COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA, MD 20814-6583

MR. CRAIG MELLENDICK
ENTERPRISE COMMUNITY PARTNERS, INC.
11000 BROKEN LAND PARKWAY
COLUMBIA, MD 21044

DEAR CRAIG:

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF YOUR INCOME TAX RETURNS FOR THE PERIOD ENDED DECEMBER 31, 2014 FOR:

ENTERPRISE COMMUNITY PARTNERS, INC. AS FOLLOWS...

2014 990 - RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX
2014 SCHEDULE A - PUBLIC CHARITY STATUS AND PUBLIC SUPPORT
2014 SCHEDULE B - SCHEDULE OF CONTRIBUTORS
2014 SCHEDULE C - POLITICAL CAMPAIGN AND LOBBYING ACTIVITIES
2014 SCHEDULE D - SUPPLEMENTAL FINANCIAL STATEMENTS
2014 SCHEDULE G - SUPPLEMENTAL INFO. REGARDING FUNDRAISING/GAMING
2014 SCHEDULE I - GRANTS & OTHER ASSIST. TO ORG/GOV/IND. IN THE U.S
2014 SCHEDULE J - COMPENSATION INFORMATION
2014 SCHEDULE M - NONCASH CONTRIBUTIONS
2014 SCHEDULE O - SUPPLEMENTAL INFORMATION TO FORM 990 OR 990EZ
2014 SCHEDULE R - RELATED ORGANIZATIONS AND UNRELATED PARTNERSHIPS
2014 CALIFORNIA FORM 199 - EXEMPT ORGANIZATION STATEMENT OF RETURN
2014 CALIFORNIA 8453-EO E-FILE RETURN AUTHORIZATION FOR EXEMPT ORG.
2014 MARYLAND EXEMPT CORPORATE FILING (COPY OF FORM 990)

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

UPON AN AUDIT OF THE RETURN(S), REQUESTS MAY BE MADE FOR SUPPORTING DOCUMENTATION. THEREFORE, WE RECOMMEND THAT YOU RETAIN ALL PERTINENT RECORDS.

FORM 990 MUST BE MADE AVAILABLE FOR PUBLIC INSPECTION FOR A PERIOD OF THREE YEARS, BEGINNING WITH THE DATE THE RETURN IS FILED. THE AVAILABLE DOCUMENT MUST BE AN EXACT COPY OF THE RETURN AND SCHEDULES (INCLUDING SCHEDULE B), AS FILED WITH THE IRS, EXCEPT THAT THE NAMES AND THE ADDRESSES OF THE CONTRIBUTORS MAY BE EXCLUDED. ANY ORGANIZATION THAT FAILS TO COMPLY WITH THIS PROVISION IS SUBJECT TO A PENALTY OF $20 FOR EACH DAY THAT INSPECTION IS NOT PERMITTED, UP TO A MAXIMUM OF $10,000. ANY ORGANIZATION THAT WILLFULLY FAILS TO COMPLY SHALL BE SUBJECT TO AN ADDITIONAL PENALTY OF $5,000. YOU ARE ALSO REQUIRED TO PROVIDE COPIES OF THE RETURN IF YOU RECEIVE SUCH A REQUEST. SHOULD YOU RECEIVE A REQUEST FOR INSPECTION OR FOR COPIES OF YOUR RETURN, YOU MAY WANT TO CONTACT US FOR FURTHER DETAILS.

THESE RETURNS WERE PREPARED FROM INFORMATION PROVIDED BY YOU OR YOUR REPRESENTATIVE. THE PREPARATION OF TAX RETURNS DOES NOT INCLUDE THE INDEPENDENT VERIFICATION OF INFORMATION USED. THEREFORE, WE RECOMMEND YOU REVIEW THE RETURNS BEFORE SIGNING TO ENSURE THERE ARE NO OMISSIONS OR MISSTATEMENTS. IF YOU NOTE ANYTHING WHICH MAY REQUIRE A CHANGE TO THE RETURNS, PLEASE CONTACT US BEFORE FILING THEM.

WE SINCERELY APPRECIATE THIS OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE QUESTIONS CONCERNING THE RETURNS OR IF WE MAY BE OF FURTHER ASSISTANCE.

VERY TRULY YOURS,

ANNE E. SCHRANTZ, CPA
PARTNER

COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA, MD 20814-6583

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INSTRUCTIONS FOR FILING
ENTERPRISE COMMUNITY PARTNERS, INC.
FORM 8879-EO - IRS E-FILE SIGNATURE AUTHORIZATION
FOR THE PERIOD ENDED DECEMBER 31, 2014

****

SIGNATURE...
THE ORIGINAL IRS E-FILE SIGNATURE AUTHORIZATION FORM SHOULD BE SIGNED (USE FULL NAME) AND DATED BY THE TAXPAYER.

FILING...
RETURN YOUR SIGNED FORM 8879-EO TO:

COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA MD 20814-6583

PAYMENT OF TAX...
NO PAYMENT OF TAX IS REQUIRED.

PLEASE REVIEW THE TAX RETURN FOR THE CORRECT INCLUSION OF ANY FOREIGN TRANSACTIONS OR INFORMATION. FOR EXAMPLE, FBAR FORM 114 IS REQUIRED TO BE FILED FOR ANY FOREIGN FINANCIAL ACCOUNTS IN WHICH A TAXPAYER HAS A FINANCIAL INTEREST OR SIGNATURE OR OTHER AUTHORITY. FAILURE TO FILE THIS FORM, ALONG WITH OTHER FORMS RELATED TO OVERSEAS ACTIVITIES SUCH AS OWNERSHIP IN FOREIGN ENTITY, GIFTS FROM OVERSEAS OR A RELATIONSHIP WITH A FOREIGN TRUST, WILL POTENTIALLY SUBJECT YOU TO SUBSTANTIAL PENALTIES. PLEASE ADVISE US IMMEDIATELY IF YOU BELIEVE YOU MAY HAVE ANY FOREIGN ACTIVITY OR INVESTMENT AND/OR FOREIGN BANK OR SECURITIES ACCOUNT WHICH CARRIES A FILING REQUIREMENT AND IT IS NOT INCLUDED IN THE TAX RETURNS.

FORM 8879-EO SERVES AS A REPLACEMENT FOR YOUR SIGNATURE THAT WOULD BE AFFIXED TO FORM 990 IF YOU PAPER FILED YOUR RETURN.
PLEASE DO NOT SEPARATELY FILE FORM 990 WITH THE INTERNAL REVENUE SERVICE. DOING SO WILL DELAY THE PROCESSING OF YOUR RETURN.

WE MUST RECEIVE YOUR SIGNED FORM BEFORE WE CAN ELECTRONICALLY TRANSMIT YOUR RETURN WHICH IS DUE ON AUGUST 17, 2015. WE WOULD APPRECIATE YOUR RETURNING THIS FORM AS SOON AS POSSIBLE AS THIS WILL EXPEDITE THE PROCESSING OF YOUR RETURN. THE INTERNAL REVENUE SERVICE WILL NOTIFY US WHEN YOUR RETURN IS ACCEPTED. YOUR RETURN IS NOT CONSIDERED FILED UNTIL THE INTERNAL REVENUE SERVICE CONFIRMS THEIR ACCEPTANCE, WHICH MAY OCCUR AFTER THE DUE DATE OF YOUR RETURN.

****

Form **8879-EO**

IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2014, or fiscal year beginning 01/01___, 2014, and ending 12/31___, 20 14__

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at *www.irs.gov/form8879eo.***

OMB No. 1545-1878

2014

Department of the Treasury
Internal Revenue Service

Name of exempt organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Name and title of officer

CRAIG MELLENDICK, CFO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a	Form 990 check here ▶ [X]	**b**	**Total revenue,** if any (Form 990, Part VIII, column (A), line 12) . . .	**1b**	69301836.
2a	Form 990-EZ check here ▶ [ ]	**b**	**Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a	Form 1120-POL check here ▶ [ ]	**b**	**Total tax** (Form 1120-POL, line 22)	**3b**	
4a	Form 990-PF check here ▶ [ ]	**b**	**Tax based on investment income** (Form 990-PF, Part VI, line 5).	**4b**	
5a	Form 8868 check here ▶ [ ]	**b**	**Balance Due** (Form 8868, Part I, line 3c or Part II, line 8c)	**5b**	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

[X] I authorize COHNREZNICK LLP (**ERO firm name**) to enter my PIN 1 4 2 4 6 as my signature

Enter five numbers, but do not enter all zeros

on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ Date ▶ 06/30/2015

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

2 7 1 0 0 5 2 2 1 4 7

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Information about Form 990 and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning , 2014, and ending , 20

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

C Name of organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Doing business as:

Number and street (or P.O. box if mail is not delivered to street address): 11000 BROKEN LAND PARKWAY

Room/suite: 700

City or town, state or province, country, and ZIP or foreign postal code: COLUMBIA, MD 21044

D Employer identification number: 52-1231931

E Telephone number: (410) 964-1230

G Gross receipts $: 69,870,503.

