DLN: 93493214000406

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)

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

| A F | or th | ie 20 | 15 Cal | endar year, or tax year beginning | g 01-01-2015 , and ending 12-31-20 |)13 | | | | | |
|--|--|---|--|--|--|----------------------------------|---|---|--|--|--|
| B Ch | eck ıf | appli | cable | C Name of organization ENTERPRISE COMMUNITY PARTNERS | INC | | D Emplo | yer ide | entification number | | |
| Address change | | | ge | % CRAIG MELLENDICK | 52-12 | 23193 | 1 | | | | |
| ∏ Na | me ch | hange | : | Doing business as | | | | | | | |
| ☐ Initial return Final | | | | | | | E Telepho | E Telephone number | | | |
| Fir | | erm in: | ated | Number and street (or P O box if ma 11000 broken land parkway Suite 70 | all is not delivered to street address) Room/s | suite | | 964- | | | |
| Γ Aπ | | | | City or town, state or province, count | try, and ZID or foreign postal sada | | (410) | 1904- | 1230 | | |
| _ | | | ending | COLUMBIA, MD 21044 | ry, and ZIP of foleigh postal code | | G Gross r | eceipts | \$ 82,542,996 | | |
| , ,,, | pileatie | ion pe | .namg | E Name and address of princ | suppl officer | | | | | | |
| | | | | F Name and address of princ CRAIG MELLENDICK | cipal officer | 1 | s this a group ubordinates? | | n for □Yes 🔽 No | | |
| | | | | 11000 broken land parkway7 COLUMBIA, MD 21044 | 00 | | re all subord | | | | |
| | | | | COLUMBIA, MD 21044 | | | ncluded? | | | | |
| Ta | ıx-exe | empt | status | ▼ 501(c)(3) | sert no) 4947(a)(1) or 527 | | r "No," attach Group exempt | | (see instructions) | | |
| | ebsit | te: Þ | • wwv | v enterprisecommunity org | | | Stoup exempt | .ioii iiu | IIIdel F | | |
| | | | | Corporation Trust Association | Tou b | 1.,, | | | • | | |
| K For | m of c | organ | ization | Corporation Trust Association |) Other ► | L Year | of formation 19 | | ¶ State of legal domicile ID | | |
| Pa | rt I | | Sum | mary | | | | · | | | |
| | | | | cribe the organization's mission | | | | | | | |
| | | | | ΓΕ OPPORTUNITIES FOR LOW- ITIES | · AND moderate-income people throi | ugh affordal | ble housing in | diver | se, THRIVING | | |
| 8 | 2 | <u> </u> | IIION | 11123 | | | | | | | |
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| Ē | - | | | | | | | | | | |
| Governance | 2 | Che | eck th | is box দ if the organization disc | continued its operations or disposed | of more tha | an 25% of its | net as | ssets | | |
| | 3 | Nur | nberd | of voting members of the governing | ng body (Part VI, line 1a) | | | з | 25 | | |
| <u> </u> | 1 | | | | the governing body (Part VI, line 1b | | | 4 | 23 | | |
| Activities & | 1 | | | | alendar year 2015 (Part V, line 2a) | | | 5 | 299 | | |
| 고 작 | | | | · | cessary) | | 6 | 59 | | | |
| | 7a | Tot | al unr | elated business revenue from Pai | rt VIII, column (C), line 12 | | | 7a | 0 | | |
| | ЬΓ | Net | unrela | ted business taxable income fror | m Form 990-T, line 34 | | | 7b | | | |
| | | | | | | | D.: V | | Comment Veen | | |
| | | | | | | | Prior Year | | Current Year | | |
| ٠. | 8 | C | Contri | butions and grants (Part VIII, lin | e 1h) | | 55,656, | 679 | 68,558,911 | | |
| anue | 8 9 | F | rogra | m service revenue (Part VIII, lin | ne 2g) | : | 55,656, 8,873, | 009 | 68,558,911 8,141,668 | | |
| enue. | 9 10 | F | Progra Invest | m service revenue (Part VIII, lin ment income (Part VIII, column | ne 2g) | : | 55,656, 8,873, 483, | 009 658 | 68,558,911 8,141,668 481,724 | | |
| Revenue | 9 10 11 | F I | Progra Invest Other | m service revenue (Part VIII, lin ment income (Part VIII, column revenue (Part VIII, column (A), l | ne 2g) | | 55,656, 8,873, | 009 658 | 68,558,911 8,141,668 | | |
| Revenue | 9 10 | F I C | Progra Invest Other | m service revenue (Part VIII, lin ment income (Part VIII, column revenue (Part VIII, column (A), l | ne 2g) | | 55,656, 8,873, 483, | 009 658 490 | 68,558,911 8,141,668 481,724 | | |
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| Revenue | 9 10 11 12 | F I C T 1 | Progra Invest Other Fotal r L2) Grants | m service revenue (Part VIII, lin ment income (Part VIII, column revenue (Part VIII, column (A), l revenue—add lines 8 through 11 o and similar amounts paid (Part I | ne 2g) | ne | 55,656, 8,873, 483, 4,288, 69,301, | 009 658 490 836 | 68,558,911 8,141,668 481,724 4,804,031 81,986,334 | | |
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| | 9 10 11 12 13 14 15 | F I C T 1 1 C E S 5 5 | Progra Invest Other Total r L 2) Grants Benefit Balarie 5-10) Profes | m service revenue (Part VIII, linement income (Part VIII, column revenue (Part VIII, column (A), levenue—add lines 8 through 11 (a) and similar amounts paid (Part I) as paid to or for members (Part I) as, other compensation, employed sional fundraising fees (Part IX, | (A), lines 3, 4, and 7d) Ines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), lines (A | ne | 55,656, 8,873, 483, 4,288, 69,301, 16,995, | 009 658 490 836 692 0 | 68,558,911 8,141,668 481,724 4,804,031 81,986,334 15,593,111 0 | | |
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BETHESDA, MD 208146583

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

. ▼Yes 「No

| orn | m 990 (2015) | Page 2 |
|------------|--|---------------|
| Par | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III | |
| 1 | Briefly describe the organization's mission | • • |
| 0 (| CREATE OPPORTUNITIES FOR LOW AND MODERATE-INCOME PEOPLE THROUGH AFFORDABLE HOUSING AND DIVERS RIVING COMMUNITIES | Ε, |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? | |
| | 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? | |
| | 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 \$ 61,779,431 including grants of \$ 15,593,111) (Revenue \$ 8,141,668) | |
| | 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 \$) | |
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| | | |
| | | |
| 4- | (Code) (Expenses \$ including grants of \$) (Revenue \$) | |
| 4 c | (Code) (Expenses \$ including grants of \$) (Revenue \$) | |
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| 4d | Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$) | |
| 4e | Total program service expenses ► 61,779,431 | |
| | | |

| Form 990 (| 2015) |
|------------|---------------------------------|
| 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 $I \oplus \ldots \ldots \ldots \ldots \ldots \ldots$. | 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 | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. | 11a | 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 | Yes | |
| 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 | |
| | 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? <i>If "Yes," complete Schedule G, Part II</i> | 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 | | |

| Par | t 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? If "Yes," complete Schedule I, Parts I and II | 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? If "Yes," complete Schedule I, Parts I and III | 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> | | | | | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | No | | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | No | | |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II | 26 | | 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? If "Yes," complete Schedule L, Part III | 27 | | No | | |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | No | | |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | No | | |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | No | | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . | 29 | Yes | | | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | No | | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . | 31 | | No | | |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | No | | |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I </i> | 33 | Yes | | | |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | 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)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | 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? If "Yes," complete Schedule R, Part VI | 37 | | No | | |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | 38 | Yes | | | |

| | 990 (2015) | | | Page 5 |
|-----|--|----------|-------------------|---------------|
| Par | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V | | | _ |
| | Check if Schedule O contains a response of note to any line in this Part V | <u> </u> | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 254 | | . 05 | |
| ь | Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0 | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| | gaming (gambling) winnings to prize winners? | 1c | | |
| 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 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Yes | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | No |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 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 | | Νo |
| b | If "Yes," enter the name of the foreign country 🕨 | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | | |
| F. | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | No |
| | | 5b | | 100 |
| С | 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 | 6a | | No |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | | | |
| Ь | 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). | | | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and | 7a | Yes | |
| | services provided to the payor? | | | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes | |
| С | 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 | | | |
| | | | | |
| е | 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 |
| | 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 | 7h | | |
| 8 | Form 1098-C? | 711 | | |
| ŭ | 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 | | |
| | Section 501(c)(7) organizations. Enter | | | |
| | 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 | | | |
| 11 | Section 501(c)(12) organizations. Enter | | | |
| | Gross income from members or shareholders | | | |
| ь | Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the | | | |
| | year Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| 13 | | | | |
| а | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O | 13a | <u> </u> | L_ |
| 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 | | | |
| | Enter the amount of reserves on hand | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| D | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | orm ag | (2015) |
| | | Г | VIIII 33 (| • (∠∪±⊃) |

| | 990 (2015) | | | Page |
|----------|---|-------|-------------|--------|
| | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, 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 | or 10 |)b belo | w, |
| <u> </u> | ction 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 25 | | res | NO |
| | 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 1b 23 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | 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? . | 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | No |
| 6 | Did the organization have members or stockholders? | 6 | | Νo |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | 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? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | 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? <i>If "Yes," provide the names and addresses in Schedule O</i> | 9 | | Νo |
| Se | ction B. Policies (This Section B requests information about policies not required by the Internal Re | eveni | ıe Cod | e.) |
| | , | | Yes | No |
| | Did the organization have local chapters, branches, or affiliates? | 10a | | Νo |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 1a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| | | | | |

b Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 13 Yes 14 Did the organization have a written document retention and destruction policy? 14 Yes 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 15a Yes 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo

Section C. Disclosure

List the States with which a copy of this Form 990 is required to be filed▶

AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV, WI

16b

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply ▼ Own website ▼ Another's website ▼ Upon request ▼ Other (explain in Schedule O)

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

- 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
- State the name, address, and telephone number of the person who possesses the organization's books and records ►CRAIG MELLENDICK 11000 BROKEN LAND PARKWAY700 columbia, MD 21044 (410) 772-6016

Part VII

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

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

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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ♦ List all of the organization's **former** officers, key employees, 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

| organizations 충료 휴 풀 😥 [흡률 살 MISC) rel | r) mated of other ensation n the |
|--|--|
| See Additional Data Table | ation and ated Izations |
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| | 90 (2015) |

| | (A) Name and Title | Name and Title Average hours per week (list any hours | | | | oox, an d | heck unless officer stee) | | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimate amount of o compensal | ated of other sation the |
|---------|--|---|-----------------------------------|-----------------------|---------|--------------|------------------------------------|-----------|--|--|------------------------------------|-----------------------------------|
| | | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organizati relate organiza | ed |
| See | Addıtıonal Data Table | | | | | | | | | | | |
| | | | | | | | | | | | | |
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| | | | | | | | <u>L</u> , | | | | | |
| 1b c | Sub-Total | | | | | • | | | | | | |
| d | Total (add lines 1b and 1c) | | | | ٠. | ٠. | - | | 9,931,377 | 1,215,743 | 1, | 340,368 |
| 2 | Total number of individuals (\$100,000 of reportable com | including but not | limited | to the | sel | ıste | d abov | e) wl | no received more th | nan | | |
| | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any on line 1a? If "Yes," complete | | | | | | | yee, • | or highest comper | | 3 Yes | |
| 4 | For any individual listed on li | ne 1a, is the sum | of repo | rtable | e cor | mpei | nsatioi | n and | d other compensati | | | |

| | | | Yes |
|---|---|---|-----|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee | | |
| | on line 1a? If "Yes," complete Schedule J for such individual | 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? If "Yes," complete Schedule J for such | | |
| | ındıvıdual | 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? If "Yes," complete Schedule I for such person | 5 | Yes |

| | Yes | No |
|---|-----|----|
| | | |
| 3 | Yes | |
| | | |
| 4 | Yes | |
| | | |
| 5 | Yes | |

Section B. Independent Contractors

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

| (A) | (B) | (C) |
|--|-------------------------|--------------|
| Name and business address | Description of services | Compensation |
| matter unlimited llc, 175 varick street NEW YORK, NY 10014 | consulting | 1,038,877 |
| deloitte tax llc, po box 844708 DALLAS, TX 75284 | CONSULTING | 1,188,370 |
| apa ten g llc, 750 first street ne WASHINGTON, DC 20002 | CONSULTING | 513,012 |
| detroit shoreway community dev org, 1020 highland colony parkway 400 RIDGELAND, OH 44102 | consulting | 296,847 |
| omni 600 wilshire Limited partnersh, 600 wisshire blvd unite 950 LOS ANGELES, CA 90017 | consulting | 219,806 |
| | | _ |

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 V | 4 🛊 🗜 | Statement of Revenue | nonce or note to any lir | a in this Dart VIII | | | _ |
|---|----------|--|--------------------------|---------------------|--|---|--|
| | | Check if Schedule O contains a res | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| ıts nts | 1a | , , | 1a | | | | |
| ran | | · | 1b | | | | |
| s, G Am | С | Fundraising events | 1c 1,184,161 | | | | |
| Gift Ilar | d | Related organizations | 1d 3,400,000 | | | | |
| ns, l | e | Government grants (contributions) | 1e 30,036,234 | | | | |
| Contributions, Giffs, Grants and Other Similar Amounts | f | sımılar amounts not ıncluded above | 1f 33,938,516 | | | | |
| ıtri 10t | g | Noncash contributions included in lines 1a-1f \$ | 1,070,139 | | | | |
| Cor | h | Total. Add lines 1a-1f | - • • • • | 68,558,911 | | | |
| n) | | | Business Code | | | | |
| emu | 2a | AFFILIATE SERVICES | 531390 | 7,433,468 | 7,433,468 | | |
| Re | b | TRAINING PROGRAMS | 531390 | 524,887 | 524,887 | | |
| 931 | c | OTHER INCOME | 531390 | 124,167 | 124,167 | | |
| Serv | d | FLOW THRU FROM LAFITTE REDEVELOPMENT LLC | 531390 | 59,146 | 59,146 | | |
| an : | e | | | | | | |
| Program Service Revenue | f | All other program service revenue | | | | | |
| Δ | g | Total. Add lines 2a-2f | | 8,141,668 | | | |
| | 3 | Investment income (including divided and other similar amounts) | | 481,724 | | | 481,724 |
| | 4 | Income from investment of tax-exempt bo | | 0 | | | |
| | 5 | Royalties | 🔸 [| 5,137,895 | | | 5,137,895 |
| | | (ı) Real | (II) Personal | | | | |
| | 6a | Gross rents | | | | | |
| | b | Less rental expenses | | | | | |
| | с | Rental income 0 or (loss) | 0 | | | | |
| | d | Net rental income or (loss) | | 0 | | | |
| | | (ı) Securities | (II) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | | | | | |
| | ь | Less cost or other basis and sales expenses | | | | | |
| | c d | Gain or (loss) Net gain or (loss) | | 0 | | | |
| Other Revenue | | Gross income from fundraising events (not including \$ | | | | | |
| Jer | | | a 222,798 | | | | |
| ₹ | | Less direct expenses | | | | | |
| | | Net income or (loss) from fundraising Gross income from gaming activities See Part IV, line 19 | | -333,864 | | | |
| | _ | | a | | | | |
| | | Less direct expenses Net income or (loss) from gaming a | ctivities | 0 | | | |
| | | Gross sales of inventory, less | ctivities | ű | | | |
| | | returns and allowances . | | | | | |
| | . | | | | | | |
| | | Less cost of goods sold ! Net income or (loss) from sales of i | | 0 | | | |
| | Ť | Miscellaneous Revenue | Business Code | | | | |
| | 11a | | | | | | |
| | b | | | | | | |
| | С | | | | | | |
| | d | All other revenue | | | | | |
| | e | Total. Add lines 11a-11d | | 0 | | | |
| | 12 | Total revenue. See Instructions . | | 81,986,334 | 8,141,668 | | 5,619,619 |

Form 990 (2015) Part IX Statement of Functional Expenses

| Section | on 501(c)(3) and 501(c)(4) organizations must complete all columns | All other organiz | ations must com | plete column (A) | |
|---------|---|--------------------------------|---|---|---------------------------------------|
| | Check if Schedule O contains a response or note to any line in t | nis Part IX | | | |
| | ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 | 15,593,111 | 15,593,111 | | |
| 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 | 0 | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | 27,051,192 | 20,388,915 | 4,489,857 | 2,172,420 |
| 7 | Other salaries and wages | 0 | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 5,905,964 | 4,465,565 | 997,798 | 442,601 |
| 9 | Other employee benefits | 0 | | | |
| 10 | Payroll taxes | 0 | | | |
| 11 | Fees for services (non-employees) | | | | |
| а | 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 | 0 | | | |
| 13 | Office expenses | 982,819 | 893,942 | 48,169 | 40,708 |
| 14 | Information technology | 0 | | | |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 3,521,193 | 2,961,623 | 342,347 | 217,223 |
| 17 | Travel | 1,708,178 | 1,524,706 | 61,474 | 121,998 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | _ |
| 19 | Conferences, conventions, and meetings | 898,227 | 884,500 | 6,867 | 6,860 |
| 20 | Interest | 0 | | | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 1,442,077 | 253,943 | 1,177,224 | 10,910 |
| 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) | | | | |
| а | PROFESSIONAL AND CONTRACT SERV | 17,108,256 | 13,533,038 | 3,206,094 | 369,124 |
| b | MISCELLANEOUS | 2,111,877 | 980,043 | 554,696 | 577,138 |
| c | MARKETING | 300,045 | 300,045 | | |
| d | DIRECT FUNDRAISING | -556,662 | | | -556,662 |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 76,066,277 | 61,779,431 | 10,884,526 | 3,402,320 |
| 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 ► if following SOP 98-2 (ASC 958-720) | | | | |

