .                                                   |    | 3  |  |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1                      |    |    |  |
| a | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .               | 4a |    |  |
| b | Other (Describe in Part XIII ) . . . . .                                                 | 4b |    |  |
| c | Add lines 4a and 4b . . . . .                                                            |    | 4c |  |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . . |    | 5  |  |

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

|   |                                                                                           |    |    |  |
|---|-------------------------------------------------------------------------------------------|----|----|--|
| 1 | Total expenses and losses per audited financial statements . . . . .                      |    | 1  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25                          |    |    |  |
| a | Donated services and use of facilities . . . . .                                          | 2a |    |  |
| b | Prior year adjustments . . . . .                                                          | 2b |    |  |
| c | Other losses . . . . .                                                                    | 2c |    |  |
| d | Other (Describe in Part XIII ) . . . . .                                                  | 2d |    |  |
| e | 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:                        |    |    |  |
| a | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                | 4a |    |  |
| b | Other (Describe in Part XIII ) . . . . .                                                  | 4b |    |  |
| c | Add lines 4a and 4b . . . . .                                                             |    | 4c |  |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . . |    | 5  |  |

Part XIII

Supplemental Information

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 X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference        | Explanation                                                                                                                                                                                                                                                        |
|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FUNDS HELD FOR OTHERS   | 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    | ENTERPRISE COMMUNITY PARTNERS, INC. DID NOT HAVE ANY UNRELATED BUSINESS INCOME DURING THE YEAR ENDED DECEMBER 31, 2014. ACCORDINGLY, NO PROVISION OR BENEFIT FROM INCOME TAXES HAS BEEN RECORDED.                                                                  |
| UNCERTAIN TAX POSITIONS | FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013, THE ORGANIZATION DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS.                                                              |
|                         |                                                                                                                                                                                                                                                                    |
|                         |                                                                                                                                                                                                                                                                    |
|                         |                                                                                                                                                                                                                                                                    |

[illegible]

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

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.  
Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number  
52-1231931

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

b

☐ Internet and email solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

| (i) Name and address of individual or entity (fundraiser)                                    | (ii) Activity        | (iii) Did fundraiser have custody or control of contributions? |    | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
|----------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------|----|-----------------------------------|------------------------------------------------------------------|---------------------------------------------------|
|                                                                                              |                      | Yes                                                            | No |                                   |                                                                  |                                                   |
| 1 SOCIAL CAPITAL PARTNERSHIPS<br>980 NORTH MICHIGAN AVENUE SUITE 16<br><br>CHICAGO, IL 60611 | FUNDRAISING CAMPAIGN |                                                                | No |                                   | 319,135                                                          |                                                   |
| 2 LYNDA A OSHINSKIE<br>HOUSEHOLD<br>212 COVENTRY LANE<br><br>FAIRFIELD, CT 06824             | EVENT CONSULTING     |                                                                | No |                                   | 37,350                                                           |                                                   |
| 3 ANNE BARNEY<br>PO BOX 146<br><br>GREAT CACAPON, WV 25422                                   | WRITING SERVICES     |                                                                | No |                                   | 18,664                                                           |                                                   |
| 4 SOPHIST PRODUCTIONS<br>2-01 50TH AVENUE SUITE 22H<br><br>LONG ISLAND, NY 11101             | FUNDRAISING CAMPAIGN |                                                                | No |                                   | 5,750                                                            |                                                   |
| 5                                                                                            |                      |                                                                |    |                                   |                                                                  |                                                   |
| 6                                                                                            |                      |                                                                |    |                                   |                                                                  |                                                   |
| 7                                                                                            |                      |                                                                |    |                                   |                                                                  |                                                   |
| 8                                                                                            |                      |                                                                |    |                                   |                                                                  |                                                   |
| 9                                                                                            |                      |                                                                |    |                                   |                                                                  |                                                   |
| 10                                                                                           |                      |                                                                |    |                                   |                                                                  |                                                   |
| Total . . . . .                                                                              |                      |                                                                |    |                                   | 380,899                                                          |                                                   |

3

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| Revenue         |                                    |                                                                         | (a) Event #1   | (b) Event #2     | (c) Other events | (d) Total events     |           |
|-----------------|------------------------------------|-------------------------------------------------------------------------|----------------|------------------|------------------|----------------------|-----------|
|                 |                                    |                                                                         | <u>NY gala</u> | <u>LA Social</u> | <u>1</u>         | (add col (a) through |           |
|                 |                                    |                                                                         | (event type)   | (event type)     | (total number)   | col (c))             |           |
|                 |                                    |                                                                         |                |                  |                  |                      |           |
| 1               | Gross receipts                     | . . .                                                                   | 1,046,305      | 214,815          | 174,600          | 1,435,720            |           |
| 2               | Less Contributions                 | . .                                                                     | 889,365        | 170,565          | 140,100          | 1,200,030            |           |
| 3               | Gross income (line 1 minus line 2) | . . .                                                                   | 156,940        | 44,250           | 34,500           | 235,690              |           |
| Direct Expenses | 4                                  | Cash prizes                                                             | . . .          |                  |                  |                      |           |
|                 | 5                                  | Noncash prizes                                                          | . .            | 2,695            |                  | 2,695                |           |
|                 | 6                                  | Rent/facility costs                                                     | . .            | 191,966          | 77,870           | 100,653              | 370,489   |
|                 | 7                                  | Food and beverages                                                      | .              |                  |                  |                      |           |
|                 | 8                                  | Entertainment                                                           | . . .          |                  |                  |                      |           |
|                 | 9                                  | Other direct expenses                                                   | .              | 162,378          | 18,895           | 14,210               | 195,483   |
|                 | 10                                 | Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶  |                |                  |                  |                      | (568,667) |
|                 | 11                                 | Net income summary Subtract line 10 from line 3, column (d) . . . . . ▶ |                |                  |                  |                      | -332,977  |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

|                 |   | (a) Bingo                                                                                        | (b) Pull tabs/Instant bingo/progressive bingo                       | (c) Other gaming                                                    | (d) Total gaming (add col (a) through col (c)) |
|-----------------|---|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------|
|                 |   |                                                                                                  |                                                                     |                                                                     |                                                |
| Revenue         | 1 | Gross revenue . . . . .                                                                          |                                                                     |                                                                     |                                                |
|                 | 2 | Cash prizes . . . . .                                                                            |                                                                     |                                                                     |                                                |
| Direct Expenses | 3 | Non-cash prizes . . . . .                                                                        |                                                                     |                                                                     |                                                |
|                 | 4 | Rent/facility costs . . . . .                                                                    |                                                                     |                                                                     |                                                |
|                 | 5 | Other direct expenses . . . .                                                                    |                                                                     |                                                                     |                                                |
|                 | 6 | Volunteer labor . . . . .<br><input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No |                                                |
|                 | 7 | Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶                           |                                                                     |                                                                     |                                                |
|                 | 8 | Net gaming income summary Subtract line 7 from line 1, column (d) . . . . . ▶                    |                                                                     |                                                                     |                                                |

9 Enter the state(s) in which the organization conducts gaming activities \_\_\_\_\_

a Is the organization licensed to conduct gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11

Does the organization conduct gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activities conducted in

|   |                             |     |   |
|---|-----------------------------|-----|---|
| a | The organization's facility | 13a | % |
| b | An outside facility         | 13b | % |

14

Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization and the amount of gaming revenue retained by the third party

\$ and the \$

c

If "Yes," enter name and address of the third party

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

Description of services provided

☐ Director/officer

☐ Employee

☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year

\$

Part IV

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

| Return Reference | Explanation |
|------------------|-------------|
|------------------|-------------|

Schedule G (Form 990 or 990-EZ) 2014

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public  
Inspection

Name of the organization  
ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number  
52-1231931

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------|---------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| See Additional Data Table                          |         |                               |                          |                                   |                                                       |                                        |                                    |

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

▶

3

Enter total number of other organizations listed in the line 1 table . . . . .

▶

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

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

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

| Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| part I, Line 2   | <p>HUD Section 4 Program ThY majority of pass through funding utilized by Enterprise is through the Section 4 program, a capacity building program administered by the Department of Housing &amp; Urban Development Each year since the early 1990s, Congress has appropriated funds to the Section 4 program Eligible applicants for this funding have been limited to Habitat for Humanity, Local Initiatives Support Corporation, and Enterprise Community Partners Of each annual award received a portion of the funds is 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 Grants and Contracts Management for processing Some work plans include funding for predevelopment and working capital loans These loans are administered by Enterprise Community Loan Fund Privately Funded Grants Enterprise receives funds from various private funding sources Some funders include Citi Foundation, Bank of America, Kresge Foundation, etc Many of the private funders restrict the uses of their funds to specific programs, geography or uses Enterprise program staff determines the most appropriate use of these funds within their specific program areas Typical uses of private funding include staff time, pass through grants and consultants Pass Through Grant Process Once an organization has been selected to receive a grant, a grant request is completed and submitted to Grants and Contracts Management We utilize the "cloud" based Salesforce system whereby Enterprise field staff enter and upload all required information into a grant request A grant request consists of work plan, budget, organizational due diligence documents such as financial audits, financial assessment, etc Field staff initiate a workflow process in Salesforce to request and document approvals from program staff, funding managers, and Grants and Contracts Management staff Grants and Contracts Management utilize Salesforce and complementary software to generate the grant agreement and documents are reviewed for compliance with funder program and budget requirements The organization's status is also checked on "Charity Check" and against the federal government's System for Award Management After compliance review is complete, a grant agreement is emailed via an Adobe-Flash supported link to Salesforce to the organization with instructions to print out two copies, sign both copies and return to Enterprise for counter signature We accept either scanned copies of the signed originals or hard copies Upon receipt, one original fully executed copy of the grant agreement is mailed back to the organization, and one original agreement is maintained at Enterprise's headquarters To receive grant funds, the organization must complete and submit a disbursement request form which contains a narrative progress report and a line item budget to actual form which lists the expenses that were incurred during the requested timeframe or pursuant to the terms of the specific grant award The disbursement request is reviewed and approved for payment by the program staff and then forwarded to Contracts Administration via a Salesforce workflow process, and reviewed for compliance and validation Once Contracts verifies that all documentation is in order, project codes are correct and that there is available funding, the disbursement request is forwarded via hard copy to Accounting for payment</p> |