F Name and address of principal officer: TERRI LUDWIG, CEO
11000 BROKEN LAND PARKWAY#700 COLUMBIA, MD 21044

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.ENTERPRISECOMMUNITY.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1980 **M** State of legal domicile: MD

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO CREATE OPPORTUNITIES FOR LOW- AND MODERATE-INCOME PEOPLE THROUGH AFFORDABLE HOUSING IN DIVERSE, THRIVING COMMUNITIES.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	26.
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24.
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	266.
6	Total number of volunteers (estimate if necessary)	6	65.
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	53,644,487.	55,656,679.
9	Program service revenue (Part VIII, line 2g)	10,743,848.	8,873,009.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	522,984.	483,658.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,823,398.	4,288,490.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	68,734,717.	69,301,836.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	14,692,266.	16,995,692.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	25,626,420.	27,364,338.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	493,437.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,025,842.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	18,010,708.	23,701,689.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	58,329,394.	68,555,156.
19	Revenue less expenses. Subtract line 18 from line 12	10,405,323.	746,680.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	241,632,111.	264,581,345.
21	Total liabilities (Part X, line 26)	26,964,748.	30,324,302.
22	Net assets or fund balances. Subtract line 21 from line 20	214,667,363.	234,257,043.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date

▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
ANNE SCHRANTZ , CPA				P00230625

Firm's name ▶ COHNREZNICK LLP — Firm's EIN ▶ 22-1478099

Firm's address ▶ 7501 WISCONSIN AVENUE, SUITE 400E BETHESDA, MD 20814-6583 — Phone no. 301-652-9100

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2014)

JSA
4E1010 1.000

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 58,860,343. including grants of $ 16,995,692.) (Revenue $ 8,873,009.)

ENTERPRISE AND ITS SUBSIDIARIES HAVE RAISED AND INVESTED MORE THAN $18.6 BILLION IN EQUITY, GRANTS, AND LOANS TO CREATE NEARLY 340,000 AFFORDABLE HOMES.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 58,860,343.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
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	X	
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
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	X	
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
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		X
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	X	
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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		X
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		X
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	X	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
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		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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	X	
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 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		X
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		X
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		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV.*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	X	
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	X	
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	232		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	
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 .	2a	266		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*	3b			
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			X
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).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26			
	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 24			
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? . . .	5		X
6	Did the organization have members or stockholders?	6		X
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		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . .	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 2

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [X] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

CRAIG MELLENDICK 11000 BROKEN LAND PARKWAY#700 COLUMBIA, MD 21044 410-772-6016

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

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

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

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

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TERRI L. LUDWIG TRUSTEE, PRESIDENT & CEO	40.00	X		X				539,007.	0	38,488.
(2) BILL BECKMANN TRUSTEE	1.00	X						0	0	0
(3) RAYMOND CHRISTMAN TRUSTEE	1.00	X						0	0	0
(4) SHEILA CROWLEY TRUSTEE	1.00	X						0	0	0
(5) EDWARD NORTON TRUSTEE	1.00	X						0	0	0
(6) TONY SALAZAR TRUSTEE	1.00	X						0	0	0
(7) J RONALD TERWILLIGER TRUSTEE, CHAIRMAN	1.00	X						0	0	0
(8) CHARLES R. WERHANE TRUSTEE	40.00	X		X				885,189.	0	117,643.
(9) ADAM R. FLATTO TRUSTEE	1.00	X						0	0	0
(10) DORA LEONG GALLO TRUSTEE	1.00	X						0	0	0
(11) PRISCILLA ALMODOVAR TRUSTEE	1.00	X						0	0	0
(12) GREGORY BAER TRUSTEE	1.00	X						0	0	0
(13) MARIA BARRY TRUSTEE	1.00	X						0	0	0
(14) JOSEPH BROWN TRUSTEE	1.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) RICK LAZIO TRUSTEE	1.00	X						0	0	0
16) RICHARD COLES TRUSTEE	1.00	X						0	0	0
17) RAPHAEL BOSTIC TRUSTEE	1.00	X						0	0	0
18) LANCE FORS TRUSTEE	1.00	X						0	0	0
19) JOHN M. REILLY TRUSTEE	1.00	X						0	0	0
20) CHRISTOPHER COLLINS TRUSTEE	1.00	X						0	0	0
21) BETH MYERS TRUSTEE	1.00	X						0	0	0
22) BABARA POPPE TRUSTEE	1.00	X						0	0	0
23) DINA HABIB POWELL TRUSTEE	1.00	X						0	0	0
24) RONALD RATNOR TRUSTEE	1.00	X						0	0	0
25) MEGAN SANDEL TRUSTEE	1.00	X						0	0	0
1b Sub-total ▶								1,424,196.	0	156,131.
c Total from continuation sheets to Part VII, Section A ▶								9,582,521.	391,459.	1,387,653.
d Total (add lines 1b and 1c) ▶								11,006,717.	391,459.	1,543,784.

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

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	X	
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 individual*	4	X	
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 J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
26) ROY SWAN TRUSTEE	1.00	X						0	0	0
27) JEFFREY SCHAFFER VICE PRESIDENT	40.00			X				220,967.	0	39,067.
28) WILLIAM R. FREY SENIOR VICE PRESIDENT	40.00			X				242,522.	0	33,972.
29) RICHARD D. GROSS VICE PRESIDENT	40.00			X				228,907.	0	37,319.
30) MARK MCDERMOTT VICE PRESIDENT	40.00			X				210,260.	0	39,850.
31) LORI MICHELLE CHATMAN SENIOR VICE PRESIDENT	40.00			X				279,381.	0	19,890.
32) MICHAEL MCNEELY SR VP	40.00			X				324,340.	0	19,890.
33) ABBY JO SIGAL SENIOR VICE PRESIDENT	40.00			X				166,395.	0	15,459.
34) ALAN SCOTT ANDERSON VICE PRESIDENT	40.00			X				185,603.	0	39,622.
35) ALAZNE MIREN SOLIS SENIOR VICE PRESIDENT	40.00			X				319,252.	0	35,195.
36) FAITH E. THOMAS SVP &GENERAL COUNSEL/SECRETARY	40.00			X				263,972.	0	34,023.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	X	
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 individual*	X	
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 J for such person*		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
37) MATTHEW D. HOFFMAN VICE PRESIDENT	40.00			X				186,226.	0	40,501.
38) MEAGHAN E. VLKOVIC VICE PRESIDENT	40.00			X				181,431.	0	35,165.
39) AMALIA M. KASTBERG VICE PRESIDENT	40.00			X				262,167.	0	43,453.
40) MICHELLE WHETTEN VICE PRESIDENT	40.00			X				201,115.	0	22,193.
41) DAVID CHARLES BOWERS VICE PRESIDENT	40.00			X				203,847.	0	23,155.
42) EDWARD DAVID MANEKIN VICE PRESIDENT	40.00			X				169,005.	0	38,586.
43) MARY ANN LEONARD VICE PRESIDENT	40.00			X				201,966.	0	31,825.
44) KEITH E. FAIREY VICE PRESIDENT	40.00			X				240,458.	0	36,703.
45) ALEX S. AVITABILE VICE PRESIDENT	40.00			X				184,300.	0	31,466.
46) PETRA D. MONTAQUE VICE PRESIDENT	40.00			X				167,974.	0	25,350.
47) KAREN LADO VICE PRESIDENT	40.00			X				163,655.	0	31,659.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	X	
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 individual*	4	X	
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 J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
48) KATHERINE W. SWENSON VICE PRESIDENT	40.00			X				175,860.	0	33,310.
49) ANTHONY JOSEPH DISPIGNO SENIOR VICE PRESIDENT	40.00			X				307,835.	0	45,511.
50) ROBERT S. GROSSINGER VICE PRESIDENT	40.00			X				206,706.	0	14,977.
51) ANDREW EDWARD GEER VICE PRESIDENT	40.00			X				179,712.	0	36,442.
52) MELINDA J. POLLACK VICE PRESIDENT	40.00			X				183,222.	0	33,779.
53) MARY JO BARRANCO VICE PRESIDENT	40.00			X				222,284.	0	42,883.
54) TIFFANY MANUEL VICE PRESIDENT	40.00			X				172,017.	0	39,215.
55) BENJAMIN NICHOLS VICE PRESIDENT	40.00			X				150,809.	0	34,398.
56) VICTORIA SUSAN SHIRE VICE PRESIDENT	40.00			X				144,902.	0	37,285.
57) DIANE YENTAL VICE PRESIDENT	40.00			X				172,416.	0	36,473.
58) ANGELA BOYD VICE PRESIDENT	40.00			X				162,131.	0	17,972.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	X	
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 individual*	4	X	
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 J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
59) MARYANN LESHIN VICE PRESIDENT	40.00			X				167,328.	0	36,168.
60) LAUREL BLACHFORD VICE PRESIDENT	40.00			X				252,319.	0	0
61) ANDREW JOHNSTON VICE PRESIDENT	40.00			X				150,489.	85,232.	17,676.
62) CRAIG MELLEDICK SENIOR VP, TREASURER, & CFO	40.00			X				256,314.	237,814.	38,489.
63) JUDITH KENDE VICE PRESIDENT	40.00			X				123,707.	0	7,749.
64) BRYAN PITTENGER VICE PRESIDENT	40.00			X				103,180.	68,364.	30,503.
65) EUN SHIN VICE PRESIDENT	40.00			X				187,230.	0	15,048.
66) JACQUELINE WAGGONER DRM & DEPUTY DIRECTOR	40.00					X		180,938.	0	21,966.
67) JON SEARLES DEPUTY DIRECTOR & PR DIRECTOR	40.00					X		180,138.	0	19,453.
68) ANDREW JAKABOVICS SENIOR DIRECTOR	40.00					X		172,838.	0	34,497.
69) CATHERINE HYDE SENIOR DIRECTOR	40.00					X		149,096.	0	35,708.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	X	
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 individual*	4	X	
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 J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
70) KAREN LORD CONTROLLER	40.00					X		148,815.	0	17,692.
71) NAOMI S. BAYER SENIOR VICE PRESIDENT	40.00						X	318,867.	0	41,216.
72) PAUL M. CUMMINGS SENIOR VICE PRESIDENT	40.00						X	327,457.	0	7,569.
73) THOMAS OSBODA VICE PRESIDENT	40.00						X	182,168.	49.	17,331.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