Form 990 (2015) Page **11** 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 1 14,374,816 1 25,172,528 2 Savings and temporary cash investments . . 5,669,511 2 3,758,454 3 15,065,402 3 13,204,855 Pledges and grants receivable, net . . . 6,064,446 8,927,211 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 0 6 0 23,966,257 7 22,877,235 7 8 0 8 Inventories for sale or use 9 292,984 9 276,567 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 11,463,969 Complete Part VI of Schedule D 10a 10b 6.602.926 4,590,440 10c 4,861,043 b Less accumulated depreciation . 23,667,794 24,616,507 11 11 12 236,924 12 437,783 Investments—other securities See Part IV, line 11 13 164,434,232 13 192,164,187 Investments—program-related See Part IV, line 11 . 14 14 0 3,119,610 6,218,539 15 Other assets See Part IV, line 11 15 16 264,581,345 16 299,415,980 **Total assets.**Add lines 1 through 15 (must equal line 34) . . 17 8.672.164 **17** 11.550.545 Accounts payable and accrued expenses . . 18 0 18 0 0 0 19 19 0 20 Tax-exempt bond liabilities n 20 2,950,285 21 5,416,992 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 0 0 23 23 0 Secured mortgages and notes payable to unrelated third parties . . 0 0 24 24 Unsecured notes and loans payable to unrelated third parties 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 18,701,853 25 17,442,139 34,409,676 30.324.302 26 **Total liabilities.**Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 180,931,456 205,686,485

| 28 | Temporarily restricted net assets | 53,325,587 | 28 | 59,319,819 |
|----|---|-------------|----|------------------|
| 29 | Permanently restricted net assets | 0 | 29 | 0 |
| | Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34. | | | |
| 30 | Capital stock or trust principal, or current funds | | 30 | |
| 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 | 234,257,043 | 33 | 265,006,304 |
| 34 | Total liabilities and net assets/fund balances | 264,581,345 | 34 | 299,415,980 |
| • | | • | | E 000 (3.0.1.E.) |

| _ | 990 (2013) | | | | age 1 ∠ |
|-----|---|----------|----|-------|----------------|
| Par | Reconcilliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI | | | | ৮ |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 81,9 | 986,334 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 76,0 | 066,277 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | 5,9 | 20,057 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 234,2 | 257,043 |
| 5 | Net unrealized gains (losses) on investments | 5 | | • | <u> </u> |
| 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 | | 24.8 | 329,204 |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | | | , , ,304 |
| Par | t XII Financial Statements and Reporting | <u> </u> | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | . Г |
| | <u> </u> | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | No |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both | wed on | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| ь | Were the organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both | rate | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| C | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Yes | |
| | If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O | n | | | |
| 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? | e | 3a | Yes | |
| b | 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 | | 3b | Yes | |

Software ID: Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

| Form 990, Part VII - Compensation Compensated Employees, and Inde | of Officers, | Direct ntracto | ors, ors | Tru | ste | es, k | (ey | Employees, High | nest | |
|--|---|------------------------------------|--------------------------|----------------------|-------------------------|------------------------------|--------|---|---|--|
| (A) Name and Title | (B) A verage hours per week (list any hours for related | Posit more th perso and a | ion (han o n is b | ne b oth ctor, | ox, u an of /trus | nless ficer tee) | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and |
| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | | , | related organizations |
| Terri L Ludwig president | 40 0 | x | | х | | | | 576,345 | 0 | 39,808 |
| bill beckmann trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| edward norton trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| jonathan fp rose trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| tony salazar trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| J ronald terwilliger trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| CHARLES WERHANE TRUSTEE | 1 0 39 0 | х | | | | | | 0 | 926,808 | 123,673 |
| dora leong gallo trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| priscilla almodovar trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| gregory baer trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| mana barry trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| rıck lazıo trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| LANCE FORS TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| christopher collins trustee | 1 0 | х | | | | | | 0 | 0 | 0 |
| BABARA POPpe TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| DINA HABIB POWELL TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| RONALD RATner TRUSTEE | 1 0 | Х | | | | | | 0 | 0 | 0 |
| MEGAN SANDEL TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| ROY SWAN TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| DONALD S FALK TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| CAROL GALANTE TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| RENEE LEWIS GLOVER TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| PATRICK MCENERNEY TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| BETH MYERS TRUSTEE | 1 0 | х | | | | | | 0 | 0 | 0 |
| RAphael bostic trustee | 1 0 | х | | | | | | 0 | 0 | 0 |

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

| Compensated Employees, and Ind | | ntracto | ors | | | • | - | | I | 1 1 |
|--|---|-----------------------------------|---------------------------|-------------|--------------|------------------------------|----------|---|---|--|
| (A) Name and Title | (B) Average hours per week (list any hours | Posi more t perso and a | tion (han o n is b | ne b oth | ox,ι an o | ınless fficer | | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the |
| | for related organizations below dotted line) | Individual trustae or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |
| JEFFREY SCHAFFER Vice president | 40 0 | | | х | | | | 235,083 | 0 | 36,999 |
| RICHARD d GROSS Vice president | 40 0 | | | х | | | | 244,458 | 0 | 32,531 |
| MARK MCDERMOTT | 40 0 | | | V | | | | 222.072 | 0 | 21.126 |
| Vice president | | | | Х | | | | 223,973 | 0 | 31,126 |
| LORI michelle CHATMAN senior Vice president | 1 0 | | | x | | | | 0 | 288,935 | 20,313 |
| MICHAEL MCNEELY senior Vice president | 40 0 | | | х | | | | 336,242 | 0 | 20,313 |
| Alan Scott Anderson | 40 0 | | | | | | | | | |
| VICE PRESIDENT | | | | Х | | | | 206,317 | 0 | 34,410 |
| ALAZNE M SOLIS senior Vice president | 40 0 | | | х | | | | 335,627 | 0 | 32,985 |
| FAITH E THOMAS | 40 0 | | | | | | | | | |
| senior VP and General council | 40 0 | | | Х | | | | 274,016 | 0 | 34,934 |
| Matthew D Hoffman Vice president | | | | х | | | | 202,854 | 0 | 34,174 |
| Meaghan E Vlkovic Vice president | 40 0 | | | х | | | | 193,754 | 0 | 33,396 |
| AMALIA M KASTBERG | 40 0 | | | х | | | | 275,646 | 0 | 37,833 |
| Vice president MICHELLE WHETTEN | 40 0 | | | X | | | | 208,350 | 0 | 21,672 |
| Vice president DAVID CHARLES BOWERS | 40 0 | | | | | | | 200,330 | | 21,072 |
| Vice president | 40 0 | | | Х | | | | 210,310 | 0 | 21,848 |
| Edward David Manekin Vice president | | | | х | | | | 182,182 | 0 | 25,415 |
| keith e fairey Vice president | 40 0 | | | х | | | | 249,362 | 0 | 38,360 |
| alex s avitabile vice president | 40 0 | | | х | | | | 193,869 | 0 | 28,354 |
| petra d montague Vice president | 40 0 | | | x | | | | 177,169 | 0 | 22,921 |
| KAREN M LADO vice president | 40 0 | | | х | | | | 171,610 | 0 | 24,521 |
| katherine w swenson Vice president | 40 0 | | | х | | | | 189,308 | 0 | 26,132 |
| anthony Joseph dispigno | 40 0 | | | х | | | | 317,963 | 0 | 39,808 |
| senior Vice president robert s grossinger | 40 0 | | | | | | | | | |
| former OFFICER | 40.0 | | | Х | | | | 93,665 | 0 | 2,693 |
| Andrew Edward Geer Vice president | 40 0 | | | x | | | | 191,854 | 0 | 33,163 |
| Melinda J Pollack Vice president | 40 0 | | | х | | | | 209,067 | 0 | 27,924 |
| MARY JO BARRANCO | 40 0 | | | х | | | | 216,418 | 0 | 35,374 |
| TIFFANY MANUEL | 40 0 | | | х | | | | 188,094 | 0 | 23,208 |
| Vice president | | | | | | 1 | <u> </u> | | | <u> </u> |

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

| (A) Name and Title | (B) Average hours per | Posit more th | ion (| | | ; | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
|---------------------------------|---|--------------------|-----------------------|----|--|--------|--|--|--|
| | week (list any hours | persoi and a | | | | | from the organization (W- | from related organizations (W- | compensation from the |
| | for related organizations below dotted line) | Individual trustee | Institutional Trustee | ₽ | Highest compensated | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |
| benjamin nichols | 40 0 | | | | | | | | |
| Vice president | | | | х | | | 167,048 | 0 | 30,966 |
| thomas osdoba | 40 0 | | | | | | | | |
| Vice president | | | | х | | | 190,609 | 0 | 17,205 |
| diane yentel | 40 0 | | | х | | | 190,700 | 0 | 32,325 |
| Vice president | 40.0 | | | | | | | | |
| angela boyd Vice president | 40 0 | | | х | | | 173,573 | 0 | 16,967 |
| maryann Leshin FORMER OFFICER | 40 0 | | | х | | | 197,680 | 0 | 19,658 |
| LAUREL BLAtCHFORD | 40 0 | | | | | | | | |
| senior Vice president | | | | X | | | 346,450 | 0 | 18,235 |
| ANDREW JOHNSTON | 40 0 | | | х | | | 265.005 | 0 | 20.212 |
| senior Vice president | | | | | | | 265,905 | 0 | 20,313 |
| CRAIG MELLENDICK | 40 0 | | | х | | | 516,827 | 0 | 39,808 |
| senior Vice president & CFO | | | | L^ | | | 310,027 | | 33,000 |
| JUDITH KENDE | 40 0 | | | х | | | 256,668 | 0 | 34,621 |
| BRYAN PITTINGER | 40 0 | | | | | | | _ | |
| vice president | | | | X | | | 174,515 | 0 | 31,144 |
| EUN SHIN | 40 0 | | | х | | | 198,658 | 0 | 14,302 |
| vice president | | | | | | | 190,030 | Ů | 14,302 |
| MARY ANN LEONARD vice president | 40 0 | | | х | | | 216,393 | 0 | 28,432 |
| SUSAN V SHIRE | 40 0 | | | | | | | | |
| FORMER OFFICER | | | | X | | | 141,195 | 0 | 16,265 |
| WILLIAM R FREY | 40 0 | | | | V | | 207 252 | | 20.550 |
| highest comp | | | | | X | | 207,252 | 0 | 29,558 |
| jacqueline waggoner | 40 0 | | | | x | | 200,813 | 0 | 20,970 |
| highest comp | | | | | | | | | |
| Jon searles highest comp | 40 0 | | | | x | | 186,605 | 0 | 18,134 |
| andrew jakabovics highest comp | 40 0 | | | | х | | 184,090 | 0 | 32,502 |
| MANUELA BLANEY highest comp | 40 0 | | | | х | | 212,860 | 0 | 35,075 |

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As Filed Data -

DLN: 93493214000406

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

| ENTER | RPRISE | COMMUNITY PARTNERS INC | | | | | | |
|----------|-------------|--|---------------------------------------|-------------------------------|------------------------|--------------------------|--------------------------|---------------------------------|
| | | | | | | | 52-1231931 | |
| | rt I | | | Status (All organiza | | | | ons. |
| The | organı — | zation is not a private fo | | · | | • | • | |
| 1 | <u></u> | A church, convention | • | | | • | | |
| 2 | | A school described in | section 170(b |)(1)(A)(ii). (Attach S | chedule E (Form | n 990 or 990-E | EZ)) | |
| 3 | Γ | A hospital or a cooper | atıve hospıtal | service organization | described in se | tion 170(b)(1) | (A)(iii). | |
| 4 | Γ | A medical research or | ganızatıon ope | erated in conjunction v | with a hospital c | lescribed in se c | ction 170(b)(1)(A)(iii |). Enter the |
| | _ | hospital's name, city, | | | | | | |
| 5 | ı | | | nefit of a college or un | iversity owned | or operated by | a governmental unit o | lescribed in section |
| 6 | Г | 170(b)(1)(A)(iv). (Constitution of A federal, state, or location of the A federal of the | | | described in s | ection 170(b)(1 | I)(A)(v) | |
| 7 | <u> </u> | An organization that n | | | | | | ieneral public |
| • | 1* | described in section 1 | • | | | om a governme | ental unit of from the g | Jeneral public |
| 8 | Γ | A community trust de | | | | tII) | | |
| 9 | Г | An organization that i | normally recei | ves (1) more than 33 | 1/3% of its sup | port from contr | ıbutıons, membership | fees, and gross |
| | | | | ts exempt functions—s | | | | |
| | | | | unrelated business ta | | | 1 tax) from businesse | es acquired by the |
| 10 | _ | organization after Jun An organization organ | • | see section 509(a)(2). | | • | n E00(a)(4) | |
| | '_ | - | • | • | • | • | | ut the nurnesses of |
| 11 | ı | An organization organ one or more publicly s | | | | | | |
| | | the box in lines 11a th | • • • | | • | , , , | | |
| а | Γ | Type I. A supporting of | | | | | | |
| | | supported organizatio | | | | ty of the direct | ors or trustees of the | supporting |
| L | _ | organization You mus | - | - | | | | |
| Ь | ı | Type II. A supporting management of the su | | | | | | |
| | | must complete Part IV | | | same persons e | nac control of t | nanage the supported | organization(3) Tou |
| C | Γ | Type III functionally | | | n operated in c | onnection with, | , and functionally integ | grated with, its |
| | _ | supported organizatio | | | | | | |
| d | ı | Type III non-function | | | | | | |
| | | not functionally integr (see instructions) Yo | _ | = | | | ement and an attentiv | eness requirement |
| e | | Check this box if the o | - | | • | | s a Type I, Type II, T | ype III functionally |
| | · | integrated, or Type II | | | | | ,, , ,, , | , |
| f | Ente | r the number of support | ed organizatio | ns | | | <u> </u> | |
| g | | Provide the following i | nformation ab | out the supported orga | anızatıon(s) | | | |
| | | | · · · · · · · · · · · · · · · · · · · | I | | | | |
| Nan | na af a | (i) supported organization | (ii)EIN | (iii) | (iv) Is the orga | | (v) A mount of | (vi) A mount of other |
| Mail | ile oi s | supported organization | | Type of organization | listed in your | | monetary support | support (see |
| | | | | (described on lines | docume | | (see instructions) | instructions) |
| | | | | 1- 9 above (see | | | , | , |
| | | | | ınstructions)) | | | | |
| | | | | | | B., | | |
| | | | | | Yes | No | | |
| | | | | | | | | |
| Tota | <u>.</u> | | | | | | | |
| | - | | | | | | | |

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 (a)2011 **(b)**2012 (c)2013 (d)2014 **(e)**2015 (f)Total (or fiscal year beginning in) 1 Gifts, grants, contributions, and 44,273,272 45,074,369 53,644,487 55,656,679 68,555,911 267,204,718 membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a 0 governmental unit to the organization without charge 44,273,272 45,074,369 53,644,487 55,656,679 68,555,911 267,204,718 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly 0 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 267,204,718 from line 4 Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) 🟲 55,656,679 Amounts from line 4 44,273,272 45,074,369 53,644,487 68,555,911 267,204,718 Gross income from interest, dividends, payments received 6,653,836 5,536,575 4,691,954 5,105,125 5,619,619 27,607,109 on securities loans, rents, royalties and income from sımılar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 0 capital assets (Explain in Part VI) Total support. Add lines 7 11 294,811,827 through 10 Gross receipts from related activities, etc (see instructions) 12 49,370,321 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, Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 14 90 636 % Public support percentage for 2014 Schedule A, Part II, line 14 15 15 86 260 % 16a 33 1/3% support test - 2015. 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 **▶**▽ 33 1/3% support test -2014. 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 - 2015. 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 - 2014. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2015 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (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 vear (a)2011 (d)2014 **(b)**2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) 🕨 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt nurnose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2014 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

b 33 1/3% support tests—2014. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

19a 33 1/3% support tests—2015. 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

Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2014 Schedule A, Part III, line 17

18

►ſ

17

18

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)

| Se | ction | Δ ΔΙ | Sunna | rtina | Orgai | nizations |
|----|-------|-------|-------|-------|-------|-------------|
| Je | CUUII | A. A. | Subbl | , unu | Oluai | IIIZativiis |

| | ·· | | Yes | No |
|------------|--|-----|-----|----|
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI 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 $(2)^2$ If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) . | 2 | | |
| За | 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 Part VI 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? | 3с | | |
| 4 a | If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 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 | | |
| 5 a | 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 | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | Substitutions only. 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 Part VI . | 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 Part VI . | 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 Part VI . | 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 Part VI . | 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 | | |
| | 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 | | |

| Pai | Supporting Organizations (continued) | | | |
|-------------|--|----|-----|----|
| Se | ection 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 Part VI 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. | 1 | | |
| 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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization. | 2 | | |
| Se | ection 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 Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Se | ection 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? | 1 | | |
| 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 Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 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 Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| Se | ection E. Type III Functionally-Integrated Supporting Organizations | | | |
| 1 a b | The organization is the parent of each of its supported organizations Complete line 3 below | | | |
| 2 | Activities Test Answer (a) and (b) below. | | Yes | No |
| 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 Part VI identify those supported organizations and explain 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 | | |
| Ŀ | 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 Part VI 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 | Parent of Supported Organizations Answer (a) and (b) below. | | | |
| | 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? <i>Provide details in Part VI</i> . | 3a | | |
| Ŀ | 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

| | Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S | | | uct ions. All other |
|----------|--|----------|-------------------------|--------------------------------|
| | Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| ! | Recoveries of prior-year distributions | 2 | | |
| | Other gross income (see instructions) | 3 | | |
| | Add lines 1 through 3 | 4 | | |
| | Depreciation and depletion | 5 | | |
| ı | 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 | | |
| , | Other expenses (see instructions) | 7 | | |
| 1 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| | | | | |
| | Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Yea (optional) |
| | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI) | | | |
| | Acquisition indebtedness applicable to non-exempt use assets | 2 | | |
| | Subtract line 2 from line 1d | 3 | | |
| | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | | |
| | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| | Multiply line 5 by 035 | 6 | | |
| | Recoveries of prior-year distributions | 7 | | |
| | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| | | | | |
| | Section C - Distributable Amount | | | Current Year |
| | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| | Enter 85% of line 1 | 2 | | |
| | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| | Enter greater of line 2 or line 3 | 4 | | |
| | Income tax imposed in prior year | 5 | | |
| i | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | | |
| | Check here if the current year is the organization's first as a non-functionally-instructions) | ntegrate | d Type III supporting o | rganızatıon (see |

| Type III Non-Functionally Integr | ated 509(a)(3) Suppo | rting Organizations (c | · · · · · · · · · · · · · · · · · · · |
|---|--------------------------------|--|---|
| Section D - Distributions | | | Current Year |
| 1 Amounts paid to supported organizations to accom | plish exempt purposes | | |
| 2 A mounts paid to perform activity that directly furth excess of income from activity | ers exempt purposes of supp | oorted organizations, in | |
| 3 Administrative expenses paid to accomplish exemp | pt purposes of supported org | anızatıons | |
| 4 A mounts paid to acquire exempt-use assets | | | |
| 5 Qualified set-aside amounts (prior IRS approval re | quired) | | |
| 6 Other distributions (describe in Part VI) See instru | uctions | | |
| 7 Total annual distributions. Add lines 1 through 6 | | | |
| Distributions to attentive supported organizations to details in Part VI) See instructions | to which the organization is r | esponsive (provide | |
| 9 Distributable amount for 2015 from Section C, line | 6 | | |
| 10 Line 8 amount divided by Line 9 amount | | | |
| | | | |
| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2015 | (iii) Distributable Amount for 2015 |
| 1 Distributable amount for 2015 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions) | | | |
| 3 Excess distributions carryover, if any, to 2015 | | | |
| | | | |
| d From 2013 | | | |
| e From 2014 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2015 distributable amount | | | |
| Carryover from 2010 not applied (see instructions) | | | |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f | | | |
| 4 Distributions for 2015 from Section D, line 7 | | | |
| \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2015 distributable amount | | | |
| c Remainder Subtract lines 4a and 4b from 4 | | | |
| 5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) | | | |
| 6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions) | | | |
| 7 Excess distributions carryover to 2016. Add lines 31 and 4c | | | |
| 8 Breakdown of line 7 | | | |
| | | | |
| c Excess from 2013 | | | |
| d From 2014 | | | |
| e From 2015 | | | |

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 | Circum | stances | Test |
|-------|-----|--------|---------|------|
|-------|-----|--------|---------|------|

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

Schedule A (Form 990 or 990-EZ) 2015

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DLN: 93493214000406

OMB No 1545-0047

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.