Additional Data

Software ID:  
Software Version:  
EIN: 52-1231931  
Name: ENTERPRISE COMMUNITY PARTNERS INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government      | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Heartland Housing Inc208 S LaSalle<br>BROOKLYN,NY 11231 | 36-3642952 | 501(c)(3)                          | 741,163                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                        | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| NUESTRA COMUNIDAD DEVELOPMENT CORPORATION56 WARREN STREET Gallup,NM 87305 | 04-2741543 | 501(c)(3)                          | 441,857                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PathStone Corporation400 East Avenue Santa Monica, CA 90401 | 16-0984913 | 501(c)(3)                          | 428,977                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| CLEVELAND HOUSING NETWORK INC2999 PAYNE AVENUE<br>BILOXI,MS 39530 | 34-1346763 | 501(c)(3)                          | 405,991                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| The San Francisco FoundationOne Embarcadero Center<br>SEATTLE, WA 981042304 | 01-0679337 | 501(c)(3)                          | 375,000                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government              | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CAMBA Housing Ventures Inc1720 Church Avenue NEW YORK, NY 10002 | 55-0881162 | 501(c)(3)                          | 357,392                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                      | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Providence Community Housing1050 South Jefferson Davis Parkway CHRISTIANSBURG, VA 24073 | 20-4627275 | 501(c)(3)                          | 306,152                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HANAC INC49 WEST 45th STREET<br>Seattle,WA 98101   | 11-2290832 | 501(c)(3)                          | 300,000                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| ENTERPRISE LOUISIANA<br>LOAN FUND643 Magazine<br>Street<br>Chicago,IL 60637 | 47-1718653 | 501(c)(3)                          | 297,044                  |                                   |                                                        |                                        | CAPACITY<br>BUILDING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MONTGOMERY HOUSING PARTNERSHIP INC12200 Tech Road Wayne, WV 25570 | 52-1631939 | 501(c)(3)                          | 277,749                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| JUBILEE HOUSING INC<br>1640 Columbia Road NW<br>Seattle, WA 98144 | 52-0986261 | 501(c)(3)                          | 267,387                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government     | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Famicos Foundation Inc1325 Ansel Road Chicago,IL 60637 | 34-1053534 | 501(c)(3)                          | 255,373                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                    | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CommonBond Communities<br>328 Kellogg Blvd W<br>Seattle, WA 981222014 | 41-1260469 | 501(c)(3)                          | 253,370                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                      | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| NEIGHBORHOOD PROGRESS INC11327<br>Shaker Boulevard<br>St Paul, MN 55116 | 34-1611055 | 501(c)(3)                          | 205,000                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government        | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| El Centro de la Raza Development Office Chicago, IL 60637 | 91-0899927 | 501(c)(3)                          | 204,817                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                                 | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| RENAISSANCE<br>NEIGHBORHOOD<br>DEVELOPMENT<br>CORPORATION4162 Canal<br>Street<br>NEW YORK,NY 10032 | 20-8947208 | 501(c)(3)                          | 197,649                  |                                   |                                                        |                                        | CAPACITY<br>BUILDING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PHIOne Trinity Drive East<br>Santa Monica, CA 90401 | 23-1381404 | 501(c)(3)                          | 161,271                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CATHEDRAL SQUARE CORPORATION412 FARRELL STREET Brooklyn, NY 11224 | 03-0264362 | 501(c)(3)                          | 160,723                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                     | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Harmony Neighborhood Development3301 LaSalle Street<br>Miami, FL 33135 | 72-1436907 | 501(c)(3)                          | 150,509                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government         | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| A New Leaf868 E University Drive<br>PHILADELPHIA, PA 19103 | 86-0256667 | 501(c)(3)                          | 150,000                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HOUSING INITIATIVE<br>PARTNERSHIP6525<br>BELCREST ROAD<br>SOUTH BURLINGTON, VT<br>05403 | 52-1596171 | 501(c)(3)                          | 130,000                  |                                   |                                                       |                                        | CAPACITY<br>BUILDING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                            | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Detroit Shoreway Community Dev Org6516 Detroit Avenue San Francisco, CA 94110 | 23-7376130 | 501(c)(3)                          | 129,698                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                       | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Satellite Affordable Housing Associates1521 University Avenue<br>Trujillo Alto, PR 00977 | 94-3031375 | 501(c)(3)                          | 128,026                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Park Heights Renaissance Inc3939 Reisterstown Road Gallup, NM 87305 | 77-0673126 | 501(c)(3)                          | 124,459                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                        | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHP INC229 Peachtree Street NE ARLINGTON,VA 22201 | 58-1946632 | 501(c)(3)                          | 113,679                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MERCY HOUSING<br>CALIFORNIA1360 Mission Street<br>CLEVELAND, OH 44114 | 94-3081666 | 501(c)(3)                          | 111,352                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Atlanta Regional Commission<br>40 Courtland Street NE<br>hogansburg, NY 13655 | 58-6002324 | 501(c)(3)                          | 105,000                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| East LA Community Corporation530 South Boyle Avenue<br>Rapid City,SD 57701 | 95-4531076 | 501(c)(3)                          | 103,569                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Enterprise Community Loan Fund70 Corporate Center Chicago,IL 60637 | 52-0192004 | 501(c)(3)                          | 103,372                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Midtown Detroit Inc3939 Woodward Wayne, WV 25570   | 45-4582324 | 501(c)(3)                          | 102,564                  |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| St Bernard Project8324 Parc Place<br>Cleveland, OH 44102 | 26-2189665 | 501(c)(3)                          | 100,422                  |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| 1100 Tulane LLC4162 Canal Street<br>New Orleans, LA 701195941 | 46-3007675 | 11c                                | 96,037                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                        | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Chinatown Community Development Center1525 Grant Avenue Atlanta, GA 30303 | 94-2514053 | 501(c)(3)                          | 94,751                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                       | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Project Homecoming Inc2221<br>Filmore Ave<br>CHRISTIANSBURG, VA<br>24073 | 32-0312933 | 501(c)(3)                          | 89,674                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government         | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| ARCH Community Housing Trust IncPO Box 1292 Mesa, AZ 85203 | 75-3167069 | 501(c)(3)                          | 89,194                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Office of Rural & Farmworker Housing1400 Summitview Ave 203 Gallup, NM 87305 | 91-1218499 | 501(c)(3)                          | 86,083                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LITTLE TOKYO SERVICE CENTER CDC231 EAST THIRD STREET San Francisco, CA 94133 | 95-3451280 | 501(c)(3)                          | 84,829                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                           | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| East Bay Asian Local Development Corporation<br>1825 San Pablo Avenue<br>Rapid City,SD 57701 | 51-0171851 | 501(c)(3)                          | 84,206                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Saint Paul Riverfront Corporation25 Sixth Street West<br>San Juan, PR 009401308 | 36-3350557 | 501(c)(3)                          | 84,152                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Tenderloin Neighborhood Develop Corp201 Eddy Street<br>Dorchester, MA 02125 | 94-2761808 | 501(c)(3)                          | 81,453                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Mountain Housing Opportunities64 Clingman Avenue<br>Wayne, WV 25570 | 58-1816998 | 501(c)(3)                          | 81,316                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Selfhelp Community Services Inc520 Eighth Avenue Trujillo Alto, PR 00977 | 13-1624178 | 501(c)(3)                          | 79,999                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| EAH Inc2169 E Francisco Boulevard<br>CHICAGO,IL 606475216 | 94-1699153 | 501(c)(3)                          | 77,231                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Jewish Association for Services for the Aged247 West 37th Street Syracuse, NY 13202 | 13-2620896 | 501(c)(3)                          | 75,603                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Vanguard Urban Improvement Assn Inc516 Macdonough Street Los Angeles,CA 90033 | 11-2442042 | 501(c)(3)                          | 75,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Santo Domingo Tribal Housing AuthorityPO Box 10 Trujillo Alto, PR 00977 | 85-0194331 | public hsg auth                    | 74,517                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| SUMMECH COMMUNITY DEV CORP633 PRYOR STREET SW<br>Cleveland,OH 44102 | 58-1895918 | 501(c)(3)                          | 74,195                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| COMMUNITY HOUSING PARTNERS CORPORATION<br>930 CAMBRIA ST<br>San Francisco,CA 94110 | 54-1023025 | 501(c)(3)                          | 73,699                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Jane Place Neighborhood Sustainability InitiativePO Box 53011 Yakima,WA 98908 | 26-3909820 | 501(c)(3)                          | 72,248                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Native American Connections4520 N Central Avenue<br>The Dalles, OR 97058 | 86-0293585 | 501(c)(3)                          | 71,931                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Bellwether Housing1651 Bellevue Avenue Denver, CO 80209 | 91-1116960 | 501(c)(3)                          | 70,127                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Coalfield Development CorporationPO Box 1133<br>New York, NY 10035 | 26-3836207 | 501(c)(3)                          | 68,361                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Jericho Road Episcopal Housing Initiative2919 St Charles Avenue<br>Syracuse, NY 13202 | 20-8419678 | 501(c)(3)                          | 67,439                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Rural Housing Development Corporation709 North 1890 West<br>Lawrenceville, GA 30043 | 87-0622732 | 501(c)(3)                          | 66,395                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Housing Visions Unlimited Inc1201 E Fayette Street SOUTH BURLINGTON, VT 05403 | 16-1598458 | 501(c)(3)                          | 66,323                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Dorchester Bay Economic Development Corporation594 Columbia Road San Francisco, CA 94110 | 04-2681632 | 501(c)(3)                          | 65,997                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Tapestry Development Group<br>321 W Hill Street<br>Dorchester, MA 02125 | 27-2814156 | 501(c)(3)                          | 65,818                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Carrfour Supportive Housing Inc1398 Southwest 1st Street Baltimore,MD 21201 | 65-0387766 | 501(c)(3)                          | 65,500                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Community Area Resource Enterprise IncPO Box 4298 San Francisco,CA 94110 | 20-0870956 | 501(c)(3)                          | 65,409                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PathStone Corporation7 Prince Street<br>Los Angeles, CA 90008 | 16-0984913 | 501(c)(3)                          | 62,615                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Services for the UnderServed Inc305 Seventh Avenue 10th FL Trujillo Alto, PR 00977 | 91-1918247 | 501(c)(3)                          | 62,500                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| University of Detroit Mercy<br>4001 W McNichols Road<br>Oakland, CA 946121517 | 38-1360586 | 501(c)(3)                          | 62,360                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|---------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Mercy Housing Northwest<br>2505 Third Avenue<br>CLEVELAND, OH 44114 | 91-1546525 | 501(c)(3)                          | 60,460                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Neighborhood Housing Services of Chicago Inc1279 N Milwaukee Avenue The Dalles, OR 97058 | 23-7443009 | 501(c)(3)                          | 58,983                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Foundation Communities Inc<br>3036 South 1st Street<br>Cleveland, OH 44104 | 74-2563260 | 501(c)(3)                          | 58,818                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| The Lower 9th Ward Neighborhood Empowerment Networ1123 Lamanche Street<br>Dorchester,MA 02125 | 76-0827045 | 501(c)(3)                          | 58,065                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| NATIONAL HOUSING TRUST1101 30TH STREET NW<br>The Dalles, OR 97058 | 52-1477599 | 501(c)(3)                          | 58,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Jubilee Baltimore Inc1228 N Calvert Street<br>Seattle, WA 98144 | 52-1222237 | 501(c)(3)                          | 57,029                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| SOUTHWEST MINNESOTA HOUSING PARTNERSHIP<br>2401 BROADWAY AVENUE<br>Cleveland,OH 44102 | 41-1721815 | 501(c)(3)                          | 56,781                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