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

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3	X	
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 individual*	4	X	
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 J for such person*	5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

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

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

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

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

Part X Balance Sheet

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

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

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	69,301,836.
2	Total expenses (must equal Part IX, column (A), line 25)	2	68,555,156.
3	Revenue less expenses. Subtract line 2 from line 1	3	746,680.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	214,667,363.
5	Net unrealized gains (losses) on investments	5	0
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	18,843,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	234,257,043.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X	
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?	3a	X	
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	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

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

Part I **Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

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

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

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

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [ ] An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

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

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

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

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

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

f Enter the number of supported organizations . . . . . [ ]

g Provide the following information about the supported organization(s).

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

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

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	30,253,043.	44,273,272.	45,074,369.	53,644,487.	55,656,679.	228,901,850.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,111,324.	6,653,836.	5,536,575.	4,691,954.	5,105,125.	27,098,814.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11 **Total support.** Add lines 7 through 10						256,000,664.

12 Gross receipts from related activities, etc. (see instructions) . . . . . 12 51,260,317.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 86.26%

15 Public support percentage from 2013 Schedule A, Part II, line 14 . . . . . 15 82.57%

16a **33 1/3% support test - 2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☒

b **33 1/3% support test - 2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test - 2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test - 2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2013** Schedule A, Part III, line 17	18	%

19a **33 1/3 % support tests - 2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3 % support tests - 2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***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)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***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? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI****, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**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 I 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		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***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		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***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		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	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		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (****see instructions****):*

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
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		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***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.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

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

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

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

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

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount**. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

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

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

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

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2014

Name of the organization
ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number
52-1231931

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	[X] 501(c)(03) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	US DEPARTMENT OF HOUSING & URBAN DEV 310 MARYLAND AVENUE WASHINGTON, DC 20024	$ 22,547,309.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	THE KENDEDA FUND 501 SILVERSIDE ROAD SUITE 123 WILMINGTON, DE 19808	$ 1,670,514.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	ECI GRANT 11000 BROKEN LAND PARKWAY SUITE 700 COLUMBIA, MD 21044	$ 3,700,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	CPD OFFICE OF TECHINICAL ASSIST & MGMT 451 7TH STREET SUITE 7218 WASHINGTON, DC 20410	$ 4,142,893.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	J.P. MORGAN CHASE 270 PARK AVENUE, 38TH FLOOR NEW YORK, NY 10017	$ 1,824,676.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number 52-1231931

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number 52-1231931

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $ ____________
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
----			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
----			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
----			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
----			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No. 1545-0047

2014

Open to Public Inspection

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

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

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

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

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

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

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

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

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

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . ☐ Yes ☐ No
4a Was a correction made? . . . . . ☐ Yes ☐ No
b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ $
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ $
4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	165,316.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	592,560.	
c Total lobbying expenditures (add lines 1a and 1b)	757,876.	
d Other exempt purpose expenditures	67,797,279.	
e Total exempt purpose expenditures (add lines 1c and 1d)	68,555,155.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0	0
i Subtract line 1f from line 1c. If zero or less, enter -0-	0	0

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.

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) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	645,324.	877,469.	584,872.	757,876.	2,865,541.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	24,596.	26,718.	25,385.	165,316.	242,015.

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

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

Part IV **Supplemental Information** *(continued)*

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

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

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of a historically important land area
☐ Preservation of a certified historic structure

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

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

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

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenue included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☒

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

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

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

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

Part VII Investments - Other Securities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶		

Part VIII Investments - Program Related.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) ENTERPRISE COMMUNITY INVEST.	119,084,137.	FMV
(2) OTHERS	1,040,828.	FMV
(3) EHOP	224,249.	FMV
(4) CORNERSTONE	3,531,909.	FMV
(5) ENTERPRISE COMMUNITY LOAN FUND	40,553,109.	FMV
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶	164,434,232.	

Part IX Other Assets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ALLOWANCE AGIANST RECEIVABLE	18,701,853.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	18,701,853.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information.

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

SEE PAGE 5

Part XIII Supplemental Information *(continued)*

FUNDS HELD FOR OTHERS

THE ORGANIZATION HOLDS ASSETS, PRIMARILY CASH AND CASH EQUIVALENTS, FOR THIRD PARTIES PURSUANT TO FISCAL AGENCY AND SIMILAR CONTRACTUAL ARRANGEMENTS. THE ASSETS HELD ARE CLASSIFIED AS RESTRICTED AND THE RELATED LIABILITY IS INCLUDED IN FUNDS HELD FOR OTHERS.

FEDERAL INCOME TAXES

ENTERPRISE COMMUNITY PARTNERS, INC. DID NOT HAVE ANY UNRELATED BUSINESS INCOME DURING THE YEAR ENDED DECEMBER 31, 2014. ACCORDINGLY, NO PROVISION OR BENEFIT FROM INCOME TAXES HAS BEEN RECORDED.

UNCERTAIN TAX POSITIONS

FOR THE YEARS ENDED DECEMBER 31, 2014 AND 2013, THE ORGANIZATION DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE COMBINED FINANCIAL STATEMENTS.

SCHEDULE G
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization
ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number
52-1231931

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

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

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ **Yes** ☐ **No**

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
1 SOCIAL CAPITAL PARTNERSHIPS	FUNDRAISING CAMPAIGN		X		319,135.	
2 LYNDA A OSHINSKIE HOUSEHOLD	EVENT CONSULTING		X		37,350.	
3 ANNE BARNEY	WRITING SERVICES		X		18,664.	
4 SOPHIST PRODUCTIONS	FUNDRAISING CAMPAIGN		X		5,750.	
5						
6						
7						
8						
9						
10						
Total ▶					380,899.	

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

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

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

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

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

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

Name ▶ _____

Address ▶ _____

15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ $ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

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

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HEARTLAND HOUSING, INC. 208 S. LASALLE BROOKLYN, NY 11231	36-3642952	501(C)(3)	741,163.				CAPACITY BUILDING
(2) NUESTRA COMUNIDAD DEVELOPMENT CORPORATION 56 WARREN STREET GALLUP, NM 87305	04-2741543	501(C)(3)	441,857.				CAPACITY BUILDING
(3) PATHSTONE CORPORATION 400 EAST AVENUE SANTA MONICA, CA 90401	16-0984913	501(C)(3)	428,977.				CAPACITY BUILDING
(4) CLEVELAND HOUSING NETWORK, INC 2999 PAYNE AVENUE BILOXI, MS 39530	34-1346763	501(C)(3)	405,991.				CAPACITY BUILDING
(5) THE SAN FRANCISCO FOUNDATION ONE EMBARCADERO CENTER SEATTLE, WA 98104-23	01-0679337	501(C)(3)	375,000.				CAPACITY BUILDING
(6) CAMBA HOUSING VENTURES, INC. 1720 CHURCH AVENUE NEW YORK, NY 10002	55-0881162	501(C)(3)	357,392.				CAPACITY BUILDING
(7) PROVIDENCE COMMUNITY HOUSING 1050 SOUTH JEFFERSON DAVIS PARKWAY CHRISTIA	20-4627275	501(C)(3)	306,152.				CAPACITY BUILDING
(8) HANAC, INC. 49 WEST 45TH STREET SEATTLE, WA 98101	11-2290832	501(C)(3)	300,000.				CAPACITY BUILDING
(9) ENTERPRISE LOUISIANA LOAN FUND 643 MAGAZINE STREET CHICAGO, IL 60637	47-1718653	501(C)(3)	297,044.				CAPACITY BUILDING
(10) MONTGOMERY HOUSING PARTNERSHIP, INC. 12200 TECH ROAD WAYNE, WV 25570	52-1631939	501(C)(3)	277,749.				CAPACITY BUILDING
(11) JUBILEE HOUSING, INC. 1640 COLUMBIA ROAD, NW SEATTLE, WA 98144	52-0986261	501(C)(3)	267,387.				CAPACITY BUILDING
(12) FAMICOS FOUNDATION, INC. 1325 ANSEL ROAD CHICAGO, IL 60637	34-1053534	501(C)(3)	255,373.				CAPACITY BUILDING