Inspection

If the organization answered "Yes" on 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" on Form 990, Part IV, Line 4, or Form 990-区, 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V

| | 35c (Proxy Tax) (see separate Section 501(c)(4), (5), or (6) orga | • • | iony rany (occ c | opurate men actione, e. | . o.m. coo <u></u> |
|------------------------|--|---|---|--|---|
| Na | tree of the organization TERPRISE COMMUNITY PARTNERS INC | | | | tification number |
| Par | t I-A Complete if the or | ganization is exempt under | section 501(| 52-1231931 c) or is a section 527 | organization. |
| 1 2 3 | Provide a description of the org Political expenditures Volunteer hours | ganızatıon's dırect and ındırect polit | ical campaign act | ivities in Part IV ▶ | \$ |
| Par | t I-B Complete if the or | ganization is exempt under | section 501(| c)(3). | |
| 1 2 3 4a b | Enter the amount of any excise Enter the amount of any excise If the organization incurred a sign was a correction made? If "Yes," describe in Part IV TI-C Complete if the or Enter the amount directly expendent the amount of the filing of exempt function activities Total exempt function expending the filing organization file Filing organization file Filing organization file Filing organization made payments from a mount of political contribution | e tax incurred by the organization under tax incurred by organization mana ection 4955 tax, did it file Form 47 ganization is exempt under anded by the filing organization for some reganization's funds contributed to contribute to contribute to contribute to contribute to contribute to contribute the filing organization's funds contributed to contribute to contribute the filing organization's funds contributed to contribute the filing organization's funds contributed to contribute the filing organization's funds contributed to contribute the filing organization. | gers under section 20 for this year? Section 501(ection 527 exemple ther organizations and on Form 112 EIN) of all section he amount paid frod directly delivered | c), except section 50 pt function activities s for section 527 co-POL, line 17b som the filing organization's to a separate political organization and the filing organization and the filing organization's to a separate political organization and the filing organization's to a separate political organization and the filing organization's to a separate political organization and the filing org | \$ \\$ \\ \$ \ Yes \ No \\ \$ to which the filing \\ funds Also enter the \\ inization, such as a |
| | (a) Name | (b) A ddress | (c) EIN | (d) A mount paid from filing organization's funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| 2 | | | | | |
| | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| | | | 1 | 1 | 1 |

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

| 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

| | | ying Expenditures eans amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals |
|----|---|--|--|--|--------------------------------|
| 1a | Total lobbying expenditures to influence public lobbying) | opinion (grass roots | | 127,245 | |
| b | Total lobbying expenditures to influence a legis | lative body (direct lobbying) | | 451,367 | |
| c | Total lobbying expenditures (add lines 1a and 1 | b) | | 578,612 | |
| d | d Other exempt purpose expenditures | | | 75,487,450 | |
| e | Total exempt purpose expenditures (add lines 1 | c and 1d) | | 76,066,062 | |
| f | Lobbying nontaxable amount Enter the amount | from the following table in both columns | | 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 li | ne 1f) | | 250,000 | |
| h | Subtract line 1g from line 1a If zero or less, en | ter - 0 - | | | |
| i | Subtract line 1f from line 1c If zero or less, ent | er -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?

┌ Yes ▽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)2012 | (b) 2013 | (c) 2014 | (d) 2015 | (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 (150% of line 2a, column(e)) | | | | | 6,000,000 | | | | |
| _c | Total lobbying expenditures | 877,469 | 584,872 | 757,876 | 578,612 | 2,798,829 | | | | |
| _d | Grassroots nontaxable amount | 250,000 | 250,000 | 250,000 | 250,000 | 1,000,000 | | | | |
| e | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000 | | | | |
| f | Grassroots lobbying expenditures | 26,718 | 25,385 | | 127,245 | 344,664 | | | | |

Return Reference

| Pa | rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)). | ОТ | | | | ige S |
|----------------|--|------|---------|------|------|--------------|
| <i></i> | 1 | (| a) | | (b) | |
| ror e activ | ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity. | Yes | No | A | moun | t |
| 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 | Tes | | | | |
| а | Volunteers? | | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | | |
| C | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| 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 | O ther 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? | | | | | |
| Par | t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$. | 01(c |)(5), o | r se | ctio | n |
| | | | _ | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | L | 1 | | |
| 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 | | |
| Par | t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I 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). | | | | | |
| а | Current year | 2a | | | | |
| b | Carryover from last year | 2b | | | | |
| С | 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 | | | | |
| Pa | art 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

DLN: 93493214000406

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

| rnal | Revenue Service | Information about Schedule D | (Form 990) and its instructions is at <u>www.ir</u> | s.gov/form990. | Inspection |
|--------|-------------------------|---|--|---------------------|------------------------|
| | me of the organi | | | Employer ider | ntification number |
| = IN [| ERPRISE COMMUNI | III PAKTNERS INC | | 52-1231931 | |
| Pa | rt I Organ | izations Maintaining Donor | Advised Funds or Other Similar F | | |
| | Comple | ete if the organization answere | ed "Yes" on Form 990, Part IV, line 6. | | |
| | T - + - | | (a) Donor advised funds | (b) Funds ar | d other accounts |
| | | er at end of year | | | |
| | Aggregate v year) | alue of contributions to (during | | | |
| | Aggregate v | value of grants from (during year) | | | |
| | Aggregate v | alue at end of year | | | |
| | _ | | dvisors in writing that the assets held in do the organization's exclusive legal control? | nor advised | ┌ Yes ┌ No |
| | used only for c | · | and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a | | □ Yes □ No |
| a l | | | ete if the organization answered "Yes" | on Form 990, F | Part IV, line 7. |
| _ | | | e organization (check all that apply) | | , |
| | · | on of land for public use (e g , recre | · <u>-</u> | , , | |
| | _ | of natural habitat | Preservation of a | certified historic | structure |
| | Preservation | on of open space | | | |
| | | | neld a qualified conservation contribution in | the form of a con | servation |
| | easement on th | he last day of the tax year | | Held | at the End of the Year |
| a | Total number o | of conservation easements | | 2a | at the bid of the real |
| b | Total acreage i | restricted by conservation easeme | nts | 2b | |
| C | | servation easements on a certified | | 2c | |
| d | | servation easements included in (o ure listed in the National Register |) acquired after 8/17/06, and not on a | 2d | |
| | Number of cons | servation easements modified, trai | nsferred, released, extinguished, or terminat | ed by the organız | ation during the |
| | tax year ► | | | | |
| | Number of stat | es where property subject to cons | ervation easement is located ► | | |
| | | nization have a written policy regar enforcement of the conservation e | ding the periodic monitoring, inspection, har asements it holds? | dling of | ┌ Yes ┌ No |
| | Staff and volun year | teer hours devoted to monitoring, | nspecting, handling of violations, and enforc | ing conservation | easements during the |
| | - | | | | |
| | | enses incurred in monitoring, inspe | ecting, handling of violations, and enforcing o | conservation eas | ements during the year |
| | ► \$ | | | | |
| | | servation easement reported on lii ion 170(h)(4)(B)(ii)? | ne 2(d) above satisfy the requirements of se | ction 170(h)(4) | ┌ Yes |
| | balance sheet, | - | ts conservation easements in its revenue ar of the footnote to the organization's financia sements | • | • |
| ar | t IIII Organ | izations Maintaining Collec | tions of Art, Historical Treasures, | or Other Sim | ilar Assets. |
| | | | ed "Yes" on Form 990, Part IV, line 8. | unua atatamanta | nd halance check |
| а | works of art, hi | storical treasures, or other similar | AS 116 (ASC 958), not to report in its reverses assets held for public exhibition, education, note to its financial statements that describe | or research in fu | |
| b | works of art, hi | | AS 116 (ASC 958), to report in its revenue assets held for public exhibition, education, these items | | |
| (| (i) Revenue inclu | uded on Form 990, Part VIII, line 1 | <u>.</u> | ► \$ | |
| (i | i) Assets include | ed in Form 990, Part X | | <u></u> - | |
| | If the organizat | tion received or held works of art, h | nistorical treasures, or other similar assets f SFAS 116 (ASC 958) relating to these items | | provide the |
| a | _ | ded on Form 990, Part VIII, line 1 | | ▶ \$ | |
| | | | | - 4 - | |

b Assets included in Form 990, Part X

| Par | t III | Organizations Maintaining (continued) | Collections of A | rt, His | stori | cal T | reas | sures, | or O | ther Simi | ilar As | ssets | |
|---------|-----------------|--|-------------------------|---------------|----------|---------------------------|----------------|-------------------------------|------------|---|----------|-------------|--|
| 3 | | the organization's acquisition, accetion items (check all that apply) | ession, and other reco | ords, cl | hecka | any of | the fo | ollowing t | hat a | re a signific | ant use | e of its | |
| а | ГР | ublic exhibition | | d | Γ | Loan | orex | change | progr | ams | | | |
| b | Γs | cholarly research | | е | Γ | Othe | er | | | | | | |
| С | ΓP | reservation for future generations | | | | | | | | | | | |
| 4 | Provide Part > | de a description of the organization's (III | s collections and exp | laın ho | w the | y furth | ner the | e organız | atıon | 's exempt p | urpose | ın | |
| 5 | | g the year, did the organization solic s to be sold to raise funds rather tha | | | | | | | | | ┌ Yes | ┌ No | |
| Pai | rt IV | Escrow and Custodial Arra Complete if the organization a Part X, line 21. | | Form | 990, | Part | IV, lı | ine 9, o | r rep | orted an a | amoun | t on Fori | m 990, |
| 1a | | e organization an agent, trustee, cus ded on Form 990, Part X? | todian or other intern | nediary | for c | ontrıb | outions | s or othe | rass | ets not | ┌ Yes | √ No | |
| b | If" | Yes," explain the arrangement in Pa | ort XIII and complete | the fo | llowin | g tabl | e | | | | Ame | ount | |
| С | | ginning balance | | | | | | | 1c | | | | |
| d | | ditions during the year | | | | | | İ | 1d | | | | |
| e | | tributions during the year | | | | | | | 1e | | | | |
| f | | ding balance | | | | | | ŀ | 1f | | | | |
| 2a | | ne organization include an amount or | n Form 990, Part X, lı | ne 21, | for es | crow | orcus | stodial a | ccour | nt liability? | ✓ Yes | ┌ No | |
| ь | If"Ye | s," explain the arrangement in Part | | | | | | | | | | | <u></u> |
| Pa | rt V | Endowment Funds. Complet | | | | | | | - | • | | | |
| | | | (a)Current year | (b) Pı | nor yea | ar | b (c) ⊤ | wo years l | oack | (d)Three year | rs back | (e)Four ye | ears back |
| 1a b | | nning of year balance ributions | | | | | | | \dashv | | | | |
| c | Net II losse | nvestment earnings, gains, and | | | | | | | | | | | |
| d | Gran | ts or scholarships | | | | | | | | | | | |
| e | | r expenditures for facilities programs | | | | | | | | | | | |
| f | • Δ dmi | nistrative expenses | | | | | | | | | | | |
| g g | | of year balance | | | | | | | | | | | |
| 2 | | de the estimated percentage of the c | current vear end bala | nce (lir | ne 1 a | colur | mn (a) | ı) held as | _ _ | | | | |
| a | | l designated or quasi-endowment 🕨 | carrence year ena barar | 1100 (111 | ic 19, | Colui | IIII (u) | i) iicia as | | | | | |
| b | | anent endowment | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| С | • | orarily restricted endowment Fercentages on lines 2a, 2b, and 2c s | should equal 100% | | | | | | | | | | |
| 3a | organ | nere endowment funds not in the pos ization by | _ | | | | ld and | l admınıs | terec | l for the | | Yes | No |
| | | related organizations | | | | | | • | | | 3a | | |
| b | | elated organizations | | | | | | | | | 3a | (II) B | |
| 4 | | ribe in Part XIII the intended uses o | | | | | • | • | • • | | | | <u> </u> |
| Pai | rt VI | Land, Buildings, and Equip | | | | | | | | | | | |
| | | Complete if the organization a Description of property | nswered 'Yes' to F | | | Part I (a) other ba | | e 11a.S (b) Cost or oth | | Accur | nulated | | ok value |
| | | | | | | stment) | | (othe | | (-, -, -, -, -, -, -, -, -, -, -, -, -, - | | | |
| 1a | Land | | | • | | | | | | | | | |
| | | gs | | • | | | | | | | | | |
| | | nold improvements | | • _ | | | | | 893,66 | | 1,293,51 | | 600,148 |
| | | nent | | · | | | | | 362,87 | | 1,656,16 | | 706,711 |
| е | other | | | •1 | | | | 7,: | 207,42 | : ا ۵ | 3,653,24 | 4 | 3,554,184 |

4,861,043

| Part VII Investments—Other Securities. Co | omplete if the organ | zation answered 'Yes | on Form 990, Part IV, line 11b. |
|---|---------------------------|---------------------------|--|
| See Form 990, Part X, line 12. (a) Description of security or categor | у | (b)Book value | (c)Method of valuation |
| (Including name of security) (1)Financial derivatives | | | Cost or end-of-year market value |
| (2)Closely-held equity interests | | | |
| (3)Other | | | |
| | | | |
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| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) | * | | |
| Part VIII Investments—Program Related. | id 'Vac' on Form 000 | Dart IV line 110 | |
| Complete if the organization answere | u res on Form 990 | | |
| (a) Description of investment | | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| (1)ENTERPRISE COMMUNITY INVEST | | 138,548,202 | F |
| (2)OTHERS | | 1,655,397 | F |
| (3)EHOP | | 300,002 | F |
| (4)CORNERSTONE | | 4,054,206 | F |
| (5)ENTERPRISE COMMUNITY LOAN FUND (6)COMMUNITY INVESTMENT MARKETPLA | | 45,613,986 1,992,394 | F |
| (O)COMMONITY INVESTMENT MARKETY LA | | 1,332,334 | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) | * | 192,164,187 | |
| Part IX Other Assets. Complete if the organization | | orm 990, Part IV, line 1 | |
| (a) Desc | cription | | (b) Book value |
| | | | |
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| | | | |
| Total. (Column (b) must equal Form 990, Part X, col.(B) line | | 'Vas' on Form 000 D | |
| Part X Other Liabilities. Complete if the org See Form 990, Part X, line 25. | yanızadon answered | res on rotti 990, P | arciv, mie lie OF III. |
| 1. (a) Description of liability | (b) Book value | | |
| | | | |
| Federal income taxes | | 0 | |
| ALLOWANCE ACIANCT RECEIVABLE | 47.440.4 | 30 | |
| ALLO WANCE AGIANST RECEIVABLE | 17,442,1 | 39 | |
| | | | |
| | | | |
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| | | | |
| | | \dashv | |
| | | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | 17,442,1 | 39 | |
| 2 Liability for uncertain tay positions. In Part XIII prov | ide the text of the feets | ote to the organization's | financial statements that reports the |

| Par | | per R | eturn |
|------------------|--|-------------|---------|
| | Complete if the organization answered 'Yes' on 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 | | |
| С | Recoveries of prior year grants | | |
| 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 | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a | | |
| b | Other (Describe in Part XIII) 4b | | |
| С | 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 | Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. | s per | Return. |
| 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 | | |
| а | Donated services and use of facilities 2a | | |
| b | Prior year adjustments | | |
| С | | | |
| | Other losses | | 1 |
| d | Other losses | | |
| d e | | 2e | |
| | Other (Describe in Part XIII) | 2e 3 | |
| e | Other (Describe in Part XIII) | | |
| e 3 | Other (Describe in Part XIII) | | |
| e 3 4 | Other (Describe in Part XIII) | | |
| e 3 4 a | Other (Describe in Part XIII) | | |