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|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Fifth Avenue Committee Inc<br>621 DeGraw Street<br>New Orleans, LA 70185 | 11-2475743 | 501(c)(3)                          | 56,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Community Corporation of Santa Monica1423 Second Street<br>San Francisco, CA 94110 | 95-3795161 | 501(c)(3)                          | 55,780                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CASA De Maryland Inc8151 15th Avenue New Orleans, LA 70113 | 52-1372972 | 501(c)(3)                          | 55,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HopeWorks Social Enterprises5830 Evergreen Way<br>Portland, OR 97232 | 80-0684608 | 501(c)(3)                          | 53,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| ROC USA LLC7 Wall Street Moab, UT 84532            | 35-2319441 | 501(c)(3)                          | 52,433                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MANNA INC828 EVARTS STREET NE CLEVELAND, OH 44114  | 52-1260698 | 501(c)(3)                          | 51,823                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HOUSING ASSISTANCE COUNCIL1025 VERMONT AVENUE NW SOUTH BURLINGTON, VT 05403 | 52-0939288 | 501(c)(3)                          | 50,701                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Low Income Housing Institute2407 First Ave Suite 200 San Francisco, CA 94133 | 94-3155150 | 501(c)(3)                          | 50,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Archway Housing and Services IncPO Box 9189 Jacksonville,FL 322023436 | 84-1335158 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Columbus Housing Partnership Inc562 East Main Street Seattle, WA 981222014 | 31-1208260 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Community Investment Strategies Inc1970 Brunswick Avenue San Francisco,CA 94110 | 22-3346335 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Crow Tribe of IndiansPO Box 159<br>San Francisco, CA 94110 | 81-0372588 | tribal gov't                       | 50,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| EDEN HOUSING INC22645<br>Grand Street<br>Chicago,IL 60637 | 23-1716750 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY<br>BUIDLING               |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Gilman Housing Trust IncPO Box 259 Cleveland,OH 44104 | 03-0301520 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Hispanic Housing Development Corporation325 N Wells Langley Park, MD 20783 | 36-2889871 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Leech Lake Band of Ojibwe Housing Authority611 Elm Avenue<br>PORTLAND, OR 97209 | 41-0913364 | 501(c)(3)                          | 50,000                   |                                   |                                                       |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| NEIGHBORHOOD<br>NONPROFIT HOUS CORP<br>195 Golf Course Road<br>St Paul,MN 55116 | 87-0559307 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY<br>BUIDLING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| New Economics for Women<br>303 South Loma Drive<br>St Paul, MN 55102 | 95-3969029 | 501(c)(3)                          | 50,000                   |                                   |                                                       |                                        | CAPACITY<br>BUIDLING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Northwest Montana Human Resources214 Main StreetGallup, NM 87305 | 81-0366018 | 501(c)(3)                          | 50,000                   |                                   |                                                       |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Rosebud Economic Development CorporationPO Box 236 Baltimore,MD 21215 | 46-0454387 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Sokaogan Chippewa Community3265 Indian Settlement Road Denver,CO 80211 | 39-1180139 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Umpqua Community Development Corporation605 SE Kane Street San Rafael, CA 94901 | 93-1057208 | 501(c)(3)                          | 50,000                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Habitat for Humanity of Puerto Rico Inc1357 Ashford Avenue Brooklyn, NY 11226 | 66-0515156 | 501(c)(3)                          | 50,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Red Cliff Band of Lake Superior Chippewa88358 Pike Road Lawrenceville, NJ 08648 | 39-1178866 | 501(c)(3)                          | 49,790                   |                                   |                                                       |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Corporacion Para El Desarrollo Economico De TrujilPO Box 1685 San Francisco,CA 94110 | 66-0429762 | 501(c)(3)                          | 48,871                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Lower East Side Peoples Mutual Housing Association<br>228 East 3rd Street<br>San Francisco, CA 94133 | 13-3570544 | 501(c)(3)                          | 48,582                   |                                   |                                                       |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| SEBCO DEVELOPMENT INC<br>885 Bruckner Blvd<br>Trujillo Alto, PR 00977 | 13-2944013 | 501(c)(3)                          | 47,934                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Unity Properties Inc2000 West Baltimore Street Oakland,CA 946121517 | 52-1857768 | 501(c)(3)                          | 47,596                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| GULF COAST HOUSING PARTNERSHIP INC1610-A Oretha Castle Haley Boulevar Brooklyn,NY 11226 | 20-4216595 | 501(c)(3)                          | 47,000                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Resources for Community Development2220 Oxford Street<br>NEW YORK, NY 10032 | 94-2952466 | 501(c)(3)                          | 46,570                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| University Cultural Center Association3939 Woodward Avenue<br>Oakland,CA 946121517 | 38-2134034 | 501(c)(3)                          | 45,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| National Church Residences<br>2335 North Bank Drive<br>Dorchester, MA 02124 | 31-0651750 | 501(c)(3)                          | 43,839                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Cascadia Behavioral Healthcare Inc847 NE 19th Avenue<br>New Orleans, LA 70113 | 93-0770054 | 501(c)(3)                          | 43,296                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Habitat for Humanity of the Chesapeake Inc3741 Commerce Drive Brooklyn, NY 11226 | 52-1226188 | 501(c)(3)                          | 41,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| West Angeles Community Development Corporation<br>6028 Crenshaw Boulevard<br>Los Angeles,CA 90033 | 95-4486925 | 501(c)(3)                          | 40,665                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Bernal Heights Neighborhood Center515 Cortland Ave<br>Denver, CO 80209 | 94-2536500 | 501(c)(3)                          | 40,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Columbia Cascade Housing Corporation312 Court Street<br>Baltimore, MD 21202 | 94-3111736 | 501(c)(3)                          | 40,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HUMAN SOLUTIONS INC<br>12350 SE POWELL BOULEVARD<br>SOUTH BURLINGTON, VT 05403 | 93-0977166 | 501(c)(3)                          | 40,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Single Room Occupancy Housing Corporation1055 W 7th Street Trujillo Alto, PR 00977 | 95-3909215 | 501(c)(3)                          | 40,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

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|----------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Construction Education Foundation of Georgia1255 Lakes Parkway San Francisco, CA 94110 | 58-2062862 | 501(c)(3)                          | 39,750                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SANTA FE COMMUNITY HOUSING TRUSTPO BOX 713<br>San Juan, PR 009401308 | 85-0392520 | 501(c)(3)                          | 39,693                   |                                   |                                                       |                                        | CAPACITY BUIDLING                  |