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

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COMMONBOND COMMUNITIES 328 KELLOGG BLVD. W SEATTLE, WA 98122-2014	41-1260469	501(C)(3)	253,370.				CAPACITY BUILDING
(2) NEIGHBORHOOD PROGRESS, INC. 11327 SHAKER BOULEVARD ST. PAUL, MN 55116	34-1611055	501(C)(3)	205,000.				CAPACITY BUILDING
(3) EL CENTRO DE LA RAZA DEVELOPMENT OFFICE CHICAGO, IL 60637	91-0899927	501(C)(3)	204,817.				CAPACITY BUILDING
(4) RENAISSANCE NEIGHBORHOOD DEVELOPMENT CORPOR 4162 CANAL STREET NEW YORK, NY 10032	20-8947208	501(C)(3)	197,649.				CAPACITY BUILDING
(5) PHI ONE TRINITY DRIVE EAST SANTA MONICA, CA 904	23-1381404	501(C)(3)	161,271.				CAPACITY BUILDING
(6) CATHEDRAL SQUARE CORPORATION 412 FARRELL STREET BROOKLYN, NY 11224	03-0264362	501(C)(3)	160,723.				CAPACITY BUILDING
(7) HARMONY NEIGHBORHOOD DEVELOPMENT 3301 LASALLE STREET MIAMI, FL 33135	72-1436907	501(C)(3)	150,509.				CAPACITY BUILDING
(8) A NEW LEAF 868 E. UNIVERSITY DRIVE PHILADELPHIA, PA 19	86-0256667	501(C)(3)	150,000.				CAPACITY BUILDING
(9) HOUSING INITIATIVE PARTNERSHIP 6525 BELCREST ROAD SOUTH BURLINGTON, VT 054	52-1596171	501(C)(3)	130,000.				CAPACITY BUILDING
(10) DETROIT SHOREWAY COMMUNITY DEV. ORG. 6516 DETROIT AVENUE SAN FRANCISCO, CA 94110	23-7376130	501(C)(3)	129,698.				CAPACITY BUILDING
(11) SATELLITE AFFORDABLE HOUSING ASSOCIATES 1521 UNIVERSITY AVENUE TRUJILLO ALTO, PR 00	94-3031375	501(C)(3)	128,026.				CAPACITY BUILDING
(12) PARK HEIGHTS RENAISSANCE, INC. 3939 REISTERSTOWN ROAD GALLUP, NM 87305	77-0673126	501(C)(3)	124,459.				CAPACITY BUILDING

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

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

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHP 229 PEACHTREE STREET, NE ARLINGTON, VA 2220	58-1946632	501(C)(3)	113,679.				CAPACITY BUILDING
(2) MERCY HOUSING CALIFORNIA 1360 MISSION STREET CLEVELAND, OH 44114	94-3081666	501(C)(3)	111,352.				CAPACITY BUILDING
(3) ATLANTA REGIONAL COMMISSION 40 COURTLAND STREET, NE HOGANSBURG, NY 1365	58-6002324	501(C)(3)	105,000.				CAPACITY BUILDING
(4) EAST LA COMMUNITY CORPORATION 530 SOUTH BOYLE AVENUE RAPID CITY, SD 57701	95-4531076	501(C)(3)	103,569.				CAPACITY BUILDING
(5) ENTERPRISE COMMUNITY LOAN FUND 70 CORPORATE CENTER CHICAGO, IL 60637	52-0192004	501(C)(3)	103,372.				CAPACITY BUILDING
(6) MIDTOWN DETROIT, INC. 3939 WOODWARD WAYNE, WV 25570	45-4582324	501(C)(3)	102,564.				CAPACITY BUILDING
(7) ST. BERNARD PROJECT 8324 PARC PLACE CLEVELAND, OH 44102	26-2189665	501(C)(3)	100,422.				CAPACITY BUILDING
(8) 1100 TULANE, LLC 4162 CANAL STREET NEW ORLEANS, LA 70119-594	46-3007675	LLC	96,037.				CAPACITY BUILDING
(9) CHINATOWN COMMUNITY DEVELOPMENT CENTER 1525 GRANT AVENUE ATLANTA, GA 30303	94-2514053	501(C)(3)	94,751.				CAPACITY BUILDING
(10) PROJECT HOMECOMING, INC 2221 FILMORE AVE CHRISTIANSBURG, VA 24073	32-0312933	501(C)(3)	89,674.				CAPACITY BUILDING
(11) ARCH COMMUNITY HOUSING TRUST, INC. P.O. BOX 1292 MESA, AZ 85203	75-3167069	501(C)(3)	89,194.				CAPACITY BUILDING
(12) OFFICE OF RURAL & FARMWORKER HOUSING 1400 SUMMITVIEW AVE. #203 GALLUP, NM 87305	91-1218499	501(C)(3)	86,083.				CAPACITY BUILDING

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

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

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(1) LITTLE TOKYO SERVICE CENTER CDC 231 EAST THIRD STREET SAN FRANCISCO, CA 941	95-3451280	501(C)(3)	44,829.				CAPACITY BUILDING
(2) EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATIO 1825 SAN PABLO AVENUE RAPID CITY, SD 57701	51-0171851	501(C)(3)	84,206.				CAPACITY BUILDING
(3) SAINT PAUL RIVERFRONT CORPORATION 25 SIXTH STREET WEST SAN JUAN, PR 00940-130	36-3350557	501(C)(3)	84,152.				CAPACITY BUILDING
(4) TENDERLOIN NEIGHBORHOOD DEVELOP. CORP. 201 EDDY STREET DORCHESTER, MA 02125	94-2761808	501(C)(3)	81,453.				CAPACITY BUILDING
(5) MOUNTAIN HOUSING OPPORTUNITIES 64 CLINGMAN AVENUE WAYNE, WV 25570	58-1816998	501(C)(3)	81,316.				CAPACITY BUILDING
(6) SELFHELP COMMUNITY SERVICES, INC. 520 EIGHTH AVENUE TRUJILLO ALTO, PR 00977	13-1624178	501(C)(3)	79,999.				CAPACITY BUILDING
(7) EAH, INC. 2169 E. FRANCISCO BOULEVARD CHICAGO, IL 606	94-1699153	501(C)(3)	77,231.				CAPACITY BUILDING
(8) JEWISH ASSOCIATION FOR SERVICES FOR THE AGE 247 WEST 37TH STREET SYRACUSE, NY 13202	13-2620896	501(C)(3)	75,603.				CAPACITY BUILDING
(9) VANNGUARD URBAN IMPROVEMENT ASSN., INC. 516 MACDONOUGH STREET LOS ANGELES, CA 90033	11-2442042	501(C)(3)	75,000.				CAPACITY BUILDING
(10) SANTO DOMINGO TRIBAL HOUSING AUTHORITY P.O. BOX 10 TRUJILLO ALTO, PR 00977	85-0194331	PUBLIC HSG AUTH	74,517.				CAPACITY BUILDING
(11) SUMMECH COMMUNITY DEV. CORP. 633 PRYOR STREET, SW CLEVELAND, OH 44102	58-1895918	501(C)(3)	74,195.				CAPACITY BUILDING
(12) COMMUNITY HOUSING PARTNERS CORPORATION 930 CAMBRIA ST. SAN FRANCISCO, CA 94110	54-1023025	501(C)(3)	73,699.				CAPACITY BUILDING

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(1) JANE PLACE NEIGHBORHOOD SUSTAINABILITY INIT P.O. BOX 53011 YAKIMA, WA 98908	26-3909820	501(C)(3)	72,248.				CAPACITY BUILDING
(2) NATIVE AMERICAN CONNECTIONS 4520 N. CENTRAL AVENUE THE DALLES, OR 97058	86-0293585	501(C)(3)	71,931.				CAPACITY BUILDING
(3) BELLWETHER HOUSING 1651 BELLEVUE AVENUE DENVER, CO 80209	91-1116960	501(C)(3)	70,127.				CAPACITY BUILDING
(4) COALFIELD DEVELOPMENT CORPORATION P.O. BOX 1133 NEW YORK, NY 10035	26-3836207	501(C)(3)	68,361.				CAPACITY BUILDING
(5) JERICHO ROAD EPISCOPAL HOUSING INITIATIVE 2919 ST. CHARLES AVENUE SYRACUSE, NY 13202	20-8419678	501(C)(3)	67,439.				CAPACITY BUILDING
(6) RURAL HOUSING DEVELOPMENT CORPORATION 709 NORTH 1890 WEST LAWRENCEVILLE, GA 30043	87-0622732	501(C)(3)	66,395.				CAPACITY BUILDING
(7) HOUSING VISIONS UNLIMITED, INC. 1201 E. FAYETTE STREET SOUTH BURLINGTON, VT	16-1598458	501(C)(3)	66,323.				CAPACITY BUILDING
(8) DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORA 594 COLUMBIA ROAD SAN FRANCISCO, CA 94110	04-2681632	501(C)(3)	65,997.				CAPACITY BUILDING
(9) TAPESTRY DEVELOPMENT GROUP 321 W. HILL STREET DORCHESTER, MA 02125	27-2814156	501(C)(3)	65,818.				CAPACITY BUILDING
(10) CARRFOUR SUPPORTIVE HOUSING, INC. 1398 SOUTHWEST 1ST STREET BALTIMORE, MD 212	65-0387766	501(C)(3)	65,500.				CAPACITY BUILDING
(11) COMMUNITY AREA RESOURCE ENTERPRISE, INC. P.O. BOX 4298 SAN FRANCISCO, CA 94110	20-0870956	501(C)(3)	65,409.				CAPACITY BUILDING
(12) PATHSTONE CORPORATION 7 PRINCE STREET LOS ANGELES, CA 90008	16-0984913	501(C)(3)	62,615.				CAPACITY BUILDING