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, 2015 ACCORDINGLY, NO PROVISION OR BENEFIT FROM INCOME TAXES HAS BEEN RECORDED |
| UNCERTAIN TAX POSITIONS | FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014, THE ORGANIZATION DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS |
| | |
| | |
| | |

| Part XIII Supplemental Information (continued) | | | | | | | | |
|--|-------------|--|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | | | |
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Schedule D (Form 990) 2015

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

DLN: 93493214000406

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on 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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

| me of the organization TERPRISE COMMUNITY P. | ΔRTNERS INC | | | Employer iden | tification number | |
|---|--------------------------------------|--|--------------------------------------|--|--|--|
| TERN RISE COMMONITY | ARTHERS INC | | | 52-1231931 | | |
| | ctivities.Completers are not require | _ | | on Form 990, Part IV, | , lıne 17. | |
| Indicate whether the orga | • | • | • | neck all that apply | | |
| Mail solicitations | inizacioni raisca raira | | Solicitation of no | | | |
| Internet and email so | dicitations | f | | | | |
| Phone solicitations | | | | | | |
| In-person solicitation | าร | 9 | , Special fulldials | ing events | | |
| Did the organization have or key employees listed i services? | | | | | No | |
| If "Yes," list the ten high to be compensated at lea | | | sers) pursuant to agree | ments under which the fu | indraiser is | |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of | (iv) Gross receipts from activity | (v) A mount paid to (or retained by) fundraiser listed in col (i) | (vi) A mount paid to (or retained by) organization | |
| | - | contributions? | | | | |
| . SOCIAL CAPITAL INC | FUNDRAISING | Yes No | | | | |
| 980 NORTH MICHIGAN AVENUE SUITE 16 | CAMPAIGN | No | | 63,440 | | |
| CHICAGO, IL 60611 | | | | | | |
| ANNE BARNEY PO BOX 146 | WRITING SERVICES | | | | | |
| | SERVICES | No | | 12,665 | | |
| GREAT CACAPON, WV 25422 | | | | | | |
| B SOPHIST | FUNDRAISING | | | | | |
| PRODUCTIONS 2-01 50TH AVENUE SUITE 22H | CAMPAIGN | No | | 6,000 | | |
| LONG ISLAND, NY 11101 | | | | | | |
| | | | | | | |
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|) | | | | | | |
|) | | | | | | |
| al | 1 | ▶ | | 82,105 | | |
| List all states in which the | organization is regis | tered or licensed to | solicit contributions o | r has been notified it is e | xempt from | |
| registration or licensing | | | | | | |
| | | | | | | |
| | | | | | | |

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

| | receipts greater than \$5,000 | | T T | | Τ | | |
|-----------|--|----------------------------|---|---------------------|------------------------------|--|--|
| | | (a) Event #1 | (b) Event #2 | (c)O ther events | (d) Total events | | |
| | | NY GALA | LA SOCIAL | 1 | (add col (a) through | | |
| | | (event type) | (event type) | (total number) | col (c)) | | |
| | | | | | | | |
| | | | | | | | |
| <u>Ф</u> | | | | | | | |
| e in | | | | | | | |
| Revenue | 1 Gross receipts | 1,001,759 | 212,500 | 192,700 | 1,406,959 | | |
| _ | 2 Less Contributions | 847,211 | 183,250 | 153,700 | 1,184,161 | | |
| | 3 Gross income (line 1 minus | | | | | | |
| | line 2) | 154,548 | 29,250 | 39,000 | 222,798 | | |
| | 4 Cash prizes | | | | | | |
| | 5 Noncash prizes | | | | | | |
| | | | | | | | |
| တ္က | 6 Rent/facılıty costs | 179,663 | 85,008 | 120,498 | 385,169 | | |
| šU. | 7 Food and beverages | | | | | | |
| Expenses | 8 Entertainment | | | | | | |
| | ļ | 152.015 | 12.060 | 2.710 | 171 403 | | |
| Direct | 9 Other direct expenses | 153,815 | 13,968 | 3,710 | 171,493 | | |
| Δ | 10 Direct expense summary Add lines 4 | 1 through 9 in column (d |) | | 556,662 | | |
| | 11 Net income summary Subtract line 1 | 0 from line 3, column (c | 1) | • | -333,864 | | |
| Par | t III Gaming. Complete if the organization Form 990-EZ, line 6a. | answered "Yes" on I | Form 990, Part IV, line | 19, or reported mor | e than \$15,000 on | | |
| | 101111 330 E2, IIIIe 6d. | | | | | | |
| <u>Ф</u> | | (a)Bıngo | (b)Pull tabs/Instant bingo/progressive bingo | (c)O ther gaming | (d) Total gaming (add col | | |
| ₫ | | | biligo/progressive biligo | | (a) through col (c)) | | |
| Revenue | | | | | | | |
| | 1 Gross revenue | | | | | | |
| မှာ () | 2 Cash prizes | | | | | | |
| Ř | | | | | | | |
| Expenses | 3 Noncash prizes | | | | | | |
| E E | | | | | | | |
| Direct | 4 Rent/facility costs | | | | | | |
| Δ | 5 Other direct expenses | | | | | | |
| | S cancer an excession period of | | | | | | |
| | | Yes% | Yes | 「 Yes | | | |
| | 6 Volunteerlabor | No |) NO | , NO | | | |
| | - Dunat sumana sumana mu Add linas i | 2 *h | 11 | L | | | |
| | 7 Direct expense summary Add lines 2 | z through 5 in column (c | 1) | | | | |
| | 8 Net gaming income summary Subtra | ct line 7 from line 1, col | lumn (d) | | | | |
| | | | | | | | |
| 9 | Enter the state(s) in which the organiza | tion conducts gaming a | ctivities | | | | |
| а | a Is the organization licensed to conduct gaming activities in each of these states? | | | | | | |
| ь | If "No," explain | | | | | | |
| - | | | | | | | |
| | | | | | | | |
| 10a | Were any of the organization's gaming l | icenses revoked, suspe | nded or terminated during | the tax year? | ┌Yes ┌No | | |
| h | If "Yes," explain | | | | | | |
| U | II 163, Exhiaiii | | | | | | |

| Schedule | G (Form | 990 | or 990-EZ | 201 |
|----------|---------|-----|-----------|-----|
| | | | | |

| Page | 3 |
|------|---|
|------|---|

| 11 | Does the organization conduct gaming | activities with nonmem | bers? | Yes | No |
|-----|--|--|--|---------------|----------|
| 12 | Is the organization a grantor, beneficia | ary or trustee of a trust o | or a member of a partnership or other entit | ty | |
| | formed to administer charitable gaming | g? | | ГYes Г | No |
| 13 | Indicate the percentage of gaming acti | ıvıty conducted ın | | | |
| а | The organization's facility | | | 13a | % |
| b | An outside facility | | | 13b | % |
| 14 | Enter the name and address of the per | son who prepares the or | ganızatıon's gamıng/specıal events books | s and records | |
| | Name ▶ | | | | |
| | | | | | |
| 15a | Does the organization have a contract | | whom the organization receives gaming | | |
| | revenue? | men a emia parcy nom v | mom the organization receives gaining | □Yes □ | No |
| h | | avanua racaiyad by tha | organization 🟲 \$ a | | 110 |
| | amount of gaming revenue retained by | | | and the | |
| _ | | | | | |
| | If "Yes," enter name and address of th | e third party | | | |
| | Name 🟲 | | | | |
| | Address ► | | | | |
| 16 | Gaming manager information | | | | |
| | Name 🕨 | | | | |
| | Gaming manager compensation > \$ | | | | |
| | | | | | |
| | Description of services provided | | | | |
| | Director/officer | Employee | | | |
| | Director/officer | Employee | ☐ Independent contractor | | |
| 17 | Mandatory distributions | | | | |
| | · | e law to make charitable | e distributions from the gaming proceeds | to | |
| | retain the state gaming license? | | 5 5. | ГYes Г | No |
| ь | • • | red under state law dist | ributed to other exempt organizations or s | | |
| | in the organization's own exempt activ | | | • | |
| Pa | rt IV Supplemental Information | on. Provide the explain the explain the state of the stat | anations required by Part I, line 2b, as applicable. Also complete this pa | | (v); and |
| | Return Reference | | Explanation | | |
| | | L | · · · · · · · · · · · · · · · · · · · | | |

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

DLN: 93493214000406
OMB No 1545-0047

2015

Open to Public
Inspection

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

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

Attach to Form 990.

► Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization
ENTERPRISE COMMUNITY PARTNERS INC

Employer identification number

| | | | | | | 52-1231931 | |
|---|---|----------------------------------|------------------------------|---|---|--|--------------------------------------|
| Part I General Information | n on Grants and | Assistance | | | | | |
| Does the organization maintain rethe selection criteria used to awa Describe in Part IV the organization. | ard the grants or ass tion's procedures fo | r monitoring the use | of grant funds in the Un | ited States | | | ✓ Yes N |
| Part II Grants and Other Assistar that received more than \$ | | | | plete if the organization | answered "Yes" on F | orm 990, Part IV, line 21 | l, for any recipient |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grar or assistance |
| See Addıtıonal Data Table | | | | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| 2 Enter total number of section 50: | 1 (c)(3) and governn | ı nent organızatıons lıs | ted in the line 1 table . | | | <u>'</u> ▶ | l |

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" on 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)A mount of cash grant | (d)A mount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|----------------------------------|--------------------------|-----------------------------------|--|---------------------------------------|
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part IV Supplemental Informa | ition. Provide the info | rmation required in P | Part I, line 2, Part III, | column (b), and any other a | addıtıonal ınformatıon. |

Return Reference

Explanation

part I, Line 2

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 & 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 Checkagainst 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