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| White Earth Band of Chippewa Indians35500 Eagleview Road Detroit, MI 48207 | 41-1737979 | tribal gov't                       | 38,666                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LINC Housing Corporation<br>555 E Ocean Boulevard<br>Atlanta, GA 30316 | 33-0578620 | 501(c)(3)                          | 38,650                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Skid Row Housing Trust1317 East Seventh Street Crow Agency, MT 59022 | 95-4205316 | 501(c)(3)                          | 38,508                   |                                   |                                                       |                                        | CAPACITY BUIDLING                  |

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|--------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Hancock Resource Center<br>454 Highway 90<br>Miami, FL 33135 | 26-3648017 | 501(c)(3)                          | 38,120                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Robison Jewish Home6125 SW Boundary Street WASHINGTON,DC 20015 | 93-0386852 | 501(c)(3)                          | 37,546                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Housing Counseling Services<br>2410 17th Street NW<br>SOUTH BURLINGTON, VT<br>05403 | 52-0958568 | 501(c)(3)                          | 37,480                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Mi Casa Inc6230 3rd Street NW CLEVELAND,OH 44114   | 52-1796840 | 501(c)(3)                          | 37,480                   |                                   |                                                        |                                        | CAPACITY BUIDLING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                 | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| RIDGEWOOD BUSHWICK SENIORCITIZENS COUNCIL INC<br>NEW YORK,NY 10032 | 11-2453853 | 501(c)(3)                          | 37,289                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| MENTAL HEALTH SERVICES FOR HOMELESS PERSONS INC1744 PAYNE AVENUE CLEVELAND,OH 44114 | 34-1607734 | 501(c)(3)                          | 36,908                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                           | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Neighborhood Housing Services of New Orleans Inc<br>4528 Freret Street<br>Columbus, OH 43215 | 72-0801513 | 501(c)(3)                          | 36,290                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| AHC INC2230 NORTH FAIRFAX DRIVE<br>Mesa, AZ 85203  | 54-1026365 | 501(c)(3)                          | 36,195                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSING2704 N PERSHING DRIVE Jacksonville,FL 322023436 | 54-1515133 | 501(c)(3)                          | 35,057                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| 1260 HOUSING DEVELOPMENT CORPORATION2042-48 ARCH STREET New Orleans, LA 701195941 | 23-2536730 | 501(c)(3)                          | 35,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| URBAN EDGE HOUSING CORPORATION1542 Columbus Avenue Oakland, CA 946121517 | 22-2483475 | 501(c)(3)                          | 35,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Broadmoor Development CorporationPO Box 13369NEW YORK, NY 10002 | 20-4885751 | 501(c)(3)                          | 34,869                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                     | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| El Barrio's Operation Fightback Inc413 E 120th Street Chicago,IL 60637 | 13-3248777 | 501(c)(3)                          | 34,690                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| GREATER ROCHESTER HOUSING PARTNERSHIP<br>183 E MAIN STREET<br>Brooklyn, NY 11226 | 16-1399793 | 501(c)(3)                          | 34,145                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| HEALTHY NEIGHBORHOODS INC2 E READ STREET BROOKLYN, NY 11231 | 30-0272104 | 501(c)(3)                          | 32,437                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Codman Square<br>Neighborhood Development<br>Corporation587 Washington<br>Street<br>New York, NY 10035 | 04-2752507 | 501(c)(3)                          | 32,230                   |                                   |                                                       |                                        | CAPACITY<br>BUILDING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Self-Help Housing Corporation of Hawaii1427 Dillingham Boulevard Trujillo Alto, PR 00977 | 99-0222078 | 501(c)(3)                          | 32,200                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Grace English Evangelical Lutheran Congregation I9 Calle Rodriguez Serra 3A Brooklyn, NY 11226 | 66-0527275 | 501(c)(3)                          | 31,990                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Eastern Market Corporation<br>2934 Russell<br>New York, NY 10001 | 32-0030432 | 501(c)(3)                          | 31,853                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Tenemos Q ue Reclamar Y Unidos Salvar La Tierra-Sou<br>4331 South Main Street<br>Dorchester,MA 02125 | 42-1687057 | 501(c)(3)                          | 31,811                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| LINC Housing Corporation<br>110 Pine Avenue Suite 500<br>PORTLAND,OR 97209 | 33-0578620 | 501(c)(3)                          | 31,354                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Burten Bell Carr Development Inc7201 Kinsman Road NEW YORK, NY 10002 | 34-1657533 | 501(c)(3)                          | 31,078                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Greenwood Leflore Carroll<br>Economic Development Fou<br>402 Highway 82 Bypass<br>Brooklyn, NY 11226 | 64-0640864 | 501(c)(3)                          | 30,672                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Mission Economic Development Agency2301 Mission Street Wayne, WV 25570 | 51-0187791 | 501(c)(3)                          | 30,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| SLAVIC VILLAGE DEVELOPMENT5620 BROADWAY AVENUE Crow Agency, MT 59022 | 34-1344279 | 501(c)(3)                          | 30,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| ST VINCENT DE PAUL SOCIETY OF LANE COUNTY VOCATIONAL SERVICE<br>Cleveland,OH 44102 | 93-0454786 | 501(c)(3)                          | 30,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| LA PLATA HOMES FUND<br>124 E 9th Street<br>PORTLAND, OR 97209 | 80-0266636 | 501(c)(3)                          | 29,857                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| First Community Housing Inc<br>75 East Santa Clara Street<br>New Orleans,LA 70185 | 77-0119210 | 501(c)(3)                          | 29,820                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Innovative Housing Inc219 NW Second Avenue SOUTH BURLINGTON, VT 05403 | 93-0877440 | 501(c)(3)                          | 29,817                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Southern United Neighborhoods827 Tupelo Street<br>Cleveland, OH 44102 | 36-4668072 | 501(c)(3)                          | 29,302                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| H Street Community Development Corporation900 2nd Street NE Brooklyn, NY 11226 | 52-1356903 | 501(c)(3)                          | 28,999                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| MQVN CDC4626 Alcee Fortier Boulevard<br>Dorchester,MA 02124 | 20-4929600 | 501(c)(3)                          | 28,500                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Puerto Rico Housing & Human Development Trust Fund208 Ponce de Leon Avenue CHRISTIANSBURG, VA 24073 | 66-0648381 | 501(c)(3)                          | 28,286                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| SRO Housing Corporation<br>1055 W 7th Street Suite 3250<br>Cleveland, OH 44102 | 95-3909215 | 501(c)(3)                          | 28,284                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Historic East Baltimore Community Action Coalition<br>1212 N Wolfe Street<br>Langley Park, MD 20783 | 52-1903732 | 501(c)(3)                          | 28,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| COMMUNITY LEAGUE OF THE HEIGHTS INC500 WEST 159TH STREET San Francisco,CA 94110 | 13-2564241 | 501(c)(3)                          | 27,768                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| The Villages Community Development Corporation<br>8109 East Jefferson Avenue<br>SEATTLE,WA 981042304 | 36-4598309 | 501(c)(3)                          | 27,654                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Central Area Development Association320 17th Avenue S ATLANTA,GA 303031605 | 91-1632440 | 501(c)(3)                          | 27,500                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