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(1) SERVICES FOR THE UNDERSERVED, INC. 305 SEVENTH AVENUE, 10TH FL TRUJILLO ALTO,	91-1918247	501(C)(3)	62,500.				CAPACITY BUILDING
(2) UNIVERSITY OF DETROIT MERCY 4001 W. MCNICHOLS ROAD OAKLAND, CA 94612-15	38-1360586	501(C)(3)	62,360.				CAPACITY BUILDING
(3) MERCY HOUSING NORTHWEST 2505 THIRD AVENUE CLEVELAND, OH 44114	91-1546525	501(C)(3)	60,460.				CAPACITY BUILDING
(4) NEIGHBORHOOD HOUSING SERVICES OF CHICAGO, I 1279 N. MILWAUKEE AVENUE THE DALLES, OR 970	23-7443009	501(C)(3)	58,983.				CAPACITY BUILDING
(5) FOUNDATION COMMUNITIES, INC. 3036 SOUTH 1ST STREET CLEVELAND, OH 44104	74-2563260	501(C)(3)	58,818.				CAPACITY BUILDING
(6) THE LOWER 9TH WARD NEIGHBORHOOD EMPOWERMENT 1123 LAMANCHE STREET DORCHESTER, MA 02125	76-0827045	501(C)(3)	58,065.				CAPACITY BUILDING
(7) NATIONAL HOUSING TRUST 1101 30TH STREET, NW THE DALLES, OR 97058	52-1477599	501(C)(3)	58,000.				CAPACITY BUILDING
(8) JUBILEE BALTIMORE, INC. 1228 N. CALVERT STREET SEATTLE, WA 98144	52-1222237	501(C)(3)	57,029.				CAPACITY BUILDING
(9) SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVENUE CLEVELAND, OH 44102	41-1721815	501(C)(3)	56,781.				CAPACITY BUILDING
(10) FIFTH AVENUE COMMITTEE, INC. 621 DEGRAW STREET NEW ORLEANS, LA 70185	11-2475743	501(C)(3)	56,000.				CAPACITY BUILDING
(11) COMMUNITY CORPORATION OF SANTA MONICA 1423 SECOND STREET SAN FRANCISCO, CA 94110	95-3795161	501(C)(3)	55,780.				CAPACITY BUILDING
(12) CASA DE MARYLAND, INC. 8151 15TH AVENUE NEW ORLEANS, LA 70113	52-1372972	501(C)(3)	55,000.				CAPACITY BUILDING

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(1) HOPEWORKS SOCIAL ENTERPRISES 5830 EVERGREEN WAY PORTLAND, OR 97232	80-0684608	501(C)(3)	53,000.				CAPACITY BUILDING
(2) ROC USA LLC 7 WALL STREET MOAB, UT 84532	35-2319441	501(C)(3)	52,433.				CAPACITY BUILDING
(3) MANNA, INC. 828 EVARTS STREET, NE CLEVELAND, OH 44114	52-1260698	501(C)(3)	51,823.				CAPACITY BUILDING
(4) HOUSING ASSISTANCE COUNCIL 1025 VERMONT AVENUE NW, SOUTH BURLINGTON, V	52-0939288	501(C)(3)	50,701.				CAPACITY BUILDING
(5) LOW INCOME HOUSING INSTITUTE 2407 FIRST AVE, SUITE 200 SAN FRANCISCO, C	94-3155150	501(C)(3)	50,000.				CAPACITY BUILDING
(6) ARCHWAY HOUSING AND SERVICES, INC. P.O. BOX 9189 JACKSONVILLE, FL 32202-3436	84-1335158	501(C)(3)	50,000.				CAPACITY BUILDING
(7) COLUMBUS HOUSING PARTNERSHIP, INC. 562 EAST MAIN STREET SEATTLE, WA 98122-2014	31-1208260	501(C)(3)	50,000.				CAPACITY BUILDING
(8) COMMUNITY INVESTMENT STRATEGIES, INC. 1970 BRUNSWICK AVENUE SAN FRANCISCO, CA 941	22-3346335	501(C)(3)	50,000.				CAPACITY BUILDING
(9) CROW TRIBE OF INDIANS P.O. BOX 159 SAN FRANCISCO, CA 94110	81-0372588	TRIBAL GOV'T	50,000.				CAPACITY BUILDING
(10) EDEN HOUSING, INC. 22645 GRAND STREET CHICAGO, IL 60637	23-1716750	501(C)(3)	50,000.				CAPACITY BUILDING
(11) GILMAN HOUSING TRUST, INC. P.O. BOX 259 CLEVELAND, OH 44104	03-03001520	501(C)(3)	50,000.				CAPACITY BUILDING
(12) HISPANIC HOUSING DEVELOPMENT CORPORATION 325 N. WELLS LANGLEY PARK, MD 20783	36-2889871	501(C)(3)	50,000.				CAPACITY BUILDING

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(1) LEECH LAKE BAND OF OJIBWE HOUSING AUTHORITY 611 ELM AVENUE PORTLAND, OR 97209	41-0913364	501(C)(3)	50,000.				CAPACITY BUILDING
(2) NEIGHBORHOOD NONPROFIT HOUS CORP 195 GOLF COURSE ROAD ST. PAUL, MN 55116	87-0559307	501(C)(3)	50,000.				CAPACITY BUILDING
(3) NEW ECONOMICS FOR WOMEN 303 SOUTH LOMA DRIVE ST. PAUL, MN 55102	95-3969029	501(C)(3)	50,000.				CAPACITY BUILDING
(4) NORTHWEST MONTANA HUMAN RESOURCES 214 MAIN STREET GALLUP, NM 87305	81-0366018	501(C)(3)	50,000.				CAPACITY BUILDING
(5) ROSEBUD ECONOMIC DEVELOPMENT CORPORATION P.O. BOX 236 BALTIMORE, MD 21215	46-0454387	501(C)(3)	50,000.				CAPACITY BUILDING
(6) SOKAOGAN CHIPPEWA COMMUNITY 3265 INDIAN SETTLEMENT ROAD DENVER, CO 8021	39-1180139	501(C)(3)	50,000.				CAPACITY BUILDING
(7) UMPQUA COMMUNITY DEVELOPMENT CORPORATION 605 SE KANE STREET SAN RAFAEL, CA 94901	93-1057208	501(C)(3)	50,000.				CAPACITY BUILDING
(8) HABITAT FOR HUMANITY OF PUERTO RICO, INC 1357 ASHFORD AVENUE BROOKLYN, NY 11226	66-0515156	501(C)(3)	50,000.				CAPACITY BUILDING
(9) RED CLIFF BAND OF LAKE SUPERIOR CHIPPEWA 88358 PIKE ROAD LAWRENCEVILLE, NJ 08648	39-1178866	501(C)(3)	49,790.				CAPACITY BUILDING
(10) CORPORACION PARA EL DESARROLLO ECONOMICO DE P.O. BOX 1685 SAN FRANCISCO, CA 94110	66-0429762	501(C)(3)	48,871.				CAPACITY BUILDING
(11) LOWER EAST SIDE PEOPLES MUTUAL HOUSING ASSO 228 EAST 3RD STREET SAN FRANCISCO, CA 94133	13-3570544	501(C)(3)	48,582.				CAPACITY BUILDING
(12) SEBCO DEVELOPMENT INC. 885 BRUCKNER BLVD TRUJILLO ALTO, PR 00977	13-2944013	501(C)(3)	47,934.				CAPACITY BUILDING

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(1) UNITY PROPERTIES, INC. 2000 WEST BALTIMORE STREET OAKLAND, CA 9461	52-1857768	501(C)(3)	47,596.				CAPACITY BUILDING
(2) GULF COAST HOUSING PARTNERSHIP, INC. 1610-A ORETHA CASTLE HALEY BOULEVARD BROOKL	20-4216595	501(C)(3)	47,000.				CAPACITY BUILDING
(3) RESOURCES FOR COMMUNITY DEVELOPMENT 2220 OXFORD STREET NEW YORK, NY 10032	94-2952466	501(C)(3)	46,570.				CAPACITY BUILDING
(4) UNIVERSITY CULTURAL CENTER ASSOCIATION 3939 WOODWARD AVENUE OAKLAND, CA 94612-1517	38-2134034	501(C)(3)	45,000.				CAPACITY BUILDING
(5) NATIONAL CHURCH RESIDENCES 2335 NORTH BANK DRIVE DORCHESTER, MA 02124	31-0651750	501(C)(3)	43,839.				CAPACITY BUILDING
(6) CASCADIA BEHAVIORAL HEALTHCARE, INC. 847 NE 19TH AVENUE NEW ORLEANS, LA 70113	93-0770054	501(C)(3)	43,296.				CAPACITY BUILDING
(7) HABITAT FOR HUMANITY OF THE CHESAPEAKE, INC 3741 COMMERCE DRIVE BROOKLYN, NY 11226	52-1226188	501(C)(3)	41,000.				CAPACITY BUILDING
(8) WEST ANGELES COMMUNITY DEVELOPMENT CORPORAT 6028 CRENSHAW BOULEVARD LOS ANGELES, CA 900	95-4486925	501(C)(3)	40,665.				CAPACITY BUILDING
(9) BERNAL HEIGHTS NEIGHBORHOOD CENTER 515 CORTLAND AVE DENVER, CO 80209	94-2536500	501(C)(3)	40,000.				CAPACITY BUILDING
(10) COLUMBIA CASCADE HOUSING CORPORATION 312 COURT STREET BALTIMORE, MD 21202	94-3111736	501(C)(3)	40,000.				CAPACITY BUILDING
(11) HUMAN SOLUTIONS, INC. 12350 SE POWELL BOULEVARD SOUTH BURLINGTON,	93-0977166	501(C)(3)	40,000.				CAPACITY BUILDING
(12) SINGLE ROOM OCCUPANCY HOUSING CORPORATION 1055 W. 7TH STREET TRUJILLO ALTO, PR 00977	95-3909215	501(C)(3)	40,000.				CAPACITY BUILDING