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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|----------------|----------------------------------|------------------------------|---|--|--|---------------------------------------|
| Heartland Housing Inc 208 S LaSalle BROOKLYN,NY 11231 | 36-3642952 | 501(c)(3) | 293,152 | | | | CAPACITY BUILDING |
| NUESTRA COMUNIDAD DEVELOPMENT CORPORATION 56 WARREN STREET Gallup,NM 87305 | 04-2741543 | 501(c)(3) | 78,632 | | | | CAPACITY BUILDING |
| PathStone Corporation 400 East Avenue Santa Monica, CA 90401 | 16-0984913 | 501(c)(3) | 141,544 | | | | 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 section if applicable | (d) A mount of cash grant | , , , | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CLEVELAND HOUSING NETWORK INC 2999 PAYNE AVENUE BILOXI, MS 39530 | 34-1346763 | 501(c)(3) | 160,407 | | | | CAPACITY BUILDING | | | | |
| The San Francisco Foundation One Embarcadero Center SEATTLE, WA 981042304 | 01-0679337 | 501(c)(3) | 250,000 | | | | CAPACITY BUILDING | | | | |
| CAMBA Housing Ventures Inc 1720 Church Avenue NEW YORK, NY 10002 | 55-0881162 | 501(c)(3) | 163,289 | | | | 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 section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| Providence Community Housing 1050 South Jefferson Davis Parkway CHRISTIANSBURG,VA 24073 | 20-4627275 | 501(c)(3) | 105,905 | | | | CAPACITY BUILDING | | | |
| MONTGOMERY HOUSING PARTNERSHIP INC 12200 Tech Road Wayne, WV 25570 | 52-1631939 | 501(c)(3) | 93,842 | | | | CAPACITY BUILDING | | | |
| JUBILEE HOUSING INC 1640 Columbia Road NW Seattle,WA 98144 | 52-0986261 | 501(c)(3) | 63,079 | | | | 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 section if applicable | (d) A mount of cash grant | 1 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Famicos Foundation Inc 1325 Ansel Road Chicago,IL 60637 | 34-1053534 | 501(c)(3) | 148,309 | | | | CAPACITY BUILDING | | | | |
| NEIGHBORHOOD PROGRESS INC 11327 Shaker Boulevard St Paul, MN 55116 | 34-1611055 | 501(c)(3) | 255,000 | | | | CAPACITY BUILDING | | | | |
| RENAISSANCE NEIGHBORHOOD DEVELOPMENT CORPORATION 4162 Canal Street NEW YORK, NY 10032 | 20-8947208 | 501(c)(3) | 295,951 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| PHI One Trinity Drive East Santa Monica, CA 90401 | 23-1381404 | 501(c)(3) | 98,446 | | | | CAPACITY BUILDING | | | |
| CATHEDRAL SQUARE CORPORATION 412 FARRELL STREET SOUTH BURLINGTON, VT 05403 | 03-0264362 | 501(c)(3) | 87,873 | | | | CAPACITY BUILDING | | | |
| Harmony Neighborhood Development 3301 LaSalle Street Miami,FL 33135 | 72-1436907 | 501(c)(3) | 22,500 | | | | CAPACITY BUILDING | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| HOUSING INITIATIVE PARTNERSHIP 6525 BELCREST ROAD SOUTH BURLINGTON, VT 05403 | 52-1596171 | 501(c)(3) | 14,122 | | | | CAPACITY BUILDING | | | |
| Detroit Shoreway Community Dev Org 6516 Detroit Avenue San Francisco, CA 94110 | 23-7376130 | 501(c)(3) | 323,729 | | | | CAPACITY BUILDING | | | |
| Park Heights Renaissance Inc 3939 Reisterstown Road Gallup,NM 87305 | 77-0673126 | 501(c)(3) | 84,500 | | | | 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 section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHP INC 229 Peachtree Street NE ARLINGTON, VA 22201 | 58-1946632 | 501(c)(3) | 46,428 | | | | CAPACITY BUILDING | | | | |
| MERCY HOUSING CALIFORNIA 1360 Mission Street CLEVELAND,OH 44114 | 94-3081666 | 501(c)(3) | 158,648 | | | | CAPACITY BUILDING | | | | |
| Atlanta Regional Commission 40 Courtland Street NE hogansburg, NY 13655 | 58-6002324 | 501(c)(3) | 128,500 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| St Bernard Project 8324 Parc Place Cleveland, OH 44102 | 26-2189665 | 501(c)(3) | 38,797 | | | | CAPACITY BUILDING | | | | |
| Chinatown Community Development Center 1525 Grant Avenue Atlanta, GA 30303 | 94-2514053 | 501(c)(3) | 149,542 | | | | CAPACITY BUILDING | | | | |
| Project Homecoming Inc 2221 Filmore Ave CHRISTIANSBURG, VA 24073 | 32-0312933 | 501(c)(3) | 42,000 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Office of Rural & Farmworker Housing 1400 Summitview Ave 203 Gallup, NM 87305 | 91-1218499 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | | |
| LITTLE TOKYO SERVICE CENTER CDC 231 EAST THIRD STREET San Francisco, CA 94133 | 95-3451280 | 501(c)(3) | 100,212 | | | | CAPACITY BUILDING | | | | |
| East Bay Asian Local Development Corporation 1825 San Pablo Avenue Rapid City,SD 57701 | 51-0171851 | 501(c)(3) | 256,783 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Tenderloin Neighborhood Develop Corp 201 Eddy Street Dorchester, MA 02125 | 94-2761808 | 501(c)(3) | 51,000 | | | | CAPACITY BUILDING | | | | |
| Mountain Housing Opportunities 64 Clingman Avenue Wayne, WV 25570 | 58-1816998 | 501(c)(3) | 76,684 | | | | CAPACITY BUILDING | | | | |
| Selfhelp Community Services Inc 520 Eighth Avenue Trujillo Alto, PR 00977 | 13-1624178 | 501(c)(3) | 16,634 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Jewish Association for Services for the Aged 247 West 37th Street Syracuse, NY 13202 | 13-2620896 | 501(c)(3) | 24,397 | | | | CAPACITY BUILDING | | | | |
| Santo Domingo Tribal Housing Authority PO Box 10 Trujillo Alto, PR 00977 | 85-0194331 | public hsg auth | 103,687 | | | | CAPACITY BUILDING | | | | |
| COMMUNITY HOUSING PARTNERS CORPORATION 448 Depot street NE Christiansburg,VA 24073 | 54-1023025 | 501(c)(3) | 26,301 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Jane Place Neighborhood Sustainability Initiative PO Box 53011 Yakima, WA 98908 | 26-3909820 | 501(c)(3) | 22,900 | | | | CAPACITY BUILDING | | | | |
| Bellwether Housing 1651 Bellevue Avenue Denver, CO 80209 | 91-1116960 | 501(c)(3) | 59,873 | | | | CAPACITY BUILDING | | | | |
| Coalfield Development Corporation PO Box 1133 New York, NY 10035 | 26-3836207 | 501(c)(3) | 140,832 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Rural Housing Development Corporation 63 N 400 WEST PROVO,UT 84601 | 87-0622732 | 501(c)(3) | 12,500 | | | | CAPACITY BUILDING | | | | |
| Housing Visions Unlimited Inc 1201 E Fayette Street SOUTH BURLINGTON, VT 05403 | 16-1598458 | 501(c)(3) | 32,892 | | | | CAPACITY BUILDING | | | | |
| Dorchester Bay Economic Development Corporation 594 Columbia Road San Francisco, CA 94110 | 04-2681632 | 501(c)(3) | 90,003 | | | | 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 section if applicable | (d) A mount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Tapestry Development Group 321 W Hill Street Dorchester, MA 02125 | 27-2814156 | 501(c)(3) | 30,515 | | | | CAPACITY BUILDING | | | | |
| Carrfour Supportive Housing Inc 1398 Southwest 1st Street Baltimore, MD 21201 | 65-0387766 | 501(c)(3) | 35,500 | | | | CAPACITY BUILDING | | | | |
| Community Area Resource Enterprise Inc PO Box 4298 San Francisco, CA 94110 | 20-0870956 | 501(c)(3) | 24,218 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| Services for the UnderServed Inc 305 Seventh Avenue 10th FL Trujillo Alto, PR 00977 | 91-1918247 | 501(c)(3) | 38,421 | | | | CAPACITY BUILDING | | | |
| Mercy Housing Northwest 2505 Third Avenue CLEVELAND,OH 44114 | 91-1546525 | 501(c)(3) | 114,540 | | | | CAPACITY BUILDING | | | |
| Neighborhood Housing Services of Chicago Inc 1279 N Milwaukee Avenue The Dalles,OR 97058 | 23-7443009 | 501(c)(3) | 33,320 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Foundation Communities Inc 3036 South 1st Street Cleveland,OH 44104 | 74-2563260 | 501(c)(3) | 16,182 | | | | CAPACITY BUILDING | | | | |
| SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVENUE Cleveland,OH 44102 | 41-1721815 | 501(c)(3) | 114,451 | | | | CAPACITY BUILDING | | | | |
| Fifth Avenue Committee Inc 621 DeGraw Street New Orleans, LA 70185 | 11-2475743 | 501(c)(3) | 91,842 | | | | 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 section if applicable | (d) Amount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Community Corporation of Santa Monica 1423 Second Street San Francisco, CA 94110 | 95-3795161 | 501(c)(3) | 40,000 | | | | CAPACITY BUILDING | | | | |
| CASA De Maryland Inc 8151 15th Avenue New Orleans, LA 70113 | 52-1372972 | 501(c)(3) | 30,000 | | | | CAPACITY BUILDING | | | | |
| HopeWorks Social Enterprises 5830 Evergreen Way Portland,OR 97232 | 80-0684608 | 501(c)(3) | 50,000 | | | | 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 section if applicable | (d) A mount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| ROC USA LLC 7 Wall Street Moab, UT 84532 | 35-2319441 | 501(c)(3) | 31,087 | | | | CAPACITY BUILDING | | | | |
| MANNA INC 828 EVARTS STREET NE CLEVELAND,OH 44114 | 52-1260698 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| Low Income Housing Institute 2407 First Ave Suite 200 San Francisco, CA 94133 | 94-3155150 | 501(c)(3) | 41,000 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | |
| Columbus Housing Partnership Inc 562 East Main Street Seattle, WA 981222014 | 31-1208260 | 501(c)(3) | 65,000 | | | | CAPACITY BUILDING | | | | | |
| COMMUNITY INVESTMENT MARKETPLACE LLC 1875 CONNECTIBUT AVE NW WASHINGTON, DC 20009 | 47-3333274 | LLC | 850,000 | | | | CAPACITY BUILDING | | | | | |
| EASTERN MARKET CORPORATION 2934 RUSSELL DETROIT, MI 48207 | 32-0030432 | 501(c)(3) | 27,500 | | | | 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 section if applicable | (d) A mount of cash grant | 1 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Hispanic Housing Development Corporation 325 N Wells Langley Park, MD 20783 | 36-2889871 | 501(c)(3) | 349,998 | | | | CAPACITY BUIDLING | | | | |
| Leech Lake Band of Ojibwe Housing Authority 611 Elm Avenue PORTLAND,OR 97209 | 41-0913364 | 501(c)(3) | 50,000 | | | | CAPACITY BUIDLING | | | | |
| NORTHWEST HOUSING ALTERNATIVES INC 2316 SE WILLARD STREET MILWAUKIE,OR 97222 | 93-0814473 | 501(c)(3) | 123,000 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| ROSE COMMUNITY DEVELOPMENT 5215 SE DUKE STREET PORTLAND,OR 97206 | 94-3144895 | 501(c)(3) | 38,550 | | | | CAPACITY BUIDLING | | | | |
| Habitat for HumanityMETRO JACKSON INC PO BOX 55634 JACKSON,MS 39296 | 64-0750633 | 501(c)(3) | 32,016 | | | | CAPACITY BUILDING | | | | |
| Lower East Side Peoples Mutual Housing Association 228 East 3rd Street San Francisco, CA 94133 | 13-3570544 | 501(c)(3) | 64,094 | | | | 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 section if applicable | (d) A mount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SEBCO DEVELOPMENT INC 885 Bruckner Blvd Trujillo Alto, PR 00977 | 13-2944013 | 501(c)(3) | 79,632 | | | | CAPACITY BUIDLING | | | | |
| Unity Properties Inc 2000 West Baltimore Street Oakland,CA 946121517 | 52-1857768 | 501(c)(3) | 24,760 | | | | CAPACITY BUILDING | | | | |
| GULF COAST HOUSING PARTNERSHIP INC 1610-A Oretha Castle Haley Boulevar Brooklyn,NY 11226 | 20-4216595 | 501(c)(3) | 49,066 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Resources for Community Development 2220 Oxford Street NEW YORK, NY 10032 | 94-2952466 | 501(c)(3) | 58,430 | | | | CAPACITY BUILDING | | | | |
| University Cultural Center Association 3939 Woodward Avenue Oakland,CA 946121517 | 38-2134034 | 501(c)(3) | 24,000 | | | | CAPACITY BUILDING | | | | |
| Cascadia Behavioral Healthcare Inc 847 NE 19th Avenue PORTLAND,OR 97202 | 93-0770054 | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Habitat for Humanity of the Chesapeake Inc 3741 Commerce Drive Brooklyn, NY 11226 | 52-1226188 | 501(c)(3) | 10,474 | | | | CAPACITY BUILDING | | | | |
| West Angeles Community Development Corporation 6028 Crenshaw Boulevard Los Angeles, CA 90033 | 95-4486925 | 501(c)(3) | 53,594 | | | | CAPACITY BUILDING | | | | |
| Columbia Cascade Housing Corporation 312 Court Street Baltimore, MD 21202 | 94-3111736 | 501(c)(3) | 40,450 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SLAVIC VILLAGE DEVELOPMENT 5620 BROADWAY AVENUE CLEVELAND,OH 44127 | 34-1344279 | 501(c)(3) | 46,667 | | | | CAPACITY BUILDING | | | | |
| Construction Education Foundation of Georgia 1255 Lakes Parkway San Francisco, CA 94110 | 58-2062862 | 501(c)(3) | 40,000 | | | | CAPACITY BUILDING | | | | |
| White Earth Band of Chippewa Indians 35500 Eagleview Road Detroit, MI 48207 | 41-1737979 | trıbal gov't | 11,333 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| LINC Housing Corporation 555 E Ocean Boulevard Atlanta, GA 30316 | 33-0578620 | 501(c)(3) | 41,350 | | | | CAPACITY BUILDING | | | | |
| Skid Row Housing Trust 1317 East Seventh Street Crow Agency, MT 59022 | 95-4205316 | 501(c)(3) | 57,484 | | | | CAPACITY BUIDLING | | | | |
| Hancock Resource Center 308 HIGHWAY 90 WAVELAND,MS 39576 | 26-3648017 | 501(c)(3) | 10,092 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Robison Jewish Home 6125 SW Boundary Street WASHINGTON, DC 20015 | 93-0386852 | 501(c)(3) | 7,454 | | | | CAPACITY BUILDING | | | | |
| Housing Counseling Services 2410 17th Street NW SOUTH BURLINGTON, VT 05403 | 52-0958568 | 501(c)(3) | 35,000 | | | | CAPACITY BUILDING | | | | |
| Mı Casa Inc 6230 3rd Street NW CLEVELAND,OH 44114 | 52-1796840 | 501(c)(3) | 34,410 | | | | 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 section if applicable | (d) A mount of cash grant | | (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 INC 1744 PAYNE AVENUE CLEVELAND, OH 44114 | 34-1607734 | 501(c)(3) | 45,000 | | | | CAPACITY BUILDING | | | | |
| Neighborhood Housing Services of New Orleans Inc 4528 Freret Street Columbus, OH 43215 | 72-0801513 | 501(c)(3) | 16,712 | | | | CAPACITY BUILDING | | | | |
| AHC INC 2230 NORTH FAIRFAX DRIVE Mesa,AZ 85203 | 54-1026365 | 501(c)(3) | 26,290 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | - · | (f) Method of valuation (book, FMV, appraisal, other) | , , , , , | (h) Purpose of grant or assistance | | | | | |
| ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSING 2704 N PERSHING DRIVE Jacksonville,FL 322023436 | 54-1515133 | 501(c)(3) | 65,000 | | | | CAPACITY BUILDING | | | | | |
| 1260 HOUSING DEVELOPMENT CORPORATION 2042-48 ARCH STREET New Orleans, LA 701195941 | 23-2536730 | 501(c)(3) | 38,148 | | | | CAPACITY BUILDING | | | | | |
| URBAN EDGE HOUSING CORPORATION 1542 Columbus Avenue Oakland,CA 946121517 | 22-2483475 | 501(c)(3) | 30,000 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| BURTEN BELL CARR DEVELOPMENT INC 7201 KINSMAN ROAD SUITE 104 CLEVELAND,OH 44104 | 34-1657533 | 501(c)(3) | 28,000 | | | | CAPACITY BUILDING | | | | |
| El Barrio's Operation Fightback Inc 413 E 120th Street Chicago,IL 60637 | 13-3248777 | 501(c)(3) | 82,345 | | | | CAPACITY BUILDING | | | | |
| GREATER ROCHESTER HOUSING PARTNERSHIP 183 E MAIN STREET Brooklyn,NY 11226 | 16-1399793 | 501(c)(3) | 16,610 | | | | 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 section if applicable | (d) A mount of cash grant | 1 * * | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Codman Square Neighborhood Development Corporation 587 Washington Street New York, NY 10035 | 04-2752507 | 501(c)(3) | 67,769 | | | | CAPACITY BUILDING | | | | |
| Self-Help Housing Corporation of Hawaii 1427 Dillingham Boulevard Trujillo Alto, PR 00977 | 99-0222078 | 501(c)(3) | 7,137 | | | | CAPACITY BUILDING | | | | |
| GREATER ROCHESTER HOUSING PARTNERSHIP 16 E MAIN STREET SUITE 610 ROCHESTER,NY 14614 | 16-1399793 | 501(c)(3) | 19,127 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| EMERALD DEVELOPMENT & ECONOMIC NETWORK 7812 MADISON AVENUE CLEVELAND, OH 44102 | 34-1667990 | 501(c)(3) | 29,000 | | | | CAPACITY BUILDING | | | | |
| Tenemos Que Reclamar Y Unidos Salvar La Tierra-Sou 4331 South Main Street Dorchester, MA 02125 | 42-1687057 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | | |
| Mission Economic Development Agency 2301 Mission Street Wayne, WV 25570 | 51-0187791 | 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 section if applicable | (d) Amount of cash grant | • • | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SILICON VALLEY COMMUNITY FOUNDATION 2440 WEST CAMINO REAL MOUNTAIN VIEW,CA 90021 | 20-5205488 | 501(c)(3) | 10,000 | | | | CAPACITY BUILDING | | | | |
| ST NICKS ALLIANCE 2 KINGLAND AVENUE BROOKLYN,NY 11211 | 51-0192170 | 501(c)(3) | 77,810 | | | | CAPACITY BUILDING | | | | |
| LA PLATA HOMES FUND 124 E 9th Street PORTLAND,OR 97209 | 80-0266636 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | |
| FORDHAM BEDFORD HOUSING CORPORATION 2751 GRAND CONCOURSE BRONX,NY 10468 | 13-3010578 | 501(c)(3) | 368,695 | | | | CAPACITY BUILDING | | | | | |
| Innovative Housing Inc 219 NW Second Avenue SOUTH BURLINGTON,VT 05403 | 93-0877440 | 501(c)(3) | 20,313 | | | | CAPACITY BUILDING | | | | | |
| Southern United Neighborhoods 827 Tupelo Street Cleveland, OH 44102 | 36-4668072 | 501(c)(3) | 20,997 | | | | CAPACITY BUILDING | | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | 1 3 5 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | |
| H Street Community Development Corporation 900 2nd Street NE Brooklyn,NY 11226 | 52-1356903 | 501(c)(3) | 46,001 | | | | CAPACITY BUILDING | | | | | |
| MQVN CDC 4626 Alcee Fortier Boulevard Dorchester, MA 02124 | 20-4929600 | 501(c)(3) | 99,703 | | | | CAPACITY BUILDING | | | | | |
| PARTNERSHIP FOR SOURTHERN EQUALITY 925 B PEACHTREE STREET NE ATLANTA, GA 30309 | 27-4424115 | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SOLID GROUND PO BOX 31066 SEATTLE, WA 98103 | 23-7421892 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| Historic East Baltimore Community Action Coalition 1212 N Wolfe Street Langley Park, MD 20783 | 52-1903732 | 501(c)(3) | 12,000 | | | | CAPACITY BUILDING | | | | |
| COMMUNITY LEAGUE OF THE HEIGHTS INC 500 WEST 159TH STREET San Francisco, CA 94110 | 13-2564241 | 501(c)(3) | 22,232 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| The Villages Community Development Corporation 8109 East Jefferson Avenue SEATTLE, WA 981042304 | 36-4598309 | 501(c)(3) | 16,862 | | | | CAPACITY BUILDING | | | | |
| ASSOCIATED CATHOLIC CHARITIES INC 1966 GREENSPRING DRIVE TIMONIUM,MD 21093 | 52-0591538 | 501(c)(3) | 44,999 | | | | CAPACITY BUILDING | | | | |
| Jamaica Plain Neighborhood Development Corporation 31 Germania Street Chicago, IL 60654 | 04-2652919 | 501(c)(3) | 26,510 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | | |
| International Sonoran Desert Alliance PO Box 687 SOUTH BURLINGTON, VT 05403 | 86-0778917 | 501(c)(3) | 15,926 | | | | CAPACITY BUILDING | | | | |
| CABRILLO ECONOMIC DEVELOPMENT CORPORATION 702 COUNTY SQUARE DRIVE VENTURA, CA 93003 | 95-3681521 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | | |
| Chhaya Community Development 37-43 77th Street Atlanta,GA 30303 | 11-3580935 | 501(c)(3) | 12,500 | | | | 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 section if applicable | (d) A mount of cash grant | - · | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| City First Homes Inc 1436 U Street NW BILOXI,MS 39530 | 26-2335395 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| Community Development Collaborative of Greater Col 110 N 17th Street San Francisco, CA 94110 | 31-1595197 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| Esperanza Community Housing Corporation 2337 South Figueroa Street Chicago,IL 60637 | 95-4230345 | 501(c)(3) | 10,000 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| Homes for America Inc 318 Sixth Street Portland,OR 97232 | 52-1901220 | 501(c)(3) | 30,188 | | | | CAPACITY BUILDING | | | |
| Housing Opportunity Development Corporation 2001 Waukegan Road SOUTH BURLINGTON, VT 05403 | 36-3237455 | 501(c)(3) | 79,480 | | | | CAPACITY BUILDING | | | |
| MERCY HOUSING LAKEFRONT 120 South LaSalle Street CLEVELAND,OH 44114 | 36-3453183 | 501(c)(3) | 59,100 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MERCY HOUSING CALIFORNIA 1500 S GRAND AVENUE LOS ANGELES, CA 90015 | 94-3081666 | 501(c)(3) | 55,752 | | | | CAPACITY BUILDING | | | |
| NEW ORLEANS NEIGHBORHOOD DEVELOPMENT FOUNDATION 1429 SOUTH RAMPART STREET NEW ORLEANS, LA 70113 | 58-1681468 | 501(c)(3) | 27,290 | | | | CAPACITY BUILDING | | | |
| NEWSED COMMUNITY DEVELOPMENT CORPORATION 901 W 10TH AVENUE 2A DENVER, CO 80204 | 74-2275534 | 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 section if applicable | (d) A mount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| PROJECT BUILD A FUTURE 2306 THIRD STREET LAKE CHARLES,LA 70601 | 72-1510673 | 501(c)(3) | 9,743 | | | | CAPACITY BUILDING | | | | |
| SOUTHSIDE UNITED HDFC 434 SOUTH 5TH STREET BROOKLYN,NY 11211 | 11-2268359 | 501(c)(3) | 8,733 | | | | CAPACITY BUILDING | | | | |
| THE COMMUNITY BUILDERS INC 135 S LASALLE STREET CHICAGO,IL 60603 | 04-2324773 | 501(c)(3) | 15,268 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | 2 7 | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | | | |
| URBAN RESIDENTIAL FINANCE AUTHORITY 133 PEACHTREE STREET ATLANTA,GA 30303 | 58-1499939 | 501(C)(3) | 10,000 | | | | CAPACTIY BUILDING | | | | | |
| URBAN RESTORATION ENHANCEMENT CORPORATION PO BOX 73032 BATON ROUGE, LA 70874 | 72-1222911 | 501(c)(3) | 13,455 | | | | CAPACITY BUILDING | | | | | |
| UTE MOUNTAIN UTE HOUSING AUTHORITY PO BOX EE TOWAOL,CO 81334 | 84-1044454 | 501(c)(3) | 49,992 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MUTUAL HOUSING CALIFORNIA 8001 FRUITRIDGE RD SACREMENTO,CA 95820 | 94-3093354 | 501(c)(3) | 13,983 | | | | CAPACITY BUILDING | | | |
| AKWESASNE HOUSING AUTHORITY INC 378 STATE ROUTE 37 HOGANSBURG,NY 13655 | 16-1387585 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | |
| CATHOLIC CHARITIES HOUSING SERVICES 5301 Tieton Drive ATLANTA,GA 303031605 | 91-1955616 | 501(c)(3) | 64,344 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SOUTH COUNTY HOUSING CORPORATION 7455 Carmel Street Cleveland, OH 44102 | 94-2590572 | 501(c)(3) | 12,287 | | | | CAPACITY BUILDING | | | | |
| CARROLL GARDENS ASSOCIATION INC 201 COLUMBIA STREET New Orleans, LA 70113 | 11-2573432 | 501(c)(3) | 13,872 | | | | CAPACITY BUILDING | | | | |
| EPISCOPAL HOUSING CORPORATION 3986 ROLAND AVENUE BALTIMORE,MD 21211 | 52-1939344 | 501(c)(3) | 14,600 | | | | 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 section if applicable | (d) Amount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CARE ALLIANCE HEALTH CENTER 1530 ST CLAIR AVENUE CLEVELAND,OH 44114 | 34-1748776 | 501(c)(3) | 28,609 | | | | CAPACITY BUILDING | | | | |
| COMMUNITY ASSISTED TENENAT CONTROLLED HOUSING INC 121 SIXTH AVENUE NEW YORK, NY 10013 | 13-3706959 | 501(c)(3) | 11,509 | | | | CAPACITY BUILDING | | | | |
| Triple C Housing Inc 1 Distribution Way San Rafael, CA 94901 | 22-2350429 | 501(c)(3) | 50,981 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| HABITAT FOR HUMANITY BAY-WAVELAND AREA INC 414 HWY 90 BAY ST LOUIS, MS 39520 | 26-1325894 | 501(c)(3) | 16,404 | | | | CAPACITY BUILDING | | | | |
| PROJECT COMMUNITY CONNECTIONS INC 321 WEST HILL STREET DECATUR, GA 30030 | 58-2373779 | 501(c)(3) | 67,577 | | | | CAPACITY BUILDING | | | | |
| LUTHERAN SOCIAL SERVICES HOUSING INC 1325 11TH STREET S FARGO,ND 58103 | 26-2358686 | 501(c)(3) | 47,491 | | | | 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 Foundation 1402 Third Avenue Baltimore, MD 21201 | 27-1682190 | 501(c)(3) | 28,713 | | | | CAPACITY BUILDING | | | | |
| Housing Authority of the City of Jersey City Inc 400 US Highway 1 SOUTH BURLINGTON, VT 05403 | 22-6022501 | public hsg auth | 17,504 | | | | CAPACITY BUILDING | | | | |
| FORT PECK ASSINIBOINE & SIOUX TRIBES INC PO BOX 1027 POPLAR CITY, MT 59255 | 81-0292623 | 501(c)(3) | 46,800 | | | | 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 section if applicable | (d) A mount of cash grant | • • | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| PROJECT HOME AGAIN FOUNDATION 1324 RIVIERA AVENUE NEW ORLEANS, LA 70112 | 20-8733214 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| Settlement Housing Fund Inc 247 W 37th Street Trujillo Alto, PR 00977 | 23-7078882 | 501(c)(3) | 12,734 | | | | CAPACITY BUILDING | | | | |
| Ohkay Owingeh Housing Authority PO Box 1059 Gallup, NM 87305 | 85-0446828 | 501(c)(3) | 29,269 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | | |
| Comprehensive Housing Assistance Inc 5809 Park Heights Avenue San Francisco, CA 94110 | 23-7097000 | 501(c)(3) | 20,000 | | | | CAPACITY BUILDING | | | | |
| WESLEY HOUSING DEVELOPMENT CORPORATION 5515 CHEROKEE AVENUE ALEXANDRIA, VA 22312 | 51-0155779 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| DOWNTOWN EMERGENCY SERVICE CENTER 515 THIRD AVENUE CHICAGO,IL 606475216 | 91-1275815 | 501(c)(3) | 26,598 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Quest 35 Inc 878 Rock Street NW SAN FRANCISCO,CA 94102 | 58-2634738 | 501(c)(3) | 9,428 | | | | CAPACITY BUILDING | | | | |
| ASIAN AMERICANS FOR EQUALITY 108 Norfolk Street Los Angeles,CA 90067 | 13-3187792 | 501(c)(3) | 63,950 | | | | CAPACITY BUILDING | | | | |
| CENTRAL CITY CONCERN 232 NORTHWEST SIXTH AVENUE ATLANTA,GA 303031605 | 93-0728816 | 501(c)(3) | 31,415 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| HOMES ON THE HILL CDC 12 D TERRACE AVENUE COLUMBUS, OH 43204 | 31-1349995 | 501(c)(3) | 20,000 | | | | CAPACITY BUILDING | | | | |
| SUPPORTIVE HOUSING COALITION OF NEW MEXICO PO BOX 27459 Dorchester, MA 02125 | 85-0439315 | 501(c)(3) | 39,579 | | | | CAPACITY BUILDING | | | | |
| Charis Community Housing Inc 750 Glenwood Avenue SE ATLANTA,GA 303031605 | 58-1649314 | 501(c)(3) | 40,847 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Lott Community Development Corporation 421 East 116th Street San Francisco, CA 94133 | 13-3620671 | 501(c)(3) | 66,209 | | | | CAPACITY BUILDING | | | | |
| A Community of Friends 3701 Wilshire Boulevard PHILADELPHIA,PA 19103 | 95-4203106 | 501(c)(3) | 698,147 | | | | CAPACITY BUILDING | | | | |
| PATHSTONE CORPORATION 7 PRINCE STREET ROCHESTER,NY 14607 | 16-0984913 | 501(c)(3) | 37,385 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CommonBond Communities 1080 Montreal Ave Seattle, WA 981222014 | 41-1260469 | 501(c)(3) | 45,912 | | | | CAPACITY BUILDING | | | | |
| UNIVERSITY NEIGHBORHOOD HOUSING PROGRAM 2751 GRAND CONCOURSE Oakland,CA 946121517 | 13-3206603 | 501(c)(3) | 23,654 | | | | CAPACITY BUILDING | | | | |
| ATHENS LAND TRUST INC 685 N POPE STREET ATHENS, GA 30601 | 58-2154133 | public hsg auth | 7,717 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | |
| FRIENDS OF JEWISH COMMUNITY HOUSING FOR THE ELDERL 30 WALLINGFORD ROAD BOSTON, MA 02135 | 04-2607197 | 501(c)(3) | 37,500 | | | | CAPACITY BUILDING | | | |
| Del Norte Neighborhood Development Corporation 2926 Zuni Street DENVER, CO 80211 | 84-0783694 | 501(c)(3) | 34,196 | | | | CAPACITY BUILDING | | | |
| Housing Trust Silicon Valley 95 S Market Street SOUTH BURLINGTON, VT 05403 | 77-0545135 | 501(c)(3) | 9,212 | | | | CAPACITY BUILDING | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. | | | | | | | | | | | |
|---|------------|----------------------------------|------------------------------|---|---|--|---------------------------------------|--|--|--|--|
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| Ability Housing of Northeast Florida Inc 76 S Laura Street Los Angeles, CA 90010 | 59-3087085 | 501(c)(3) | 48,728 | | | | CAPACITY BUILDING | | | | |
| SUMMECH COMMUNITY DEV CORP 633 PRYOR STREET SW ATLANTA,GA 30312 | 58-1895918 | 501(c)(3) | 32,984 | | | | CAPACITY BUILDING | | | | |
| PROJECT INTERCONNECTIONS INC 2198 DRESDEN DRIVE CHAMBLEE,GA 30341 | 58-1899845 | 501(c)(3) | 36,000 | | | | CAPACITY BUILDING | | | | |

| Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. | | | | | | | | | | |
|--|----------------|----------------------------------|-------------------------------------|---|--|--|---------------------------------------|--|--|--|
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| RENAISSANCE HOUSING DEVELOPMENT CORPORATION 2111 CHAMPA STREET DENVER,CO 80205 | 84-1322816 | 501(c)(3) | 41,661 | | | | CAPACITY BUILDING | | | |
| BICKERDIKE REDEVLOPMENT CORPORATION 2550 WEST NORTH AVENUE Denver,CO 80209 | 23-7087890 | 501(c)(3) | 136,274 | | | | CAPACITY BUILDING | | | |
| ATLANTA CLT COLLABORATIVE INC 3235 PEACHTREE ROAD ATLANTA,GA 30305 | 90-0605040 | 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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| Good Shepherd Housing & Family Services Inc 8305 Richmond Highway Cleveland,OH 44104 | 23-7447962 | 501(c)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| HOUSING SOLUTIONS FOR THE SOUTHWEST 295 GIRAD STREET DURANGO,CO 81303 | 84-0853925 | 501(c)(3) | 18,423 | | | | CAPACITY BUILDING | | | | |
| Catholic Charities Housing Development Corporation 2740 SE POWELL PORTLAND,OR 97202 | 93-0386801 | 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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| MERCY HOUSING INC 1999 BROADWAY CLEVELAND,OH 44114 | 47-0646706 | 501(c)(3) | 49,435 | | | | CAPACITY BUILDING | | | | |
| COMMUNITY PRESERVATION & DEVELOPMENT CORPORATION 8403 COLESVILLE ROAD SILVER SPRING, MD 20910 | 52-1662186 | 501(c)(3) | 15,000 | | | | CAPACITY BUILDING | | | | |
| Metropolitan Denver Homeless Initiative 711 Park Avenue West CLEVELAND,OH 44114 | 84-1359401 | 501(c)(3) | 37,263 | | | | 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 section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| Bailey House Inc 1751 Park Avenue Ketchum,ID 833401292 | 13-3165181 | 501(c)(3) | 15,514 | | | | CAPACITY BUILDING | | | |
| CRAWFORD-SEBASTIAN COMMUNITY DEVELOPMENT CORPORATI 4831 ARMOUR AVENUE FORT SMITH,AZ 72914 | 71-0388927 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | |
| MERCY HOUSING INC SOUTHEAST 260 PEACHTREE STREET ATLANTA,GA 30303 | 56-1993872 | 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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| Hannahville Indian Community N14911 Hannahville Miami,FL 33135 | 38-2008182 | 501(c)(3) | 19,629 | | | | CAPACITY BUILDING | | | |
| GREYSTON FOUNDATION 21 PARK AVE Brooklyn,NY 11226 | 13-3717310 | 501(c)(3) | 10,000 | | | | CAPACITY BUILDING | | | |
| Home Again Inc 4 Old River Place Portland, OR 97232 | 20-4526894 | 501(c)(3) | 15,032 | | | | 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 section if applicable | (d) A mount of cash grant | 1 3 5 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| Hello Housing 1901 Royal Oaks Drive BROOKLYN,NY 11231 | 14-1870357 | 501(c)(3) | 65,572 | | | | CAPACITY BUILDING | | | |
| Greenwood Leflore Carroll Economic Development Fou 402 Highway 82 Bypass Brooklyn,NY 11226 | 64-0640864 | 501(c)(3) | 48,666 | | | | CAPACITY BUILDING | | | |
| FRONTIER HOUSING INC 5445 FLEMINGSBURG ROAD MOREHEAD, KY 40351 | 61-0863958 | 501(c)(3) | 35,629 | | | | CAPACITY BUILDING | | | |

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|---|----------------|----------------------------------|--------------------------------------|-------|--|--|---------------------------------------|--|--|--|--|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | , , , | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| Artspace Projects Inc 250 Third Avenue North Los Angeles, CA 90067 | 41-1350071 | 501(c)(3) | 14,900 | | | | CAPACITY BUILDING | | | | |
| NORTHEAST DENVER HOUSING CENTER 1735 GAYLORD STREET Gallup,NM 87305 | 84-0909291 | 501(c)(3) | 22,519 | | | | CAPACITY BUILDING | | | | |
| Nez Perce Tribal Housing Authority 111 Veterans Drive Gallup,NM 87305 | 82-0262257 | public hsg auth | 9,590 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. | | | | | | | | | | | |
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| PEOPLE UNITED FOR SUSTAINABLE HOUSING INC 271 GRANT STREET BUFFALO,NY 14213 | 20-3558447 | 501(c)(3) | 45,000 | | | | CAPACITY BUILDING | | | | |
| TRANSITIONAL HOUSING CORPORATION 5101 16TH STREET NW WASHINGTON, DC 20011 | 52-1675958 | 501(c)(3) | 19,687 | | | | CAPACITY BUILDING | | | | |
| St Clair Superior Development Corporation 4205 St Clair Avenue Cleveland, OH 44102 | 34-1238020 | 501(c)(3) | 18,528 | | | | CAPACITY BUILDING | | | | |

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| Instituto Para El Desarrollo Socioeconomico Y De V PO Box 7154 SOUTH BURLINGTON, VT 05403 | 66-0658219 | 501(c)(3) | 57,027 | | | | CAPACITY BUILDING | | | |
| New Orleans Area Habitat for Humanity Inc 2900 Elysian Fields Avenue St Paul, MN 55102 | 72-0973161 | 501(c)(3) | 46,265 | | | | CAPACITY BUILDING | | | |
| BRIDGE HOUSING DEVELOPMENT 600 CALIFORNIA STREET SAN FRANCISCO,CA 94108 | 94-2827909 | 501(c)(3) | 80,000 | | | | CAPACITY BUILDING | | | |

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| COMMUNITY DEVELOPMENT FOR ALL PEOPLE 946 PARSONS AVENUE COLUMNUS, OH 43206 | 51-0476886 | 501(c)(3) | 17,508 | | | | CAPACITY BUILDING | | | |
| Neighborhood Housing Services of Richland County 125 E Seminary Street Columbus, OH 43215 | 39-1431651 | 501(c)(3) | 10,294 | | | | CAPACITY BUILDING | | | |
| community resource & Housing development corp 7305 lowell boulevard suite 200 westminster, CO 80030 | 23-7102834 | 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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| SOUTHERN CALIFORNIA ASSOCIATION OF NON- PROFIT HOUS 501 Shatto Place Cleveland,OH 44102 | 95-4019655 | 501(c)(3) | 11,400 | | | | CAPACITY BUILDING | | | | |
| Little Haiti Housing Association Inc 181 Northeast 82nd Street Jackson Heights, NY 11372 | 59-2801211 | 501(c)(3) | 6,431 | | | | CAPACITY BUILDING | | | | |
| The Affordable Housing Group of North Carolina In 4600 Park Road Dorchester, MA 02125 | 56-0883684 | 501(c)(3) | 18,790 | | | | 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 section if applicable | (d) A mount of cash grant | = = | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | |
| COMMUNITY HOUSING INITIATIVES INC 14 WEST 21ST STREET San Francisco, CA 94110 | 42-1416426 | 501(c)(3) | 50,000 | | | | CAPACITY BUILDING | | | |
| Satellite Housing 1521 University Avenue Berkeley,CA 94703 | 94-3031375 | 501(c)(3) | 61,500 | | | | CAPACITY BUILDING | | | |
| BLACK HILLS AREA HABITAT FOR HUMANITY 825 SAINT JOSEPH STREET RAPID CITY,SD 57701 | 46-0410933 | 501(C)(3) | 89,500 | | | | CAPACITY BUILDING | | | |

| Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. | | | | | | | | | | | |
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| CAMBA INC 1720 CHURCH AVENUE BROOKLYN,NY 11226 | 11-2480339 | 501(C)(3) | 200,000 | | | | CAPACITY BUILDING | | | | |
| CAPITAL HILL HOUSING FOUNDATION 1620 12TH AVENUE SEATTLE,WA 98122 | 27-1682190 | 501(C)(3) | 28,589 | | | | CAPACITY BUILDING | | | | |
| CAPITAL HILL HOUSING IMPROVEMENT PROGRAM 1406 TENTH AVENUE SEATTLE, WA 98122 | 91-0979968 | llc | 67,828 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| CCH- CHRISTIAN CHURCH HOMES 303 HEGENBERGER ROAD OAKLAND,CA 94621 | 94-6077407 | 501(C)(3) | 77,692 | | | | CAPACITY BUILDING | | | | |
| CHARLOTTE MECKLENBURG HOUSING PARTNERSHIP INC 4601 CHARLOTTE PARK DRIVE CHARLOTTE,NC 28217 | 56-1620516 | 501(C)(3) | 25,000 | | | | CAPACITY BUILDING | | | | |
| CHICAGO NEIGHBORHOOD INITIATIVES INC 1000 E 111TH STREET CHICAGO,IL 60628 | 27-1832686 | 501(C)(3) | 27,400 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| COMMUNITY HOUSING PARTNERSHIP 20 JONES STREET SAN FRANCISCO, CA 94102 | 94-3112338 | 501(C)(3) | 61,935 | | | | CAPACITY BUILDING | | | |
| COMMUNITY HOUSING WORKS 1820S ESCONDIDO BOULEVARD ESCONDIDO,CA 92025 | 33-0317950 | 501(C)(3) | 40,000 | | | | CAPACITY BUILDING | | | |
| COMMUNITY SERVICES HOUSING DEVELOPMENT CORPROATION 1474 EASTERN PARKWAY BROOKLYN,NY 11233 | 11-2598992 | 501(c)(3) | 100,000 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| DETROIT CATHOLIC PASTORAL ALLIANCE 9200 GRATIOT DETROIT,MI 48213 | 38-2938993 | 501(C)(3) | 41,250 | | | | CAPACITY BUILDING | | | | |
| DHIC INC 113 SOUTH WILMINGTON STREET RALEIGH,NC 27601 | 56-1085131 | 501(C)(3) | 35,000 | | | | CAPACITY BUILDING | | | | |
| GO MONDY SCHOOL APARTMENTS 812 GRAVIER ST STE 340 NEW ORLEANS,LA 70112 | 47-2822357 | LLC | 50,000 | | | | 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 section if applicable | (d) A mount of cash grant | 3 · · | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| IFF ONE NORTH LASALLE CHICAGO,IL 60602 | 36-3656836 | 501(C)(3) | 27,556 | | | | CAPACITY BUILDING | | | | |
| pathstone development Corporation 7 prince street rodchester,NY 14607 | 22-2141948 | 501(C)(3) | 10,295 | | | | CAPACITY BUILDING | | | | |
| JEFFERSON EAST INC 14628 E JEFFERSON AVENUE DETROIT,MI 48215 | 38-3231066 | 501(C)(3) | 60,826 | | | | 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 section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| LATIN UNITED COMMUNITY HOUSING ASSOCIATION 3541 W NORTH AVENUE CHICAGO,IL 60647 | 36-3213453 | 501(C)(3) | 38,500 | | | | CAPACITY BUILDING | | | | |
| LIBERATIONS PROGRAMS INC 129 GLOVER AVENUE NORWALK,CT 06850 | 06-0867006 | 501(C)(3) | 6,867 | | | | CAPACITY BUILDING | | | | |
| LITTLE TRAVERSE BAY BONDS OF ODAWA INDIANS 7500 ODAWA CIRCLE HARBOR SPRINGS,MI 49740 | 38-3236295 | TRIBAL GOVERNEM | 24,672 | | | | 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 section if applicable | (d) A mount of cash grant | • • | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | | |
| LOGAN SQUARE NEIGHBORHOOD ASSOCIATION 2840 N MILWAUKEE AVENUE CHICAGO,IL 60618 | 36-2638491 | 501(C)(3) | 10,000 | | | | CAPACITY BUILDING | | | | |
| LOMAS VERDES 2G-1 CALLE DUENDE BAYAMON,PR 00956 | 66-0268234 | 501(C)(3) | 16,000 | | | | CAPACITY BUILDING | | | | |
| LOUISIANA ASSOCIATION OF AFFORADABLE HOUSING PROVI PO BOX 4058 MONROE,LA 71211 | 65-1319691 | 501(C)(3) | 10,000 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| METROPOLITAN AFFORDABLE HOUSING CORPORATION PO BOX 11923 EUGENE, OR 97440 | 93-1078543 | 501(C)(3) | 50,000 | | | | CAPACITY BUILDING | | | |
| MIAMI BEACH COMMUNITY DEVELOPMENT CORP 945 PENNSLYCANIA AVE MIAMI BEACH,FL 33139 | 59-2110264 | 501(C)(3) | 9,725 | | | | CAPACITY BUILDING | | | |
| MIAMI DADE COUNTY 701 NW 1ST COURT MIAMI,FL 33136 | 59-6000573 | 501(C)(3) | 35,000 | | | | 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 section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | | |
| MIDPEN HOUSING CORPORATION 303 VINTAGE PARK DRIVE FOSTER CITY, CA 94404 | 23-7089977 | 501(C)(3) | 49,865 | | | | CAPACITY BUILDING | | | | |
| MILLENNIUM PROPERTIES INC 4162 CANAL STREET NEW ORLEANS, LA 70119 | 47-2384782 | 501(C)(3) | 200,000 | | | | CAPACITY BUILDING | | | | |
| MISSION FIRST HOUSING DEVELOPMENT CORPORATION 1330 NEW HAMPSHIRE AVENUE WASHINGTON, DC 20036 | 27-1824650 | 501(C)(3) | 26,250 | | | | 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 section if applicable | (d) A mount of cash grant | 1 3 5 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | |
| MOTIVATION EDUCATION & TRAINING INC PO BOX 1838 NEW CANEY,TX 77357 | 74-1604560 | 501(C)(3) | 50,000 | | | | CAPACITY BUILDING | | | |
| MOUNT BAKER HOUSING ASSOCIATION 1423 31ST AVE SOUTH SEATTLE, WA 98144 | 91-1402983 | 501(C)(3) | 63,943 | | | | CAPACITY BUILDING | | | |
| NORTH SHORE COMMUNITY DEVELOPMENT COALITION 102 LAYFAYETTE STREET SALEM,MA 01970 | 04-2686893 | 501(C)(3) | 15,000 | | | | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| NORTHERN CIRCLE INDIAN HOUSING AUTHORITY 694 PINOLEVILLE DRIVE UKIAH,CA 95482 | 95-2609773 | 501(C)(3) | 50,000 | | | | CAPACITY BUILDING | | | | |
| NORTHERN PUEBLOS HOUSING AUTHORITY 5 WEST GUTIERREZ SANTA FE,NM 87506 | 85-0219256 | 501(C)(3) | 20,000 | | | | CAPACITY BUILDING | | | | |
| NORTHWEST SIDE COMMUNITY DEVELOPMENT CORPORATION 4201 NORTH 27TH STREET MILKWAUKEE, WI 53216 | 39-1478014 | 501(C)(3) | 9,770 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | ` ' | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | |
| OAK PARK REGIONAL HOUSING CENTER 1041 SOUTH BOULEVARD OAK PARK,IL 60302 | 23-7181388 | 501(C)(3) | 15,000 | | | | CAPACITY BUILDING | | | | | |
| OAK PARK RESIDENCE CORPORATION 21 SOUTH BOULEVARD OAK PARK,IL 60302 | 36-2666771 | 501(C)(3) | 20,250 | | | | CAPACITY BUILDING | | | | | |
| OHIO CITY INCORPORATED 2525 MARKET AVENUE CLEVELAND,OH 44113 | 34-1372076 | 501(C)(3) | 25,000 | | | | CAPACITY BUILDING | | | | | |