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|------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Associated Neighborhood Development1429 S Rampart Street ARLINGTON, VA 22201 | 72-1334910 | 501(c)(3)                          | 27,290                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Jamaica Plain Neighborhood Development Corporation31 Germania Street Chicago,IL 60654 | 04-2652919 | 501(c)(3)                          | 26,490                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| International Sonoran Desert AlliancePO Box 687<br>SOUTH BURLINGTON, VT 05403 | 86-0778917 | 501(c)(3)                          | 25,670                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Bowery Residents Committee Inc131 West 25th Street ARLINGTON, VA 22201 | 13-2736659 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Chhaya Community Development37-43 77th Street<br>Atlanta, GA 30303 | 11-3580935 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government       | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| City First Homes Inc1436 U Street NW<br>BILOXI, MS 39530 | 26-2335395 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                                 | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Community Development Collaborative of Greater Col<br>110 N 17th Street<br>San Francisco, CA 94110 | 31-1595197 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                 | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Esperanza Community Housing Corporation2337 South Figueroa Street Chicago,IL 60637 | 95-4230345 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Homes for America Inc318 Sixth Street Portland,OR 97232 | 52-1901220 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                              | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Housing Opportunity Development Corporation<br>2001 Waukegan Road<br>SOUTH BURLINGTON, VT 05403 | 36-3237455 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                    | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Indiantown Non Profit Housing IncPO Box 456 SOUTH BURLINGTON,VT 05403 | 59-1978388 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| MERCY HOUSING<br>LAKEFRONT120 South<br>LaSalle Street<br>CLEVELAND,OH 44114 | 36-3453183 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government             | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| MHANY Management Inc2-4<br>Nevins Street<br>CLEVELAND,OH 44114 | 72-1303737 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                           | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| NewCourtland Elder Services<br>6970 Germantown Avenue<br>St Helens, OR 97051 | 23-2734102 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Northfield Community LDC of Staten Island Inc160 Heberton Avenue Gallup, NM 87305 | 13-2974137 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                        | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| PORTLAND COMMUNITY REINVESTMENT INITIATIVES6329 NE MLK JR BOULEVARD Santa Monica,CA 90401 | 93-1059146 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Steuben Churchpeople Against Poverty16 West William Street Cleveland, OH 44102 | 16-1166737 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                   | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| THC AFFORDABLE HOUSING INC5101 16TH STREET NW<br>Dorchester,MA 02125 | 52-1675958 | 501(c)(3)                          | 25,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| United Church Homes of Reading Inc50 Bay State Road<br>San Rafael, CA 94901 | 04-2720358 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACTIY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| UNITY of Greater New Orleans2475 Canal Street San Rafael, CA 94901 | 72-1222911 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Venice Community Housing Corporation720 Rose Avenue<br>Los Angeles, CA 90033 | 95-4200761 | 501(c)(3)                          | 25,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Make It Right Foundation912 Magazine Street Washington, DC 20009 | 26-0723027 | 501(c)(3)                          | 24,911                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Associated Catholic Charities Inc320 Cathedral Street ARLINGTON,VA 22201 | 52-0591538 | 501(c)(3)                          | 24,553                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CATHOLIC CHARITIES<br>HOUSING SERVICES5301<br>Tieton Drive<br>ATLANTA,GA 303031605 | 91-1955616 | 501(c)(3)                          | 24,500                   |                                   |                                                       |                                        | CAPACITY<br>BUILDING               |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| SOUTH COUNTY HOUSING CORPORATION7455 Carmel Street Cleveland,OH 44102 | 94-2590572 | 501(c)(3)                          | 24,058                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| CARROLL GARDENS ASSOCIATION INC201 COLUMBIA STREET New Orleans,LA 70113 | 11-2573432 | 501(c)(3)                          | 23,627                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Evangelical Lutheran Good Samaritan Society4800 West 57th Street Chicago,IL 60637 | 45-0228055 | 501(c)(3)                          | 23,010                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| BACK BAY MISSION INC<br>1012 DIVISION STREET<br>Ketchum, ID 833401292 | 64-0431066 | 501(c)(3)                          | 22,351                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Community Action Team125 North 17th Street San Francisco, CA 94110 | 93-0554156 | 501(c)(3)                          | 22,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Triple C Housing Inc1<br>Distribution Way<br>San Rafael, CA 94901 | 22-2350429 | 501(c)(3)                          | 21,962                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Habitat for Humanity Mississippi Capital AreaPO Box 55634 Brooklyn,NY 11226 | 64-0750633 | 501(c)(3)                          | 21,500                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| People's Self Help Housing Corporation3533 Empleo Street Santa Monica, CA 90401 | 95-2750154 | 501(c)(3)                          | 21,336                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Lucha Contra El Sida IncUrb Valencia NEW YORK,NY 10004 | 66-0514937 | 501(c)(3)                          | 21,254                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Capitol Hill Housing Foundation1402 Third Avenue<br>Baltimore, MD 21201 | 27-1682190 | 501(c)(3)                          | 20,365                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Housing Authority of the City of Jersey City Inc400 US Highway 1 SOUTH BURLINGTON, VT 05403 | 22-6022501 | public hsg auth                    | 20,224                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Flemister Housing Development Corporation527 West 22nd Street New Orleans, LA 70185 | 13-3725394 | 501(c)(3)                          | 20,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Hacienda CDC5136 NE 42nd Avenue Seattle, WA 98101  | 93-0979064 | 501(c)(3)                          | 20,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Project Community Connections Inc321 West Hill Street<br>SPENCER, IA 51301 | 58-2373779 | 501(c)(3)                          | 20,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Settlement Housing Fund Inc<br>247 W 37th Street<br>Trujillo Alto, PR 00977 | 23-7078882 | 501(c)(3)                          | 19,910                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Ohkay Owingeh Housing AuthorityPO Box 1059Gallup, NM 87305 | 85-0446828 | 501(c)(3)                          | 19,674                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Comprehensive Housing Assistance Inc5809 Park Heights Avenue San Francisco, CA 94110 | 23-7097000 | 501(c)(3)                          | 19,608                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| WEST HOLLYWOOD COMMUNITY HOUSING CORPORATION7530 Santa Monica Boulevard Los Angeles,CA 90033 | 95-4122368 | 501(c)(3)                          | 19,466                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Center for Community Alternatives115 East Jefferson Street<br>ATLANTA, GA 303031605 | 16-1395992 | 501(c)(3)                          | 19,282                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| DOWNTOWN EMERGENCY SERVICE CENTER515 THIRD AVENUE CHICAGO, IL 606475216 | 91-1275815 | 501(c)(3)                          | 19,201                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Quest 35 Inc878 Rock Street NW<br>SAN FRANCISCO ,CA 94102 | 58-2634738 | 501(c)(3)                          | 18,923                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| ASIAN AMERICANS FOR EQUALITY108 Norfolk Street<br>Los Angeles,CA 90067 | 13-3187792 | 501(c)(3)                          | 18,750                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government       | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| JAMBOREE HOUSING CORPORATION17701 COWAN Yakima, WA 98908 | 33-0413518 | 501(c)(3)                          | 18,707                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                         | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| CENTRAL CITY CONCERN<br>232 NORTHWEST SIXTH AVENUE<br>ATLANTA,GA 303031605 | 93-0728816 | 501(c)(3)                          | 18,585                   |                                   |                                                        |                                        | CAPACITY BUILDNIG                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                   | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Hollywood Community Housing Corporation5020 Santa Monica Blvd Langley Park, MD 20783 | 95-4198215 | 501(c)(3)                          | 18,476                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                            | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| SUPPORTIVE HOUSING COALITION OF NEW MEXICOPO BOX 27459<br>Dorchester,MA 02125 | 85-0439315 | 501(c)(3)                          | 18,421                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                              | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Black Hills Area Habitat for Humanity825 Saint Joseph Street<br>Denver,CO 80209 | 46-0410933 | 501(c)(3)                          | 18,378                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                       | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Charis Community Housing Inc750 Glenwood Avenue SE ATLANTA, GA 303031605 | 58-1649314 | 501(c)(3)                          | 18,152                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Lott Community Development Corporation421 East 116th Street<br>San Francisco, CA 94133 | 13-3620671 | 501(c)(3)                          | 18,062                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| A Community of Friends3701 Wilshire Boulevard PHILADELPHIA, PA 19103 | 95-4203106 | 501(c)(3)                          | 17,604                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PATH Ventures340 North Madison Avenue Gallup, NM 87305 | 20-1892523 | 501(c)(3)                          | 16,895                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| CommonBond Communities<br>1080 Montreal Ave<br>Seattle, WA 981222014 | 41-1260469 | 501(c)(3)                          | 16,739                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                           | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| UNIVERSITY<br>NEIGHBORHOOD HOUSING<br>PROGRAM2751 GRAND<br>CONCOURSE<br>Oakland,CA 946121517 | 13-3206603 | 501(c)(3)                          | 16,724                   |                                   |                                                        |                                        | CAPACITY<br>BUILDING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-----------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Family Resources of New Orleans817 N Claiborne Avenue<br>Brooklyn, NY 11216 | 72-1379740 | 501(c)(3)                          | 16,413                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Akwesasne Housing Authority Inc378 State Route 37 Mesa,AZ 85203 | 16-1387585 | public hsg auth                    | 16,136                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Fundacion De Desarrollo Comunal De Puerto Rico In PO Box 6300 Cleveland,OH 44104 | 66-0264286 | 501(c)(3)                          | 16,000                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Del Norte Neighborhood Development Corporation<br>2926 Zuni Street<br>San Francisco, CA 94110 | 84-0783694 | 501(c)(3)                          | 15,804                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Housing Trust Silicon Valley<br>95 S Market Street<br>SOUTH BURLINGTON, VT<br>05403 | 77-0545135 | 501(c)(3)                          | 15,787                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Brand New Beginnings113 E 58th Street ARLINGTON,VA 22201 | 36-3946495 | 501(c)(3)                          | 15,131                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| A bility Housing of Northeast Florida Inc76 S Laura Street Los Angeles,CA 90010 | 59-3087085 | 501(c)(3)                          | 15,130                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Holy Nativity and Saint Johns Development Corporat4330-D Pimlico Road<br>Portland,OR 97232 | 52-2215778 | 501(c)(3)                          | 15,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| St Nicks Alliance2 Kingland Avenue<br>Cleveland,OH 44102 | 51-0192170 | 501(c)(3)                          | 14,865                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Presbyterian Villages of Michigan26200 Lahser RoadColumbus, OH 43203 | 38-1387145 | 501(c)(3)                          | 14,729                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| REACH Community Development4150 SW Moody Ave<br>Lawrenceville, NJ 08648 | 93-0813981 | 501(c)(3)                          | 14,710                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| BICKERDIKE REDEVLOPMENT CORPORATION2550 WEST NORTH AVENUE Denver,CO 80209 | 23-7087890 | 501(c)(3)                          | 14,418                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Affordable Living for the Aging2029 Century Park East<br>Los Angeles, CA 90010 | 95-3301874 | 501(c)(3)                          | 14,353                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|--------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Good Shepherd Housing & Family Services Inc8305 Richmond Highway Cleveland, OH 44104 | 23-7447962 | 501(c)(3)                          | 14,240                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Ho-Chunk Housing & Community Development AgencyPO Box 730<br>Langley Park, MD 20783 | 39-1979807 | 501(c)(3)                          | 13,869                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Habitat for Humanity<br>Susquehanna Inc205 S Hays<br>Street<br>Brooklyn, NY 11226 | 52-1848933 | 501(c)(3)                          | 13,542                   |                                   |                                                       |                                        | CAPACITY<br>BUILDING               |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Catholic Charities Housing Development Corporation721 N LaSalle Street Brooklyn, NY 11224 | 36-2170821 | 501(c)(3)                          | 13,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MERCY HOUSING INC1999 BROADWAY CLEVELAND, OH 44114 | 47-0646706 | 501(c)(3)                          | 13,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| COMMUNITY PRESERVATION & DEVELOPMENT CORPORATION5513 CONNECTICUT AVENUE San Francisco, CA 94110 | 52-1662186 | 501(c)(3)                          | 12,800                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Metropolitan Denver Homeless Initiative711 Park Avenue West CLEVELAND, OH 44114 | 84-1359401 | 501(c)(3)                          | 12,737                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Bailey House Inc1751 Park Avenue Ketchum,ID 833401292 | 13-3165181 | 501(c)(3)                          | 12,500                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| DevCorp North1448 W Morse San Francisco, CA 94110  | 36-3357551 | 501(c)(3)                          | 12,500                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Corporacion del Proyecto ENLACE del Cano Martin Pe<br>PO Box 41308<br>San Francisco,CA 94110 | 66-0671917 | 501(c)(3)                          | 12,050                   |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| MERCY HOUSING<br>CALIFORNIA1500 S Grand Avenue<br>CLEVELAND, OH 44114 | 94-3081666 | 501(c)(3)                          | 10,753                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Hannahville Indian CommunityN14911<br>Hannahville<br>Miami, FL 33135 | 38-2008182 | 501(c)(3)                          | 10,072                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Baltimore Community Foundation2 East Read Street Ketchum, ID 833401292 | 23-7180620 | 501(c)(3)                          | 10,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|----------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| GREYSTON FOUNDATION<br>21 PARK AVE<br>Brooklyn, NY 11226 | 13-3717310 | 501(c)(3)                          | 10,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|-------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Lower Eastside Service Center Inc80 Maiden Lane San Francisco, CA 94133 | 13-1972876 | 501(c)(3)                          | 10,000                   |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Home Again Inc4 Old River Place<br>Portland,OR 97232 | 20-4526894 | 501(c)(3)                          | 9,968                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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|---------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Hello Housing1901 Royal Oaks Drive<br>BROOKLYN,NY 11231 | 14-1870357 | 501(c)(3)                          | 9,428                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Greenwood Leflore Carroll Economic Development Fou<br>402 Highway 82 Bypass<br>Brooklyn, NY 11226 | 64-0640864 | 501(c)(3)                          | 8,945                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government            | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| NEIGHBORHOOD PROGRESS INC1956 WEST 25 STREET St Paul,MN 55102 | 34-1611055 | 501(c)(3)                          | 8,428                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| FORDHAM BEDFORD HOUSING CORPORATION<br>2751 GRAND CONCOURSE<br>New Orleans,LA 70185 | 13-3010578 | 501(c)(3)                          | 8,305                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Artspace Projects Inc250 Third Avenue North Los Angeles, CA 90067 | 41-1350071 | 501(c)(3)                          | 7,500                    |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                  | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| NORTHEAST DENVER HOUSING CENTER1735 GAYLORD STREET Gallup, NM 87305 | 84-0909291 | 501(c)(3)                          | 7,480                    |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                   | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Nez Perce Tribal Housing Authority111 Veterans DriveGallup, NM 87305 | 82-0262257 | public hsg auth                    | 6,797                    |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                   | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| People's Self Help Housing Corporation26 E Victoria Street<br>Santa Monica, CA 90401 | 95-2750154 | 501(c)(3)                          | 6,564                    |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                        | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| TRANSITIONAL HOUSING CORPORATION5101 16TH STREET NW SEATTLE, WA 981042304 | 52-1675958 | 501(c)(3)                          | 6,563                    |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                       | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| St Clair Superior Development Corporation<br>4205 St Clair Avenue<br>Cleveland, OH 44102 | 34-1238020 | 501(c)(3)                          | 6,472                    |                                   |                                                       |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                          | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Sacramento Neighborhood Housing Services Inc2400 Alhambra Boulevard Lawrenceville, GA 30043 | 68-0118032 | 501(c)(3)                          | 5,985                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                             | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------------------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Instituto Para El Desarrollo Socioeconomico Y De VPO<br>Box 7154<br>SOUTH BURLINGTON, VT 05403 | 66-0658219 | 501(c)(3)                          | 5,917                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                   | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| New Orleans Area Habitat for Humanity Inc2900 Elysian Fields Avenue St Paul,MN 55102 | 72-0973161 | 501(c)(3)                          | 5,735                    |                                   |                                                        |                                        | CAPACITY BUILDING                  |