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CONSTRUCTION EDUCATION FOUNDATION OF GEORGI 1255 LAKES PARKWAY SAN FRANCISCO, CA 94110	58-2062862	501(C)(3)	39,750.				CAPACITY BUILDING
(2) SANTA FE COMMUNITY HOUSING TRUST P.O. BOX 713 SAN JUAN, PR 00940-1308	85-0392520	501(C)(3)	39,693.				CAPACITY BUILDING
(3) WHITE EARTH BAND OF CHIPPEWA INDIANS 35500 EAGLEVIEW ROAD DETROIT, MI 48207	41-1737979	TRIBAL GOV'T	38,666.				CAPACITY BUILDING
(4) LINC HOUSING CORPORATION 555 E . OCEAN BOULEVARD ATLANTA, GA 30316	33-0578620	501(C)(3)	38,650.				CAPACITY BUILDING
(5) SKID ROW HOUSING TRUST 1317 EAST SEVENTH STREET CROW AGENCY, MT 59	95-4205316	501(C)(3)	38,508.				CAPACITY BUILDING
(6) HANCOCK RESOURCE CENTER 454 HIGHWAY 90 MIAMI, FL 33135	26-3648017	501(C)(3)	38,120.				CAPACITY BUILDING
(7) ROBISON JEWISH HOME 6125 SW BOUNDARY STREET WASHINGTON, DC 2001	93-0386852	501(C)(3)	37,546.				CAPACITY BUILDING
(8) HOUSING COUNSELING SERVICES 2410 17TH STREET, NW SOUTH BURLINGTON, VT 0	52-0958568	501(C)(3)	37,480.				CAPACITY BUILDING
(9) MI CASA, INC. 6230 3RD STREET, NW CLEVELAND, OH 44114	52-1796840	501(C)(3)	37,480.				CAPACITY BUILDING
(10) RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC. NEW YORK, NY 10032	11-2453853	501(C)(3)	37,289.				CAPACITY BUILDING
(11) MENTAL HEALTH SERVICES FOR HOMELESS PERSONS 1744 PAYNE AVENUE CLEVELAND, OH 44114	34-1607734	501(C)(3)	36,908.				CAPACITY BUILDING
(12) NEIGHBORHOOD HOUSING SERVICES OF NEW ORLEAN 4528 FRERET STREET COLUMBUS, OH 43215	72-0801513	501(C)(3)	36,290.				CAPACITY BUILDING

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

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SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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(1) AHC, INC 2230 NORTH FAIRFAX DRIVE MESA, AZ 85203	54-1026365	501(C)(3)	36,195.				CAPACITY BUILDING
(2) ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSIN 2704 N. PERSHING DRIVE JACKSONVILLE, FL 322	54-1515133	501(C)(3)	35,057.				CAPACITY BUILDING
(3) 1260 HOUSING DEVELOPMENT CORPORATION 2042-48 ARCH STREET NEW ORLEANS, LA 70119-5	23-2536730	501(C)(3)	35,000.				CAPACITY BUILDING
(4) URBAN EDGE HOUSING CORPORATION 1542 COLUMBUS AVENUE OAKLAND, CA 94612-1517	22-2483475	501(C)(3)	35,000.				CAPACITY BUILDING
(5) BROADMOOR DEVELOPMENT CORPORATION P.O. BOX 13369 NEW YORK, NY 10002	20-4885751	501(C)(3)	34,869.				CAPACITY BUILDING
(6) EL BARRIO'S OPERATION FIGHTBACK, INC. 413 E. 120TH STREET CHICAGO, IL 60637	13-3248777	501(C)(3)	34,690.				CAPACITY BUILDING
(7) GREATER ROCHESTER HOUSING PARTNERSHIP 183 E. MAIN STREET BROOKLYN, NY 11226	16-1399793	501(C)(3)	34,145.				CAPACITY BUILDING
(8) HEALTHY NEIGHBORHOODS, INC. 2 E. READ STREET BROOKLYN, NY 11231	30-0272104	501(C)(3)	32,437.				CAPACITY BUILDING
(9) CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORP 587 WASHINGTON STREET NEW YORK, NY 10035	04-2752507	501(C)(3)	32,230.				CAPACITY BUILDING
(10) SELF-HELP HOUSING CORPORATION OF HAWAII 1427 DILLINGHAM BOULEVARD TRUJILLO ALTO, PR	99-0222078	501(C)(3)	32,200.				CAPACITY BUILDING
(11) GRACE ENGLISH EVANGELICAL LUTHERAN CONGREGA 9 CALLE RODRIGUEZ SERRA 3A BROOKLYN, NY 112	66-0527275-	501(C)(3)	31,990.				CAPACITY BUILDING
(12) EASTERN MARKET CORPORATION 2934 RUSSELL NEW YORK, NY 10001	32-0030432	501(C)(3)	31,853.				CAPACITY BUILDING

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(1) TENEMOS QUE RECLAMAR Y UNIDOS SALVAR LA TIE 4331 SOUTH MAIN STREET DORCHESTER, MA 02125	42-1687057	501(C)(3)	31,811.				CAPACITY BUILDING
(2) LINC HOUSING CORPORATION 110 PINE AVENUE, SUITE 500 PORTLAND, OR 972	33-0578620	501(C)(3)	31,354.				CAPACITY BUILDING
(3) BURTEN, BELL, CARR DEVELOPMENT, INC. 7201 KINSMAN ROAD NEW YORK, NY 10002	34-1657533	501(C)(3)	31,078.				CAPACITY BUILDING
(4) GREENWOOD LEFLORE CARROLL ECONOMIC DEVELOPM 402 HIGHWAY 82 BYPASS BROOKLYN, NY 11226	64-0640864	501(C)(3)	30,672.				CAPACITY BUILDING
(5) MISSION ECONOMIC DEVELOPMENT AGENCY 2301 MISSION STREET WAYNE, WV 25570	51-0187791	501(C)(3)	30,000.				CAPACITY BUILDING
(6) SLAVIC VILLAGE DEVELOPMENT 5620 BROADWAY AVENUE CROW AGENCY, MT 59022	34-1344279	501(C)(3)	30,000.				CAPACITY BUILDING
(7) ST. VINCENT DE PAUL SOCIETY OF LANE COUNTY VOCATIONAL SERVICE CLEVELAND, OH 44102	93-0454786	501(C)(3)	30,000.				CAPACITY BUILDING
(8) LA PLATA HOMES FUND 12[illegible] E 9TH STREET PORTLAND, OR 97209	80-0266636	501(C)(3)	29,857.				CAPACITY BUILDING
(9) FIRST COMMUNITY HOUSING, INC. 75 EAST SANTA CLARA STREET NEW ORLEANS, LA	77-0119210	501(C)(3)	29,820.				CAPACITY BUILDING
(10) INNOVATIVE HOUSING, INC. 219 NW SECOND AVENUE SOUT[illegible] BURLINGTON, VT 0	93-0877440	501(C)(3)	29,817.				CAPACITY BUILDING
(11) SOUTHERN UNITED NEIGHBORHOODS 827 TUPELO STREET CLEVELAND, OH 44102	36-4668072	501(C)(3)	29,302.				CAPACITY BUILDING
(12) H STREET COMMUNITY DEVELOPMENT CORPORATION 900 2ND STREET, NE BROOKLYN, NY 11226	52-1356903	501(C)(3)	28,999.				CAPACITY BUILDING