| Form 990,Schedule I, Par | t II, Grants and | Other Assistance | e to Domestic Org | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | | | | |
| OPAL COMMUNITY LAND TRUST 286 ENCHANTED FOREST EASTSOUND, WA 98245 | 94-3116010 | 501(C)(3) | 19,342 | | | | CAPACITY BUILDING | | | | | | | | |
| RENAISSANCE PROPERTY GROUP LLC 2600 GRAVIER ST 7TH FLOOR NEW ORLEANS, LA 70119 | 20-0917394 | llc | 75,000 | | | | CAPACITY BUILDING | | | | | | | | |
| RESTORE NEIGHBORHOOD LOS ANGELES INC 315 W 9TH STREET LOS ANGELES, CA 90015 | 26-4142930 | 501(C)(3) | 41,982 | | | | CAPACITY BUILDING | | | | | | | | |

| Form 990, Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | |
| RISING SUN HOMEOWNERSHIP LLC 671 ROSA AVENUE METAIRIE, LA 70005 | 90-0914731 | llc | 483,884 | | | | CAPACITY BUILDING | | | | | |
| ROCKY MOUNTAIN MUTUAL HOUSING ASSOCIATION INC 225 E 16TH AVENUE DENVER,CO 80203 | 84-0777280 | 501(C)(3) | 23,598 | | | | CAPACITY BUILDING | | | | | |
| RURAL NEIGHBORHOODS INC PO BOX 343529 FLORIDA CITY,FL 33034 | 65-1238417 | 501(C)(3) | 50,000 | | | | CAPACITY BUILDING | | | | | |

| Form 990,Schedule I, Par | 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 section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| SAN FRANCISCO COMMUNITY LAND TRUST 21 COLUMBUS AVENUE SAN FRANCISCO,CA 94111 | 11-3700403 | 501(C)(3) | 130,243 | | | | CAPACITY BUILDING | | | | |
| SAN FRANCISCO UNIFIED SCHOOL DISTRICT 555 FRANKLIN STREET SAN FRANCISCO, CA 94102 | 94-6000416 | 501(C)(3) | 40,000 | | | | CAPACITY BUILDING | | | | |
| SEATTLE CHINATOWN- INTERNATIONAL DISTRICT PRESERVAT 409 MAYNARD AVENUE SOUTH SEATTLE, WA 98114 | 91-1645126 | 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 section if applicable | (d) A mount of cash grant | 2 2 | (f) Method of valuation (book, FMV, appraisal, other) | | (h) Purpose of grant or assistance | | | |
| SOUTH MISSISSIPPI HOUSING AND DEVELOPMENT CORPORAT PO BOX 2099 GULFPORT,MS 39505 | 20-5640452 | 501(C)(3) | 10,000 | | | | CAPACITY BUILDING | | | |
| SOUTHEAST COMMUNITY DEVELOPMENT CORPORATION 3323 EASTERN AVENUE BALTIMORE, MD 21224 | 52-1034466 | 501(C)(3) | 30,000 | | | | CAPACITY BUILDING | | | |
| SOUTHERWESTERN REGIONAL HOUSING AND COMMUNITY DEVE 109 E PINE 5 DEMING,NM 88030 | 31-1788086 | 501(C)(3) | 50,000 | | | | CAPACITY BUILDING | | | |

| Form 990,Schedule I, Par | orm 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 section if applicable | (d) A mount of cash grant | , , , | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | | | |
| SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA COUNTY 1900 FRUITVALE AVENUE OAKLAND,CA 94601 | 94-1670490 | 5041(C)(3) | 35,000 | | | | CAPACITY BUILDING | | | | | | |
| SUPPORTIVE HOUSING NETWORK OF NEW YORK 247 WEST 37TH STREET NEW YORK, NY 10018 | 13-3755149 | 501(C)(3) | 10,000 | | | | CAPACITY BUILDING | | | | | | |
| THE CORNERSTONE GROUP 7661 BUSH LAKE DRIVE BLOOMINGTON,MN 55438 | 41-1762459 | for profit | 40,000 | | | | CAPACITY BUILDING | | | | | | |

| Form 990, Schedule I, Par | t II, Grants and | Other Assistance | to Domestic Orga | anizations and D | omestic Governme | nts. | |
|---|------------------|----------------------------------|--------------------------------------|------------------|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| THE DELORES PROJECT PO BOX 1406 DENVER,CO 80207 | 20-1122039 | 501(C)(3) | 58,756 | | | | CAPACITY BUILDING |
| THE SOMERVILLE COMMUNITY CORPORATION 337 SOMMERVILLE AVENUE SOMERVILLE,MA 02143 | 23-7293380 | 501(C)(3) | 50,000 | | | | CAPACITY BUILDING |
| THE THRESHOLDS 4101 N RAVENSWOOD CHICAGO,IL 60613 | 36-2518901 | 501(C)(3) | 35,000 | | | | 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 section if applicable | (d) A mount of cash grant | 1 3 5 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | | | | |
| WOMENS HOUSING & ECONOMIC DEVELOPMENT CORPORATION 50 EAST 168TH STREET BRONX,NY 10452 | 11-3099604 | 501(C)(3) | 14,880 | | | | CAPACITY BUILDING | | | | |
| WOMENS INSTITUTE FOR HOUSING AND ECONOMIC DEVELOPM 15 COURT SQUARE SUITE 210 BOSTON, MA 02108 | 04-2733078 | 501(C)(3) | 70,000 | | | | CAPACITY BUILDING | | | | |
| CATHEDRAL SQUARE CORPORATION 412 FARRELL STREET SUITE 100 SOUTH BURLINGTON, VT 05403 | 03-0264362 | 501(C)(3) | 8,906 | | | | CAPACITY BUILDING | | | | |

| Form 990,Schedule I, Par | t II, Grants and | Other Assistance | to Domestic Orga | <u>anizations and D</u> | omestic Governme | ents. | |
|---|------------------|---|-------------------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| TENDERLOIN NEIGHBORHOOD DEVELOP CORP 215 TAYLOR STREET SAN FRANCISCO,CA 94102 | 94-2761808 | 501(C)(3) | 44,456 | | | | CAPACITY BUILDING |
| EAH INC DAVIES PACIFIC CENTER 841 BISHOP ST 2208 HONOLULU,HI 96813 | 94-1699153 | 501(C)(3) | 25,520 | | | | CAPACITY BUILDING |
| CASCADIA BEHAVIORAL HEALTHCARE INC PO Box 8459 Portland,OR 97207 | 93-0770054 | 501(C)(3) | 31,408 | | | | CAPACITY BUILDING |

| Form 990, Schedule I, Par | t II, Grants and | Other Assistance | to Domestic Orga | anizations and D | omestic Governme | ents. | |
|---|------------------|---|------------------------------|------------------|---|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | 1 3 5 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| BURTEN BELL CARR DEVELOPMENT INC 7201 KINSMAN ROAD SUITE 104 CLEVELAND,OH 44104 | 34-1657533 | 501(C)(3) | 50,154 | | | | CAPACITY BUILDING |
| PATHSTONE CORPORATION 400 EAST AVENUE ROCHESTER,NY 14607 | 16-0984913 | 501(C)(3) | 141,544 | | | | CAPACITY BUILDING |
| PATHSTONE CORPORATION 6 Prince St ROCHESTER,NY 14607 | 16-0984913 | 501(C)(3) | 10,041 | | | | CAPACITY BUILDING |

DLN: 93493214000406

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on 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.

2015

Open to Public Inspection

| terrial Revenue Service | |
|-------------------------|-----------------|
| Name of the organiz | ation |
| ENTERPRISE COMMUNIT | TY PARTNERS INC |

Employer identification number

52-1231931

| Pai | rt I Questions Regarding Compensation | on | | | | |
|-----|---|------------|---|----|-----|----|
| | | | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II | | | | | |
| | First-class or charter travel | Г | Housing allowance or residence for personal use | | | |
| | Travel for companions | Г | Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments | | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Γ | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d | | | 1b | | |
| 2 | Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe | | - · · · · · · · · · · · · · · · · · · · | 2 | | |
| | | | | | | |
| 3 | Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen | that apply | | | | |
| | Compensation committee | Г | Written employment contract | | | |
| | ✓ Independent compensation consultant | ▼ | Compensation survey or study | | | |
| | Form 990 of other organizations | <u>~</u> | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed on Form 990 or a related organization | , Part VI | I, Section A, line $1a$ with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-control | l paymen | t? | 4a | Yes | |
| b | Participate in, or receive payment from, a supplement | ental non | qualified retirement plan? | 4b | | Νo |
| C | Participate in, or receive payment from, an equity-b | based coi | mpensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and p | rovide th | e applicable amounts for each item in Part III | | | |
| | Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza | ations mu | ust complete lines 5-9. | | | |
| 5 | For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of | | | | | |
| а | The organization? | | | 5a | | Νo |
| b | Any related organization? | | | 5b | | Νo |
| | If "Yes," on line 5a or 5b, describe in Part III | | | | | |
| 6 | For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of | A, line 1a | a, did the organization pay or accrue any | | | |
| а | The organization? | | | 6a | | Νo |
| b | Any related organization? | | | 6b | | Νo |
| | If "Yes," on line 6a or 6b, describe in Part III | | | | | |
| 7 | For persons listed on Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes," | | | 7 | | No |
| 8 | Were any amounts reported on Form 990, Part VII, | | | | | |
| - | subject to the initial contract exception described i | | | | | |
| | ın Part III | | | 8 | | No |
| 9 | If "Yes" on line 8, did the organization also follow the section 53 $4958-6(c)$? | he rebutt | able presumption procedure described in Regulations | 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 on 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 | f W-2 and/or 1099-MIS | SC compensation | (C) Retirement and | (D) Nontaxable benefits | (E) Total of columns (B)(ı)-(D) | (F) Compensation in column(B) reported as deferred on prior Form 990 |
|---------------------------|--------------------------|---|---|--------------------------------|--------------------------------|------------------------------------|---|
| | Base (i) compensation | (ii) Bonus & Incentive compensation | (iii) Other reportable compensation | other deferred compensation | | | |
| See Additional Data Table | | | | | | | |

Schedule J (Form 990) 2015

| Provide the information, explanation, or | 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 | | | | | | | | | |
| | MARYANN LESHIN \$73,337 DUE TO A RECONSTRUCTURE OF MANAGEMENT THIS POSITION WAS ELIMINATED AND A ONE TIME PAYMENT WAS MADE AS SEVERANCE | | | | | | | | | |

Schedule J (Form 990) 2015

(11)

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 (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (A) Name and Title (F) Compensation in other deferred benefits (B)(i)-(D) column (B) (ii) (i) compensation reported as deferred Base Bonus & Other on prior Form 990 reportable Compensation ıncentıve compensation compensation 1JEFFREY SCHAFFER 200,534 (1) 33,259 1,290 17,486 19,513 272,082 Vice president (11) 1Terri L Ludwigpresident 447,916 (1) 719 616,153 127,710 20,295 19,513 (II)**2**WILLIAM R FREY 200,000 (1) 5,000 2,252 14,919 14,639 236,810 highest comp (II)3RICHARD d GROSS (1) 200,534 33,259 10,665 17,486 276,989 15,045 (11) 4MARK MCDERMOTT 188,739 (1) 255,099 33,144 2,090 16,487 14,639 Vice president (11) **5**LORI michelle CHATMAN (1) senior Vice president (II)227,514 59,931 1,490 20,295 18 309,248 6MICHAEL MCNEELY 263,937 (1) 69,525 2,780 20,295 18 356,555 senior Vice president (11) **7**Alan Scott Anderson VICE PRESIDENT 187,517 (1) 17,510 1,290 14,897 19,513 240,727 (II)8ALAZNE M SOLIS (1) 265,413 69,914 300 20,295 12,690 368,612 senior Vice president (11) **9**FAITH E THOMAS (1) 233,103 38,661 2,252 20,295 14,639 308,950 senior VP and General council (11) 10Matthew D Hoffman 184,412 (1) 17,992 450 14,661 19,513 237,028 Vice president (11) 11Meaghan E Vlkovic 165,498 (1) 28,256 13,883 19,513 227,150 (11) 12AMALIA M KASTbERG (1) 250,734 450 18,320 19,513 313,479 24,462 (11) 13MICHELLE WHETTEN (1) 177,581 30,319 450 230,022 15,156 6,516 Vice president (11) 14DAVID CHARLES BOWERS (1) 180,005 29,855 450 15,332 6,516 232,158 Vice president (II)15CHARLES WERHANE (1) TRUSTEE (11) 405,173 14,639 198,603 319,197 202,438 109,034 1,050,481 16Edward David Manekin 167,040 (1) 13,852 1,290 12,725 12,690 207,597 Vice president (11) 17keith e fairey (1) 209,690 38,950 722 18,847 19,513 287,722 Vice president (11) 18alex s avitabile 176,944 (1) 14,673 2,252 13,715 14,639 222,223 vice president (II)19petra d montague 161,682 (1) 14,197 1,290 10,231 12,690 200,090 Vice president