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                                     | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV , appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|----------------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|--------------------------------------------------------|----------------------------------------|------------------------------------|
| Interim Community Development Assoc310 Maynard Avenue South SOUTH BURLINGTON, VT 05403 | 91-1071277 | 501(c)(3)                          | 5,400                    |                                   |                                                        |                                        |                                    |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                             | (b) EIN    | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--------------------------------------------------------------------------------|------------|------------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| Bridge Street Development Corporation460 Nostrand Avenue Minneapolis, MN 55401 | 11-3250772 | 501(c)(3)                          | 5,189                    |                                   |                                                       |                                        |                                    |

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, line 23.  
▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number  
52-1231931

Part I

Questions Regarding Compensation

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Yes   | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----|
| <div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div><div><div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div> |       |    |
| <div><div>b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 1bYes |    |
| <div><div>2</div><div>Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2Yes  |    |
| <div><div>3</div><div>Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</div><div><div><div><input type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>                                                                               |       |    |
| <div><div>4</div><div>During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |       |    |
| <div><div>a</div><div>Receive a severance payment or change-of-control payment?</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 4a    | No |
| <div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 4bYes |    |
| <div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4c    | No |
| <div><div></div><div>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |    |
| <div><div>5</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |    |
| <div><div>a</div><div>The organization?</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 5a    | No |
| <div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 5a or 5b, describe in Part III</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 5b    | No |
| <div><div>6</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |       |    |
| <div><div>a</div><div>The organization?</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 6a    | No |
| <div><div>b</div><div>Any related organization?</div></div> <div>If "Yes," to line 6a or 6b, describe in Part III</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 6bYes |    |
| <div><div>7</div><div>For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7Yes  |    |
| <div><div>8</div><div>Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 8     | No |
| <div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?</div></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 9     |    |

**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is 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, applicable column (D) and (E) amounts for that individual

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

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

| Return Reference | Explanation                                                                                                                                                                    |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| schedule J       | 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       | officers & key employees have a performance plan based on achieving certain financial targets and other individual performance criteria                                        |
| schedule J       | charles werhane                                                                                                                                                                |

Additional Data

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 and Title                                |             | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred in prior Form 990 |
|---------------------------------------------------|-------------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|-----------------------------------------------------------------------|
|                                                   |             | (i) Base Compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                                       |
| 1 JEFFREY SCHAFER, vice president                 | (i)<br>(ii) | 190,833                                            | 28,492                              | 1,642                               | 16,608                                         | 22,459                  | 260,034                         |                                                                       |
| 1 Terri L Ludwig, trustee, PRESIDENT & CEO        | (i)<br>(ii) | 424,167<br>0                                       | 114,121<br>0                        | 719<br>0                            | 19,890<br>0                                    | 18,598<br>0             | 577,495<br>0                    | 0<br>0                                                                |
| 2 WILLIAM R FREY, senior VICE PRESIDENT           | (i)<br>(ii) | 198,440                                            | 41,750                              | 2,332                               | 18,279                                         | 15,693                  | 276,494                         |                                                                       |
| 3 NAOMI s BAYER, senior VICE PRESIDENT            | (i)<br>(ii) | 249,057                                            | 66,000                              | 3,810                               | 19,890                                         | 21,326                  | 360,083                         |                                                                       |
| 4 RICHARD d GROSS, VICE PRESIDENT                 | (i)<br>(ii) | 188,255                                            | 30,391                              | 10,261                              | 16,748                                         | 20,571                  | 266,226                         |                                                                       |
| 5 MARK MCDERMOTT, VICE PRESIDENT                  | (i)<br>(ii) | 177,779                                            | 30,391                              | 2,090                               | 15,789                                         | 24,061                  | 250,110                         |                                                                       |
| 6 LORI michelle CHATMAN, SENIOR VICE PRESIDENT    | (i)<br>(ii) | 220,887                                            | 56,892                              | 1,602                               | 19,890                                         |                         | 299,271                         |                                                                       |
| 7 MICHAEL MCNEELY, sR VP                          | (i)<br>(ii) | 256,250                                            | 66,000                              | 2,090                               | 19,890                                         |                         | 344,230                         |                                                                       |
| 8 ABBY JO SIGAL, SENIOR VICE PRESIDENT            | (i)<br>(ii) | 104,921                                            | 53,900                              | 7,574                               | 4,617                                          | 10,842                  | 181,854                         |                                                                       |
| 9 Alan Scott Anderson, VICE PRESIDENT             | (i)<br>(ii) | 166,961                                            | 17,000                              | 1,642                               | 13,734                                         | 25,888                  | 225,225                         |                                                                       |
| 10 ALAZNE miren SOLIS, senior VICE PRESIDENT      | (i)<br>(ii) | 254,493                                            | 64,107                              | 652                                 | 19,890                                         | 15,305                  | 354,447                         |                                                                       |
| 11 FAITH E THOMAS, sVP &general counsel/secretary | (i)<br>(ii) | 226,313                                            | 35,327                              | 2,332                               | 19,890                                         | 14,133                  | 297,995                         |                                                                       |
| 12 Matthew D Hoffman, vice president              | (i)<br>(ii) | 171,079                                            | 14,847                              | 300                                 | 13,940                                         | 26,561                  | 226,727                         |                                                                       |
| 13 Meaghan E Vlkovic, vice president              | (i)<br>(ii) | 155,215                                            | 25,865                              | 351                                 | 11,104                                         | 24,061                  | 216,596                         |                                                                       |
| 14 PAUL M CUMMINGS, senior vice president         | (i)<br>(ii) | 57,500                                             | 37,950                              | 232,007                             | 2,919                                          | 4,650                   | 335,026                         |                                                                       |
| 15 AMALIA M KASTBERG, VICE PRESIDENT              | (i)<br>(ii) | 237,968                                            | 23,749                              | 450                                 | 19,392                                         | 24,061                  | 305,620                         |                                                                       |
| 16 MICHELLE WHETTEN, VICE PRESIDENT               | (i)<br>(ii) | 170,613                                            | 29,700                              | 802                                 | 14,663                                         | 7,530                   | 223,308                         |                                                                       |
| 17 DAVID CHARLES BOWERS, VICE PRESIDENT           | (i)<br>(ii) | 172,857                                            | 30,690                              | 300                                 | 14,981                                         | 8,174                   | 227,002                         |                                                                       |
| 18 CHARLES r WERHANE, TRUSTEE                     | (i)<br>(ii) | 393,372                                            | 287,066                             | 204,751                             | 103,510                                        | 14,133                  | 1,002,832                       |                                                                       |
| 19 Edward David Manekin, vice president           | (i)<br>(ii) | 154,515                                            | 13,449                              | 1,041                               | 12,328                                         | 26,258                  | 207,591                         |                                                                       |