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(1) MQVN CDC 4626 ALCEE FORTIER BOULEVARD DORCHESTER, MA	20-4929600	501(C)(3)	28,500.				CAPACITY BUILDING
(2) PUERTO RICO HOUSING & HUMAN DEVELOPMENT TRU 208 PONCE DE LEON AVENUE CHRISTIANSBURG, VA	66-0648381	501(C)(3)	28,286.				CAPACITY BUILDING
(3) SRO HOUSING CORPORATION 1055 W. 7TH STREET, SUITE 3250 CLEVELAND, O	95-3909215	501(C)(3)	28,284.				CAPACITY BUILDING
(4) HISTORIC EAST BALTIMORE COMMUNITY ACTION CO 1212 N. WOLFE STREET LANGLEY PARK, MD 20783	52-1903732	501(C)(3)	28,000.				CAPACITY BUILDING
(5) COMMUNITY LEAGUE OF THE HEIGHTS, INC. 500 WEST 159TH STREET SAN FRANCISCO, CA 941	13-2564241	501(C)(3)	27,768.				CAPACITY BUILDING
(6) THE VILLAGES COMMUNITY DEVELOPMENT CORPORAT 8109 EAST JEFFERSON AVENUE SEATTLE, WA 9810	36-4598309	501(C)(3)	27,654.				CAPACITY BUILDING
(7) CENTRAL AREA DEVELOPMENT ASSOCIATION 320 17TH AVENUE S ATLANTA, GA 30303-1605	91-1632440	501(C)(3)	27,500.				CAPACITY BUILDING
(8) ASSOCIATED NEIGHBORHOOD DEVELOPMENT 1429 S RAMPART STREET ARLINGTON, VA 22201	72-1334910	501(C)(3)	27,290.				CAPACITY BUILDING
(9) JAMAICA PLAIN NEIGHBORHOOD DEVELOPMENT CORP 31 GERMANIA STREET CHICAGO, IL 60654	04-2652919	501(C)(3)	26,490.				CAPACITY BUILDING
(10) INTERNATIONAL SONORAN DESERT ALLIANCE P.O. BOX 687 SOUTH BURLINGTON, VT 05403	86-0778917	501(C)(3)	25,670.				CAPACITY BUILDING
(11) BOWERY RESIDENTS COMMITTEE, INC. 131 WEST 25TH STREET ARLINGTON, VA 22201	13-2736659	501(C)(3)	25,000.				CAPACITY BUILDING
(12) CHHAYA COMMUNITY DEVELOPMENT 37-43 77TH STREET ATLANTA, GA 30303	11-3580935	501(C)(3)	25,000.				CAPACITY BUILDING

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(1) CITY FIRST HOMES, INC. 1436 U STREET, NW BILOXI, MS 39530	26-2335395	501(C)(3)	25,000.				CAPACITY BUILDING
(2) COMMUNITY DEVELOPMENT COLLABORATIVE OF GREA 110 N 17TH STREET SAN FRANCISCO, CA 94110	31-1595197	501(C)(3)	25,000.				CAPACITY BUILDING
(3) ESPERANZA COMMUNITY HOUSING CORPORATION 2337 SOUTH FIGUEROA STREET CHICAGO, IL 6063	95-4230345	501(C)(3)	25,000.				CAPACITY BUILDING
(4) HOMES FOR AMERICA, INC. 318 SIXTH STREET PORTLAND, OR 97232	52-1901220	501(C)(3)	25,000.				CAPACITY BUILDING
(5) HOUSING OPPORTUNITY DEVELOPMENT CORPORATION 2001 WAUKEGAN ROAD SOUTH BURLINGTON, VT 054	36-3237455	501(C)(3)	25,000.				CAPACITY BUILDING
(6) INDIANTOWN NON PROFIT HOUSING, INC. P.O. BOX 456 SOUTH BURLINGTON, VT 05403	59-1978388	501(C)(3)	25,000.				CAPACITY BUILDING
(7) MERCY HOUSING LAKEFRONT 120 SOUTH LASALLE STREET CLEVELAND, OH 4411	36-3453183	501(C)(3)	25,000.				CAPACITY BUILDING
(8) MHANY MANAGEMENT, INC. 2-4 NEVINS STREET CLEVELAND, OH 44114	72-1303737	501(C)(3)	25,000.				CAPACITY BUILDING
(9) NEWCOURTLAND ELDER SERVICES 6970 GERMANTOWN AVENUE ST. HELENS, OR 97051	23-2734102	501(C)(3)	25,000.				CAPACITY BUILDING
(10) NORTHFIELD COMMUNITY LDC OF STATEN ISLAND, 160 HEBERTON AVENUE GALLUP, NM 87305	13-2974137	501(C)(3)	25,000.				CAPACITY BUILDING
(11) PORTLAND COMMUNITY REINVESTMENT INITIATIVES 6329 N.E. MLK JR. BOULEVARD SANTA MONICA, C	93-1059146	501(C)(3)	25,000.				CAPACITY BUILDING
(12) STEUBEN CHURCHPEOPLE AGAINST POVERTY 16 WEST WILLIAM STREET CLEVELAND, OH 44102	16-1166737	501(C)(3)	25,000.				CAPACITY BUILDING

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(1) THC AFFORDABLE HOUSING, INC. 5101 16TH STREET, NW DORCHESTER, MA 02125	52-1675958	501(C)(3)	25,000.				CAPACITY BUILDING
(2) UNITED CHURCH HOMES OF READING, INC. 50 BAY STATE ROAD SAN RAFAEL, CA 94901	04-2720358	501(C)(3)	25,000.				CAPACITY BUILDING
(3) UNITY OF GREATER NEW ORLEANS 2475 CANAL STREET SAN RAFAEL, CA 94901	72-1222911	501(C)(3)	25,000.				CAPACITY BUILDING
(4) VENICE COMMUNITY HOUSING CORPORATION 720 ROSE AVENUE LOS ANGELES, CA 90033	95-4200761	501(C)(3)	25,000.				CAPACITY BUILDING
(5) MAKE IT RIGHT FOUNDATION 912 MAGAZINE STREET WASHINGTON, DC 20009	26-0723027	501(C)(3)	24,911.				CAPACITY BUILDING
(6) ASSOCIATED CATHOLIC CHARITIES, INC. 320 CATHEDRAL STREET ARLINGTON, VA 22201	52-0591538	501(C)(3)	24,553.				CAPACITY BUILDING
(7) CATHOLIC CHARITIES HOUSING SERVICES 5301 TIETON DRIVE ATLANTA, GA 30303-1605	91-1955616	501(C)(3)	24,500.				CAPACITY BUILDING
(8) SOUTH COUNTY HOUSING CORPORATION 7455 CARMEL STREET CLEVELAND, OH 44102	94-2590572	501(C)(3)	24,058.				CAPACITY BUILDING
(9) CARROLL GARDENS ASSOCIATION, INC. 201 COLUMBIA STREET NEW ORLEANS, LA 70113	11-2573432	501(C)(3)	23,627.				CAPACITY BUILDING
(10) EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY 4800 WEST 57TH STREET CHICAGO, IL 60637	45-0228055	501(C)(3)	23,010.				CAPACITY BUILDING
(11) BACK BAY MISSION, INC. 1012 DIVISION STREET KETCHUM, ID 83340-1292	64-0431066	501(C)(3)	22,351.				CAPACITY BUILDING
(12) COMMUNITY ACTION TEAM 125 NORTH 17TH STREET SAN FRANCISCO, CA 941	93-0554156	501(C)(3)	22,000.				CAPACITY BUILDING

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(1) TRIPLE C HOUSING, INC. 1 DISTRIBUTION WAY SAN RAFAEL, CA 94901	22-2350429	501(C)(3)	21,962.				CAPACITY BUILDING
(2) HABITAT FOR HUMANITY MISSISSIPPI CAPITAL AR P.O. BOX 55634 BROOKLYN, NY 11226	64-0750633	501(C)(3)	21,500.				CAPACITY BUILDING
(3) PEOPLE'S SELF HELP HOUSING CORPORATION 3533 EMPLEO STREET SANTA MONICA, CA 90401	95-2750154	501(C)(3)	21,336.				CAPACITY BUILDING
(4) LUCHA CONTRA EL SIDA, INC. URB VALENCIA NEW YORK, NY 10004	66-0514937	501(C)(3)	21,254.				CAPACITY BUILDING
(5) CAPITOL HILL HOUSING FOUNDATION 1402 THIRD AVENUE BALTIMORE, MD 21201	27-1682190	501(C)(3)	20,365.				CAPACITY BUILDING
(6) HOUSING AUTHORITY OF THE CITY OF JERSEY CIT 400 US HIGHWAY # 1 SOUTH BURLINGTON, VT 05	22-6022501	PUBLIC HSG AUTH	20,224.				CAPACITY BUILDING
(7) FLEMISTER HOUSING DEVELOPMENT CORPORATION 527 WEST 22ND STREET NEW ORLEANS, LA 70185	13-3725394	501(C)(3)	20,000.				CAPACITY BUILDING
(8) HACIENDA CDC 5136 NE 42ND AVENUE SEATTLE, WA 98101	93-0979064	501(C)(3)	20,000.				CAPACITY BUILDING
(9) PROJECT COMMUNITY CONNECTIONS, INC. 321 WEST HILL STREET SPENCER, IA 51301	58-2373779	501(C)(3)	20,000.				CAPACITY BUILDING
(10) SETTLEMENT HOUSING FUND, INC 247 W. 37TH STREET TRUJILLO ALTO, PR 00977	23-7078882	501(C)(3)	19,910.				CAPACITY BUILDING
(11) OHKAY OWINGEH HOUSING AUTHORITY P.O. BOX 1059 GALLUP, NM 87305	85-0446828	501(C)(3)	19,674.				CAPACITY BUILDING
(12) COMPREHENSIVE HOUSING ASSISTANCE, INC. 5809 PARK HEIGHTS AVENUE SAN FRANCISCO, CA	23-7097000	501(C)(3)	19,608.				CAPACITY BUILDING