| Form 990, Schedule J, Pa | rt] | II - Officers, Direc | tors, Trustees, Ke | ey Employees, and | l Highest Compen | sated Employees | | |
|--|------|----------------------|---------------------------|----------------------------|--------------------------------|-----------------|----------------------|------------------------------------|
| (A) Name and Title | | | W-2 and/or 1099-MIS | | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation in |
| | | (i) Base | (ii) Bonus & | (iii) Other | other deferred compensation | benefits | (B)(ı)-(D) | column (B) reported as deferred |
| | | Compensation | ıncentive compensation | reportable compensation | | | | on prior Form 990 |
| 21KAREN M LADO | (1) | 145,515 | 25,189 | | 11,831 | 12,690 | 196,131 | |
| vice president | (11) | | | | | | | |
| | `'' | | - | - | - | - | - | - |
| 1katherine w swenson Vice president | (1) | 173,225 | 15,633 | 450 | 13,442 | 12,690 | 215,440 | |
| · | (11) | - | | | | | | - |
| 2anthony joseph dispigno | (1) | 252.007 | | | | | | |
| senior Vice president | (1) | 252,807 | 64,466 | 690 | 20,295 | 19,513 | 357,771 | |
| | (11) | - | - | - | - | - | _ | - |
| 3Andrew Edward Geer | (1) | 163,286 | 27,878 | 690 | 13,650 | 19,513 | 225,017 | |
| Vice president | (11) | | | | | | | |
| | (, | | - | - | - | _ | _ | - |
| 4 Melında J Pollack Vıce president | (1) | 177,582 | 31,185 | 300 | 15,234 | 12,690 | 236,991 | |
| | (11) | - | - | - | - | - | - | - |
| 5 jacqueline waggoner | (1) | 162,135 | 27.063 | | 4 4 4 7 | | 221 762 | |
| highest comp | | | 37,961 | 717 | 14,454 | 6,516 | 221,783 | |
| | (11) | - | - | - | - | - | - | - |
| 6 jon searleshighest comp | (1) | 171,787 | 14,246 | 572 | 13,212 | 4,922 | 204,739 | |
| | (11) | | | | | | | |
| | | | | | | | | |
| 7 MARY JO BARRANCO Vice president | (1) | 197,430 | 18,298 | 690 | 15,861 | 19,513 | 251,792 | |
| | (11) | - | - | - | - | - | - | - |
| 8TIFFANY MANUEL | (1) | 173,275 | 14.260 | 450 | 10.510 | 12.600 | 211 202 | |
| Vice president | ll | | 14,369 | 450 | 10,518 | 12,690 | 211,302 | |
| | (11) | - | - | - | - | - | - | - |
| 9 benjamin nichols Vice president | (1) | 152,250 | 14,500 | 298 | 11,453 | 19,513 | 198,014 | |
| vice president | (11) | | | | | | | |
| 120 | | | | | | | | |
| 10 thomas osdoba Vice president | (1) | 174,199 | 15,720 | 690 | 10,689 | 6,516 | 207,814 | |
| | (11) | - | - | - | - | - | - | - |
| 11diane yentelVice president | (1) | 173,920 | 16,480 | 300 | 12,812 | 19,513 | 223,025 | |
| | (11) | | | | | | | |
| | ("/ | | - | - | - | - | _ | - |
| 12 andrew jakabovics highest comp | (1) | 167,455 | 16,093 | 542 | 12,989 | 19,513 | 216,592 | |
| | (11) | - | - | - | - | - | _ | - |
| 13angela boydVice president | (1) | 158,333 | 1-000 | | | | | |
| 23 angela boyavice president | | | 15,000 | 240 | 12,045 | 4,922 | 190,540 | |
| | (11) | - | - | - | - | - | - | - |
| 14maryann Leshin FORMER OFFICER | (1) | 97,532 | 15,800 | 84,348 | 3,400 | 16,258 | 217,338 | |
| TORMER OFFICER | (11) | | | | | | | |
| | | | | | | | | |
| 15LAUREL BLAtCHFORD senior Vice president | (1) | 268,750 | 77,400 | 300 | 18,217 | 18 | 364,685 | |
| | (11) | - | | - | | - | - | - |
| 16ANDREW JOHNSTON | (1) | 208,333 | 57,000 | 572 | 20,295 | 18 | 286,218 | |
| senior Vice president | (11) | | | | | | | |
| | ("' | | | <u> </u> | | <u> </u> | | - |
| 17CRAIG MELLENDICK senior Vice president & CFO | (1) | 341,100 | 117,006 | 58,721 | 20,295 | 19,513 | 556,635 | |
| | (11) | | | | | | | |
| 18JUDITH KENDE | (.) | 210 502 | | | | | | |
| vice president | (1) | 218,593 | 37,625 | 450 | 15,108 | 19,513 | 291,289 | |
| | (11) | - | - | - | - | - | - | - |
| 19BRYAN PITTINGER | (1) | 157,717 | 16,528 | 270 | 11,631 | 19,513 | 205,659 | |
| vice president | (11) | | | | | | | |
| | ``' | | - |] | - | _ | _ | - |
| | | | | | | | | |

| (A) Name and Title | | f W-2 and/or 1099-MIS | 10 | 1 | | | |
|---------------------------------------|-----------------------------|-------------------------------------|-------------------------------------|--|-----------------------------------|------------------------------------|--|
| Сон | (i) Base compensation | (ii) Bonus & Incentive compensation | (iii) Other reportable compensation | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(ı)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
| 41EUN SHINVICE president (I) | 183,333 | 14,875 | 450 | 14,284 | 18 | 212,960 | |
| 1MARY ANN LEONARD vice president (I) | 183,911 | 30,502 | 1,980 | 15,742 | 12,690 | 244,825 | |
| 2SUSAN V SHIRE FORMER OFFICER (II) | 119,706 | 13,274 | 8,215 | 3,989 | 12,276 | 157,460 | |
| 3MANUELA BLANEY highest comp (II) | 166,872 | 45,266 | 722 | 15,562 | 19,513 | 247,935 | |

DLN: 93493214000406

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number Name of the organization ENTERPRISE COMMUNITY PARTNERS INC 52-1231931 Types of Property Part I (a) (b) (c) (d) Check Number of contributions Noncash contribution Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g 1 Art—Works of art . . . 2 Art—Historical treasures . 3 Art—Fractional interests 4 Books and publications . . 5 Clothing and household goods Cars and other vehicles **7** Boats and planes . . . Intellectual property . . . 10 1,070,139 FMV ON DATE ACQUIRED 9 Securities—Publicly traded . 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Oualified conservation 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 ► (___ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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 Νo **b** If "Yes," describe the arrangement in Part II 31 Νo 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 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

Part II Suppler

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 | FINANCIAL INSTITUTIONS ARE USED TO REDEEM/SELL DONATED STOCK |
| ıtems | |

Schedule M (Form 990) (2015)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493214000406

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

2015

Open to Public Inspection

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

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|---------------------------------|--|
| governance part VI 11b | The entire Board is given a copy of the 990 return to review prior to filing the 990 return. The Audit Committee of the Board reviews and approves the 990 return in a meeting. |
| governance part vi 12-a,b,c | AN ANNUAL CONFLICT OF INTEREST DISCLOSURE EXERCISE IS PERFORMED BY THE ORGANIZATION EACH J ANUARY THIS EXERCISE REQUIRES EACH EMPLOYEE TO READ THE BUSINESS ETHICS POLICY AND COMPLE TE THE CONFLICT OF INTERESTS DISCLOSURE FORM IDENTIFY ING ANY POSSIBLE CONFLICTS KNOWN BY T HE EMPLOYEE. NEW EMPLOYEES ARE ALSO REQUIRED TO COMPLETE THIS CONFLICT OF INTEREST DISCLOS URE FORM UPON HIRING. THE EXECUTIVE OFFICE INCLUDES THE CONFLICT OF INTEREST POLICY AND THE E CONFLICT OF INTERESTS DISCLOSURE STATEMENT IN ITS MAILING TO THE TRUSTEES IN ADVANCE OF THE FIRST QUARTER MEETING OF THE BOARD (USUALLY HELD IN MARCH). WE ASK THAT TRUSTEE RETURN THE DISCLOSURE FORM BY MAY. THE CHIEF AUDIT EXECUTIVE REVIEWS AND APPROVES THE DOCUMENT (CONFLICT OF INTEREST DISCLOSURE FORM) CONTENT AND FOLLOWS UP ON ANY CONCERNS WITH THE EMPLOYEE. FOR NEW HIRES, A LOG IS MAINTAINED OF ANY DOCUMENTED CONFLICTS FOR FUTURE REFERENCING. THE EXECUTIVE OFFICE MONITORS AND FOLLOWS UP ON THE STATUS OF ANY UNRETURNED DISCLOSURE FORMS. THE GENERAL COUNSEL REVIEWS ALL TRUSTEES DISCLOSURE FORMS AND FOLLOWS UP IF THERE A REANY ISSUES, IN ACCORDANCE WITH THE PROCEDURES SET FORTH IN THE POLICY. |
| governance part vi 15-a&b | THE PROCESS FOR DETERMINING COMPENSATION FOR THE CEO AND OFFICER positions OF ENTERPRISE C OMMUNITY PARTNERS IS AS FOLLOWS Partners engages an independent consulting firm to provid e a compensation study for the CEO & Officer positions to establish a market value. The ma rket analysis is reviewed by the Board of Trustees. The Board of Trustees discusses and se ts 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 18,809,754 NET UNREALIZED GAIN ON INVESTMENT 159,166 CH ANGE IN NON-CONTROLLING INTERESTS 5,185,986 AUDIT STATEMENT-ONLY CHANGE IN CONTROLLING INT EREST 733,444 GAAP TO TAX ADJ -59,146 TOTal 24,869,204 |

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

DLN: 93493214000406

OMB No 1545-0047

2015

Open to Public Inspection

Schedule R (Form 990) 2015

SCHEDULE R (Form 990)

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Related Organizations and Unrelated Partnerships

► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service

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

52-1231931

| Part I Identification of Disregarded Entities Complete | e ir the organization | answered "Yes" or | n Form 990, Pari | 1 1 V, line 33. | | | | |
|---|--------------------------------|---|----------------------------|---|--------------|--|---------------------------|--------------------|
| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | | (f) Direct controlling entity | | |
| L) ENTERPRISE LOUISIANA LOAN FUND LLC 1000 broken land parkway 700 OLUMBIA, MD 21044 7-1718653 | FINANCING | DE | | 1,099,632 | ECP INC | | | |
| 2) Enterprise New Orleans NT LLC 1000 broken land parkway 700 olumbia, MD 21044 2-1231931 | afford hsg | MD | | 1,216,938 | ecp inc | | | |
| 3) ENterprise new generation member llc 100 broken land parkway 700 olumbia, MD 21044 | financing | DE | | | ECP INC | | | |
| | | | | | | | | |
| | | | | | | | | |
| Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the | | he organization an | swered "Yes" or | ı Form 990, Part | IV, line | e 34 because it | had on | е |
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity sta (if section 501(c) | atus (3)) | (f) Direct controlling entity | Section (13) co ent | ontrolled tity? |
| Gee Additional Data Table | | | | | | | Yes | No |
| ce radional bata Table | | | | | | | | |
| | _ | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | _ | |

Cat No 50135Y

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.

| (2) | (b) | (6) | (d) | (e) | (f) | /a\ | (h | ` | (i) | Ü | <u>. </u> | (k) |
|--|------------------|---------------------|-------------|-------------------------|--------------|-----------------|---------|--------|-----------------------------|-------|--|------------|
| (a) Name, address, and EIN of | Primary activity | (c) Legal | Direct | Predominant | Share of | (g) Share of | Disprop | | | Genei | | Percentage |
| related organization | , , | domicile | controlling | ıncome(related, | total income | end-of- | alloca | | amount in | mana | | ownership |
| | | (state or | entity | unrelated, | | year | | | box 20 of | parti | ner? | |
| | | foreign country) | | excluded from tax under | | assets | | | Schedule K-1 (Form 1065) | | | |
| | | Country) | | sections 512- | | | | | (101111 1003) | | | |
| | | | | 514) | | | | I | | | | |
| | | | | | | | Yes | No | | Yes | No | |
| (1) ECLF TOAH mbr LLC | FINANCING | DE | ECLF | | | | | | | | | |
| 11000 broken land parkway 700 | | | | | | | | | | | | |
| Columbia, MD 21044 | | | | | | | | | | | | |
| 27-5305396 | | | | | | | | | | | | |
| (2) COMMUNITY WEATHERIZATION LLC | AFFORD HSGING | DE | ECP INC | | | | | | | | | |
| 501 7TH AVENUE 7TH FLOOR | | | | | | | | | | | | |
| NEW YORK, NY 10018 | | | | | | | | | | | | |
| 27-2173025 | | | | | | | | | | | | |
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| | | | | | | | | | | | | |
| Don't TV Identification of Polated Overningtions Toyoble | Councu | - 41 | T C | | | | | 1 1157 | " F | 000 | D | TV loss |

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (g) Share of end-of- year assets | (h) Percentage ownership | (i) Section (b)(i contro entit | n 512 13) olled ty? |
|---|--------------------------------|---|-------------------------------------|---|---|---------------------------------------|--|------------------------------|
| | | | | | | | Yes | No |
| (1)ENTERPRISE GROUP INC 11000 broken land parkway 700 COLUMBIA, MD 21044 52-1348268 | AFF HOUSING | MD | ECP INC | C CORP | | 100 000 % | | No |
| (2) ENTERPRISE NEW ORLEANS LLC 11000 broken land parkway 700 COLUMBIA, MD 21044 26-4201991 | AFFORDABLE HS | MD | ECP INC | C CORP | | 100 000 % | | No |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

(5)ENterprise community investment Inc

| Part V Transactions With Related Organizations Complete if the organization answ | ered "Yes" on Form | 990, Part IV, line | e 34, 35b, or 36. | | | | | | |
|---|---|------------------------|---|------------|---------|----|--|--|--|
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule | | | | | Yes | No | | | |
| 1 During the tax year, did the orgranization engage in any of the following transactions with one or more r | elated organizations li | sted in Parts II-IV? | • | | | | | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | | 1a | Yes | | | | |
| b Gift, grant, or capital contribution to related organization(s) | | | | 1b | Yes | | | | |
| c Gift, grant, or capital contribution from related organization(s) | | | | 1c | Yes | | | | |
| d Loans or loan guarantees to or for related organization(s) | | | | | | | | | |
| e Loans or loan guarantees by related organization(s) | | | | 1e | | No | | | |
| f Dividends from related organization(s) | | | | 1 f | | | | | |
| g Sale of assets to related organization(s) | | | | 1g | | No | | | |
| h Purchase of assets from related organization(s) | | | | 1h | | No | | | |
| i Exchange of assets with related organization(s) | | | | 1i | | No | | | |
| ${f j}$ Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | No | | | |
| k Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | No | | | |
| I Performance of services or membership or fundraising solicitations for related organization(s) . $$. | | | | 11 | Yes | | | | |
| $m{m}$ Performance of services or membership or fundraising solicitations by related organization(s) | | | | 1m | Yes | | | | |
| f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | 1n | Yes | | | | |
| • Sharing of paid employees with related organization(s) | | | | 10 | | No | | | |
| p Reimbursement paid to related organization(s) for expenses | | | | 1 p | Yes | | | | |
| q Reimbursement paid by related organization(s) for expenses | | | | 1q | Yes | | | | |
| r Other transfer of cash or property to related organization(s) | | | | 1r | | No | | | |
| s Other transfer of cash or property from related organization(s) | | | | 1 s | | No | | | |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete | e this line, including co | vered relationships | and transaction thresholds | | | | | | |
| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining am | ount II | nvolved | | | | |
| (1)ENterprise community investment Inc | а | 5,137,895 | cost | | | | | | |
| (2)ENterprise community investment Inc | L | 6,313,949 | cost | | | | | | |
| (3)ENterprise community investment Inc | М | 3,740,708 | cost | | | | | | |
| (4)ENterprise community investment Inc | Р | 1,583,896 | cost | | | | | | |

Q

801,347

cost

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

| revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships | | | | | | | | | | | | | | | | | |
|--|--------------------------------|----------------------------------|--|---|----|------------------------------------|-------|-------|-------|-------|--|-------------------------------------|---|---|----------------------|--|---------------------------------------|
| (a) Name, address, and EIN of entity | (b) Primary activity | domicile (state or foreign | (d) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (e) Are all partners section 501(c)(3) organizations? | | (f) Share of total Income | total | total | total | total | (g) Share of end-of-year assets | (h) Disproprtiona allocations | _ | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | managing partner? | | (k) Percentage ownership |
| | | | 314) | Yes | No | | | Yes | No | | Yes | No | | | | | |
| | | | | | | | | | | | l | 1 | I | | | | |
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Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015

Software ID: Software Version:

EIN: 52-1231931

Name: ENTERPRISE COMMUNITY PARTNERS INC

| Form 990, Schedule R, Part II - Identification of R (a) Name, address, and EIN of related organization | Related Tax-Exempt On (b) Primary activity | (c) Legal domicile (state | (d) Exempt Code section | (e) Public charity status | (f) Direct controlling entity | Sectio (b)(| n 512 13) |
|---|--|---------------------------|-------------------------------|--|--------------------------------------|----------------|--------------|
| | | or foreign country) | | (if section 501(c) (3)) | | contr enti | |
| | | | | | | Yes | No |
| ENTERPRISE COMMUNITY LOAN FUND INC 11000 broken land parkway 700 COLUMBIA, MD 21044 52-0192004 | FINANCING | MD | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| ENTERPRISE HOME OWNERSHIP PARTNERS INC 600 wilshire blvd LOS ANGELES, CA 90017 31-1737642 | AFF HOUSING | CA | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| EHOP- DALLAS INC 500 akard street DALLAS, TX 75201 72-1590088 | AFF HOUSING | TX | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| NEIGHBORHOOD PARTNERSHIP HOUSING DEVELOP 1 WHITEHALL STREET NEW YORK, NY 10004 13-3811616 | AFF HOUSING | NY | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| ENTERPRISE MARYLAND LLC 11000 broken land parkway 700 COLUMBIA, MD 21044 26-3262997 | AFF HOUSING | MD | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| IACENTERPRISE NEHEMIAH DEVELOPMENT 11000 broken land parkway 700 COLUMBIA, MD 21044 52-1742031 | AFF HOUSING | MD | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| CORNERSTONE HOUSING CORPORATION 11000 broken land parkway 700 COLUMBIA, MD 21044 52-1742293 | AFF HOUSING | MD | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| CITY HOMES INC 11000 broken land parkway 700 COLUMBIA, MD 21044 52-1479114 | AFF HOUSING | MD | 501(c)(3) | 509(a)(3) | ECP INC | | No |
| ENTERPRISE ADVISORS INC 11000 broken land parkway 700 COLUMBIA, MD 21044 27-3846733 | aff housing | MD | 501(c)(3) | 509(a)(3) | ecp inc | | No |
| Affordable Housing Solutions Inc 11000 broken land parkway 700 Columbia, MD 21044 35-2389470 | aff housing | MD | 501(c)(3) | 509(a)(3) | ecp inc | | No |
| enterprise community investment inc 11000 broken land parkway columbia, MD 21044 52-1206840 | aff housing | MD | 501(c)(4) | | N/A | | No |