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

| (A) Name and Title                               | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred in prior Form 990 |
|--------------------------------------------------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|-----------------------------------------------------------------------|
|                                                  | (i) Base Compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                                       |
| 21 mary ann leonard, vice president              | (i)<br>(ii)                                        | 173,856                             | 26,130                              | 1,980                                          | 14,912                  | 16,913                          | 233,791                                                               |
| 1 keith e fairey, vice president                 | (i)<br>(ii)                                        | 200,089                             | 39,717                              | 652                                            | 18,105                  | 18,598                          | 277,161                                                               |
| 2 alex s avitabile, vice president               | (i)<br>(ii)                                        | 167,722                             | 14,246                              | 2,332                                          | 13,265                  | 18,201                          | 215,766                                                               |
| 3 petra d montaque, vice president               | (i)<br>(ii)                                        | 153,667                             | 13,017                              | 1,290                                          | 9,829                   | 15,521                          | 193,324                                                               |
| 4 karen lado, vice president                     | (i)<br>(ii)                                        | 139,873                             | 23,017                              | 765                                            | 11,862                  | 19,797                          | 195,314                                                               |
| 5 katherine w swenson, vice president            | (i)<br>(ii)                                        | 159,410                             | 16,000                              | 450                                            | 13,005                  | 20,305                          | 209,170                                                               |
| 6 anthony joseph dispigno, senior vice president | (i)<br>(ii)                                        | 244,557                             | 62,588                              | 690                                            | 19,890                  | 25,621                          | 353,346                                                               |
| 7 robert s grossinger, vice president            | (i)<br>(ii)                                        | 189,686                             | 15,730                              | 1,290                                          | 14,977                  |                                 | 221,683                                                               |
| 8 Andrew Edward Geer, vice president             | (i)<br>(ii)                                        | 153,742                             | 25,520                              | 450                                            | 13,055                  | 23,387                          | 216,154                                                               |
| 9 Melinda J Pollack, vice president              | (i)<br>(ii)                                        | 163,977                             | 18,975                              | 270                                            | 13,666                  | 20,113                          | 217,001                                                               |
| 10 jacqueline waggoner, DRM & DEputy director    | (i)<br>(ii)                                        | 144,410                             | 35,911                              | 617                                            | 12,992                  | 8,974                           | 202,904                                                               |
| 11 jon searles, deputy director & PR Director    | (i)<br>(ii)                                        | 165,685                             | 13,831                              | 622                                            | 12,777                  | 6,676                           | 199,591                                                               |
| 12 MARY JO BARRANCO, VICE PRESIDENT              | (i)<br>(ii)                                        | 184,477                             | 36,765                              | 1,042                                          | 17,082                  | 25,801                          | 265,167                                                               |
| 13 TIFFANY MANUEL, VICE PRESIDENT                | (i)<br>(ii)                                        | 157,766                             | 13,951                              | 300                                            | 10,154                  | 29,061                          | 211,232                                                               |
| 14 benjamin nichols, vice president              | (i)<br>(ii)                                        | 137,214                             | 13,000                              | 595                                            | 10,513                  | 23,885                          | 185,207                                                               |
| 15 thomas osboda, vice president                 | (i)<br>(ii)                                        | 167,453<br>49                       | 14,025                              | 690                                            | 9,391                   | 7,940                           | 199,499<br>49                                                         |
| 16 victoria sUSAN shire, vice president          | (i)<br>(ii)                                        | 132,719                             | 11,900                              | 283                                            | 10,424                  | 26,861                          | 182,187                                                               |
| 17 diane yental, vice president                  | (i)<br>(ii)                                        | 156,116                             | 16,000                              | 300                                            | 9,990                   | 26,483                          | 208,889                                                               |
| 18 andrew jakabovics, senior director            | (i)<br>(ii)                                        | 156,594                             | 15,624                              | 620                                            | 12,341                  | 22,156                          | 207,335                                                               |
| 19 angela boyd, VICE PRESIDENT                   | (i)<br>(ii)                                        | 146,895                             | 15,000                              | 236                                            | 11,171                  | 6,801                           | 180,103                                                               |

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

| (A) Name and Title                             |             | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred in prior Form 990 |
|------------------------------------------------|-------------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|-----------------------------------------------------------------------|
|                                                |             | (i) Base Compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                                       |
| 41 maryann Leshin, vice president              | (i)<br>(ii) | 151,038                                            | 15,000                              | 1,290                               | 11,940                                         | 24,228                  | 203,496                         |                                                                       |
| 1 LAUREL BLACHFORD, VICE PRESIDENT             | (i)<br>(ii) | 252,019                                            |                                     | 300                                 |                                                |                         | 252,319                         |                                                                       |
| 2 ANDREW JOHNSTON, VICE PRESIDENT              | (i)<br>(ii) | 150,000<br>45,450                                  | 39,600                              | 489<br>182                          | 15,810<br>1,866                                |                         | 166,299<br>87,098               |                                                                       |
| 3 CRAIG MELLEDICK, SENIOR VP, TREASURER, & CFO | (i)<br>(ii) | 255,825<br>57,078                                  | 131,109                             | 489<br>49,627                       | 15,553<br>4,337                                | 13,949<br>4,650         | 285,816<br>246,801              |                                                                       |
| 4 BRYAN PITTENGER, VICE PRESIDENT              | (i)<br>(ii) | 103,000<br>48,043                                  | 20,235                              | 180<br>86                           | 9,857<br>2,048                                 | 12,399<br>6,199         | 125,436<br>76,611               |                                                                       |
| 5 EUN SHIN, VICE PRESIDENT                     | (i)<br>(ii) | 171,780                                            | 15,000                              | 450                                 | 11,828                                         | 3,220                   | 202,278                         |                                                                       |
| 6 CATHERINE HYDE, SENIOR DIRECTOR              | (i)<br>(ii) | 144,484                                            | 3,000                               | 1,612                               | 10,398                                         | 25,310                  | 184,804                         |                                                                       |
| 7 KAREN LORD, CONTROLLER                       | (i)<br>(ii) | 136,400                                            | 11,485                              | 930                                 | 10,016                                         | 7,676                   | 166,507                         |                                                                       |

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
▶ Attach to Form 990.  
▶Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number  
52-1231931

Part I Types of Property

|                                                                            | (a)<br>Check<br>if<br>applicable | (b)<br>Number of contributions<br>or items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line<br>1g | (d)<br>Method of determining<br>noncash contribution amounts |
|----------------------------------------------------------------------------|----------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------|
| 1 Art—Works of art . . . . .                                               |                                  |                                                        |                                                                                       |                                                              |
| 2 Art—Historical treasures . . . . .                                       |                                  |                                                        |                                                                                       |                                                              |
| 3 Art—Fractional interests . . . . .                                       |                                  |                                                        |                                                                                       |                                                              |
| 4 Books and publications . . . . .                                         |                                  |                                                        |                                                                                       |                                                              |
| 5 Clothing and household<br>goods . . . . .                                |                                  |                                                        |                                                                                       |                                                              |
| 6 Cars and other vehicles . . . . .                                        |                                  |                                                        |                                                                                       |                                                              |
| 7 Boats and planes . . . . .                                               |                                  |                                                        |                                                                                       |                                                              |
| 8 Intellectual property . . . . .                                          |                                  |                                                        |                                                                                       |                                                              |
| 9 Securities—Publicly traded . . . . .                                     | X                                | 5                                                      | 28,704                                                                                | FMV ON DATE ACQUIRED                                         |
| 10 Securities—Closely held stock . . . . .                                 |                                  |                                                        |                                                                                       |                                                              |
| 11 Securities—Partnership, LLC,<br>or trust interests . . . . .            |                                  |                                                        |                                                                                       |                                                              |
| 12 Securities—Miscellaneous . . . . .                                      |                                  |                                                        |                                                                                       |                                                              |
| 13 Qualified conservation<br>contribution—Historic<br>structures . . . . . |                                  |                                                        |                                                                                       |                                                              |
| 14 Qualified conservation<br>contribution—Other . . . . .                  |                                  |                                                        |                                                                                       |                                                              |
| 15 Real estate—Residential . . . . .                                       |                                  |                                                        |                                                                                       |                                                              |
| 16 Real estate—Commercial . . . . .                                        |                                  |                                                        |                                                                                       |                                                              |
| 17 Real estate—Other . . . . .                                             |                                  |                                                        |                                                                                       |                                                              |
| 18 Collectibles . . . . .                                                  |                                  |                                                        |                                                                                       |                                                              |
| 19 Food inventory . . . . .                                                |                                  |                                                        |                                                                                       |                                                              |
| 20 Drugs and medical supplies . . . . .                                    |                                  |                                                        |                                                                                       |                                                              |
| 21 Taxidermy . . . . .                                                     |                                  |                                                        |                                                                                       |                                                              |
| 22 Historical artifacts . . . . .                                          |                                  |                                                        |                                                                                       |                                                              |
| 23 Scientific specimens . . . . .                                          |                                  |                                                        |                                                                                       |                                                              |
| 24 Archeological artifacts . . . . .                                       |                                  |                                                        |                                                                                       |                                                              |
| 25 Other ▶ ( )                                                             |                                  |                                                        |                                                                                       |                                                              |
| 26 Other ▶ ( )                                                             |                                  |                                                        |                                                                                       |                                                              |
| 27 Other ▶ ( )                                                             |                                  |                                                        |                                                                                       |                                                              |
| 28 Other ▶ ( )                                                             |                                  |                                                        |                                                                                       |                                                              |

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

Yes

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 51227J

Schedule M (Form 990) (2014)

Part II

Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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

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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public

Inspection

|                                                               |                                                  |
|---------------------------------------------------------------|--------------------------------------------------|
| Name of the organization<br>ENTERPRISE COMMUNITY PARTNERS INC | Employer identification number<br><br>52-1231931 |
|---------------------------------------------------------------|--------------------------------------------------|

990 Schedule O, Supplemental Information

| Return Reference             | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| governance                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| governance                   | 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 INTERESTS 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 INTERESTS DISCLOSURE STATEMENT IN ITS MAILING TO THE TRUSTEES IN ADVANCE OF THE ANNUAL MEETING OF THE BOARD (USUALLY HELD IN MARCH) WE ASK THAT TRUSTEE 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 REFERENCE 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                   | 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                   | documents made available to public upon request and through our website                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| reconciliation of net assets | Change in net assets of affiliates 15,606,000 Net unrealized gain on investment 921,000 Change in Non-controlling interests 1,957,000 Audit Statement-Only change in controlling interests 672,000 GAAP to Tax adj (313,000) ----- TOTAL 18,843 000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.  
▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization  
ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number  
52-1231931

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable) of disregarded entity                                         | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|-------------------------------------------------------------------------------------------------------------|-------------------------|--------------------------------------------------|---------------------|---------------------------|----------------------------------|
| (1) ENTERPRISE LOUISIANA LOAN FUND LLC<br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>47-1718653 | FINANCING               | DE                                               | 172,925             | 1,099,632                 | ECP INC                          |
| (2) Enterprise New Orleans NT LLC<br>11000 broken land parkway 700<br>columbia, MD 21044<br>52-1231931      | afford hsg              | MD                                               | 90,745              | 1,216,938                 | ecp inc                          |
| (3) ENTERprise new generation member llc<br>1100 broken land parkway 700<br>columbia, MD 21044              | financing               | DE                                               |                     |                           | ECP INC                          |

Part II

Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

| (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Section 512(b)(13) controlled entity? |    |
|-------------------------------------------------------|-------------------------|--------------------------------------------------|----------------------------|-----------------------------------------------------|----------------------------------|----------------------------------------------|----|
|                                                       |                         |                                                  |                            |                                                     |                                  | 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.

| (a)<br>Name, address, and EIN of<br>related organization                                             | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or<br>foreign<br>country) | (d)<br>Direct<br>controlling<br>entity | (e)<br>Predominant<br>income(related,<br>unrelated,<br>excluded from<br>tax under<br>sections 512-<br>514) | (f)<br>Share of<br>total income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Disproprtionate<br>allocations? |    | (i)<br>Code V-UBI<br>amount in<br>box 20 of<br>Schedule K-1<br>(Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>ownership |
|------------------------------------------------------------------------------------------------------|-------------------------|--------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------|------------------------------------------|----------------------------------------|----|----------------------------------------------------------------------------|-------------------------------------------|----|--------------------------------|
|                                                                                                      |                         |                                                              |                                        |                                                                                                            |                                 |                                          | Yes                                    | No |                                                                            | Yes                                       | No |                                |
| (1) ECLF TOAH mbr LLC<br><br>11000 broken land parkway 700<br>Columbia, MD 21044<br>27-5305396       | FINANCING               | DE                                                           | ECLF                                   | RELATED                                                                                                    | 35,288                          | 99,297                                   |                                        | No |                                                                            |                                           | No | 99 990 %                       |
| (2) COMMUNITY WEATHERIZATION LLC<br><br>501 7TH AVENUE 7TH FLOOR<br>NEW YORK, NY 10018<br>27-2173025 | AFFORD HSGING           | DE                                                           | ECP INC                                | RELATED                                                                                                    |                                 |                                          |                                        | No |                                                                            |                                           | No | 50 000 %                       |

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)<br>Name, address, and EIN of<br>related organization                                                   | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Type of entity<br>(C corp, S corp,<br>or trust) | (f)<br>Share of total<br>income | (g)<br>Share of end-of-<br>year<br>assets | (h)<br>Percentage<br>ownership | (i)<br>Section 512<br>(b)(13)<br>controlled<br>entity? |    |
|------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------|-------------------------------------|--------------------------------------------------------|---------------------------------|-------------------------------------------|--------------------------------|--------------------------------------------------------|----|
|                                                                                                            |                         |                                                           |                                     |                                                        |                                 |                                           |                                | Yes                                                    | No |
| (1) ENTERPRISE GROUP INC<br><br>11000 broken land parkway<br>700<br>COLUMBIA, MD 21044<br>52-1348286       | AFF HOUSING             | MD                                                        | ECP INC                             | C CORP                                                 |                                 |                                           | 100 000 %                      |                                                        | No |
| (2) ENTERPRISE NEW ORLEANS LLC<br><br>11000 broken land parkway<br>700<br>COLUMBIA, MD 21044<br>26-4201991 | AFFORDABLE HS           | MD                                                        | ECP INC                             | C CORP                                                 |                                 |                                           | 100 000 %                      |                                                        | No |

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b Yes

1c Yes

1d Yes

1e

1f

1g

1h

1i

1j

1k

1l Yes

1m Yes

1n Yes

1o

1p Yes

1q Yes

1r

1s

No

No

No

No

No

No

No

No

No

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)<br>Name of related organization     | (b)<br>Transaction<br>type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-----------------------------------------|----------------------------------|------------------------|----------------------------------------------|
| (1) ENterprise community investment Inc | a                                | 4,621,467              | cost                                         |
| (2) ENterprise community investment Inc | k                                | 7,025,517              | cost                                         |
| (3) ENterprise community investment Inc | l                                | 6,067,929              | cost                                         |
| (4) ENterprise community investment Inc | o                                | 950,224                | cost                                         |
| (5) ENterprise community investment Inc | p                                | 769,746                | cost                                         |

Schedule R (Form 990) 2014

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

**Part VII**   **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

| Return Reference | Explanation |
|------------------|-------------|
|------------------|-------------|

Additional Data

Software ID:

Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

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

| (a)<br>Name, address, and EIN of related organization                                                           | (b)<br>Primary activity | (c)<br>Legal domicile<br>(state or foreign country) | (d)<br>Exempt Code<br>section | (e)<br>Public charity<br>status<br>(if section 501(c)<br>(3)) | (f)<br>Direct controlling<br>entity | (g)<br>Section 512<br>(b)(13)<br>controlled<br>entity?<br><div>YesNo</div> |
|-----------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------|-------------------------------|---------------------------------------------------------------|-------------------------------------|----------------------------------------------------------------------------|
| (1) ENTERPRISE COMMUNITY LOAN FUND INC<br><br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>52-0192004 | FINANCING               | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (1) ENTERPRISE HOME OWNERSHIP PARTNERS INC<br><br>600 wilshire blvd<br>LOS ANGELES, CA 90017<br>31-1737642      | AFF HOUSING             | CA                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (2) EHOP- DALLAS INC<br><br>500 akard street<br>DALLAS, TX 75201<br>72-1590088                                  | AFF HOUSING             | TX                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (3) NEIGHBORHOOD PARTNERSHIP HOUSING DEVELOP<br><br>1 WHITEHALL STREET<br>NEW YORK, NY 10004<br>13-3811616      | AFF HOUSING             | NY                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (4) ENTERPRISE MARYLAND LLC<br><br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>26-3262997            | AFF HOUSING             | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (5) IACENTERPRISE NEHEMIAH DEVELOPMENT<br><br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>52-1742031 | AFF HOUSING             | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (6) CORNERSTONE HOUSING CORPORATION<br><br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>52-1742293    | AFF HOUSING             | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (7) CITY HOMES INC<br><br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>52-1479114                     | AFF HOUSING             | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ECP INC                             | No                                                                         |
| (8) ENTERPRISE ADVISORS INC<br><br>11000 broken land parkway 700<br>COLUMBIA, MD 21044<br>27-3846733            | aff housing             | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ecp inc                             | No                                                                         |
| (9) Affordable Housing Solutions Inc<br><br>11000 broken land parkway 700<br>Columbia, MD 21044<br>35-2389470   | aff housing             | MD                                                  | 501(c)(3)                     | 509(a)(3)                                                     | ecp inc                             | No                                                                         |
| (10) enterprise community investment inc<br><br>11000 broken land parkway<br>columbia, MD 21044<br>52-1206840   | aff housing             | MD                                                  | 501(c)(4)                     |                                                               | N/A                                 | No                                                                         |