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WEST HOLLYWOOD COMMUNITY HOUSING CORPORATIO 7530 SANTA MONICA BOULEVARD LOS ANGELES, CA	95-4122368	501(C)(3)	19,466.				CAPACITY BUILDING
(2) CENTER FOR COMMUNITY ALTERNATIVES 115 EAST JEFFERSON STREET ATLANTA, GA 30303	16-1395992	501(C)(3)	19,282.				CAPACITY BUILDING
(3) DOWNTOWN EMERGENCY SERVICE CENTER 515 THIRD AVENUE CHICAGO, IL 60647-5216	91-1275815	501(C)(3)	19,201.				CAPACITY BUILDING
(4) QUEST 35, INC. 878 ROCK STREET, NW SAN FRANCISCO, CA 94102	58-2634738	501(C)(3)	18,923.				CAPACITY BUILDING
(5) ASIAN AMERICANS FOR EQUALITY 108 NORFOLK STREET LOS ANGELES, CA 90067	13-3187792	501(C)(3)	18,750.				CAPACITY BUILDING
(6) JAMBOREE HOUSING CORPORATION 17701 COWAN YAKIMA, WA 98908	33-0413518	501(C)(3)	18,707.				CAPACITY BUILDING
(7) CENTRAL CITY CONCERN 232 NORTHWEST SIXTH AVENUE ATLANTA, GA 3030	93-0728816	501(C)(3)	18,585.				CAPACITY BUILDING
(8) HOLLYWOOD COMMUNITY HOUSING CORPORATION 5020 SANTA MONICA BLVD. LANGLEY PARK, MD 20	95-4198215	501(C)(3)	18,476.				CAPACITY BUILDING
(9) SUPPORTIVE HOUSING COALITION OF NEW MEXICO P.O. BOX 27459 DORCHESTER, MA 02125	85-0439315	501(C)(3)	18,421.				CAPACITY BUILDING
(10) BLACK HILLS AREA HABITAT FOR HUMANITY 825 SAINT JOSEPH STREET DENVER, CO 80209	46-0410933	501(C)(3)	18,378.				CAPACITY BUILDING
(11) CHARIS COMMUNITY HOUSING, INC. 750 GLENWOOD AVENUE, SE ATLANTA, GA 30303-1	58-1649314	501(C)(3)	18,152.				CAPACITY BUILDING
(12) LOTT COMMUNITY DEVELOPMENT CORPORATION 421 EAST 116TH STREET SAN FRANCISCO, CA 941	13-3620671	501(C)(3)	18,062.				CAPACITY BUILDING

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

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

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) A COMMUNITY OF FRIENDS 3701 WILSHIRE BOULEVARD PHILADELPHIA, PA 19	95-4203106	501(C)(3)	17,604.				CAPACITY BUILDING
(2) PATH VENTURES 340 NORTH MADISON AVENUE GALLUP, NM 87305	20-1892523	501(C)(3)	16,895.				CAPACITY BUILDING
(3) COMMONBOND COMMUNITIES 1080 MONTREAL AVE SEATTLE, WA 98122-2014	41-1260469	501(C)(3)	16,739.				CAPACITY BUILDING
(4) UNIVERSITY NEIGHBORHOOD HOUSING PROGRAM 2751 GRAND CONCOURSE OAKLAND, CA 94612-1517	13-3206603	501(C)(3)	16,724.				CAPACITY BUILDING
(5) FAMILY RESOURCES OF NEW ORLEANS 817 N. CLAIBORNE AVENUE BROOKLYN, NY 11216	72-1379740	501(C)(3)	16,413.				CAPACITY BUILDING
(6) AKWESASNE HOUSING AUTHORITY, INC. 378 STATE ROUTE 37 MESA, AZ 85203	16-1387585	PUBLIC HSG AUTH	16,136.				CAPACITY BUILDING
(7) FUNDACION DE DESARROLLO COMUNAL DE PUERTO R P.O. BOX 6300 CLEVELAND, OH 44104	66-0264286	501(C)(3)	16,000.				CAPACITY BUILDING
(8) DEL NORTE NEIGHBORHOOD DEVELOPMENT CORPORAT 2926 ZUNI STREET SAN FRANCISCO, CA 94110	84-0783694	501(C)(3)	15,804.				CAPACITY BUILDING
(9) HOUSING TRUST SILICON VALLEY 95 S MARKET STREET SOUTH BURLINGTON, VT 054	77-0545135	501(C)(3)	15,787.				CAPACITY BUILDING
(10) BRAND NEW BEGINNINGS 113 E. 58TH STREET ARLINGTON, VA 22201	36-3946495	501(C)(3)	15,131.				CAPACITY BUILDING
(11) ABILITY HOUSING OF NORTHEAST FLORIDA, INC. 76 S LAURA STREET LOS ANGELES, CA 90010	59-3087085	501(C)(3)	15,130.				CAPACITY BUILDING
(12) HOLY NATIVITY AND SAINT JOHNS DEVELOPMENT C 4330-D PIMLICO ROAD PORTLAND, OR 97232	52-2215778	501(C)(3)	15,000.				CAPACITY BUILDING

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

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ST. NICKS ALLIANCE 2 KINGLAND AVENUE CLEVELAND, OH 44102	51-0192170	501(C)(3)	14,865.				CAPACITY BUILDING
(2) PRESBYTERIAN VILLAGES OF MICHIGAN 26200 LAHSER ROAD COLUMBUS, OH 43203	38-1387145	501(C)(3)	14,729.				CAPACITY BUILDING
(3) REACH COMMUNITY DEVELOPMENT 4150 SW MOODY AVE. LAWRENCEVILLE, NJ 08648	93-0813981	501(C)(3)	14,710.				CAPACITY BUILDING
(4) BICKERDIKE REDEVLOPMENT CORPORATION 2550 WEST NORTH AVENUE DENVER, CO 80209	23-7087890	501(C)(3)	14,418.				CAPACITY BUILDING
(5) AFFORDABLE LIVING FOR THE AGING 2029 CENTURY PARK EAST LOS ANGELES, CA 900	95-3301874	501(C)(3)	14,353.				CAPACITY BUILDING
(6) GOOD SHEPHERD HOUSING & FAMILY SERVICES, IN 8305 RICHMOND HIGHWAY CLEVELAND, OH 44104	23-7447962	501(C)(3)	14,240.				CAPACITY BUILDING
(7) HO-CHUNK HOUSING & COMMUNITY DEVELOPMENT AG P.O. BOX 730 LANGLEY PARK, MD 20783	39-1979807	501(C)(3)	13,869.				CAPACITY BUILDING
(8) HABITAT FOR HUMANITY SUSQUEHANNA, INC. 205 S. HAYS STREET BROOKLYN, NY 11226	52-1848933	501(C)(3)	13,542.				CAPACITY BUILDING
(9) CATHOLIC CHARITIES HOUSING DEVELOPMENT CORP 721 N. LASALLE STREET BROOKLYN, NY 11224	36-2170821	501(C)(3)	13,000.				CAPACITY BUILDING
(10) MERCY HOUSING, INC. 1999 BROADWAY CLEVELAND, OH 44114	47-0646706	501(C)(3)	13,000.				CAPACITY BUILDING
(11) COMMUNITY PRESERVATION & DEVELOPMENT CORPOR 5513 CONNECTICUT AVENUE SAN FRANCISCO, CA 9	52-1662186	501(C)(3)	12,800.				CAPACITY BUILDING
(12) METROPOLITAN DENVER HOMELESS INITIATIVE 711 PARK AVENUE WEST CLEVELAND, OH 44114	84-1359401	501(C)(3)	12,737.				CAPACITY BUILDING

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

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2014

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Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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(1) BAILEY HOUSE, INC. 1751 PARK AVENUE KETCHUM, ID 83340-1292	13-3165181	501(C)(3)	12,500.				CAPACITY BUILDING
(2) DEVCORP NORTH 1448 W MORSE SAN FRANCISCO, CA 94110	36-3357551	501(C)(3)	12,500.				CAPACITY BUILDING
(3) CORPORACION DEL PROYECTO ENLACE DEL CANO MA P.O. BOX 41308 SAN FRANCISCO, CA 94110	66-0671917	501(C)(3)	12,050.				CAPACITY BUILDING
(4) MERCY HOUSING CALIFORNIA 1500 S. GRAND AVENUE CLEVELAND, OH 44114	94-3081666	501(C)(3)	10,753.				CAPACITY BUILDING
(5) HANNAHVILLE INDIAN COMMUNITY N14911 HANNAHVILLE MIAMI, FL 33135	38-2008182	501(C)(3)	10,072.				CAPACITY BUILDING
(6) BALTIMORE COMMUNITY FOUNDATION 2 EAST READ STREET KETCHUM, ID 83340-1292	23-7180620	501(C)(3)	10,000.				CAPACITY BUILDING
(7) GREYSTON FOUNDATION 21 PARK AVE. BROOKLYN, NY 11226	13-3717310	501(C)(3)	10,000.				CAPACITY BUILDING
(8) LOWER EASTSIDE SERVICE CENTER, INC. 80 MAIDEN LANE SAN FRANCISCO, CA 94133	13-1972876	501(C)(3)	10,000.				CAPACITY BUILDING
(9) HOME AGAIN, INC. 4 OLD RIVER PLACE PORTLAND, OR 97232	20-4526894	501(C)(3)	9,968.				CAPACITY BUILDING
(10) HELLO HOUSING 1901 ROYAL OAKS DRIVE BROOKLYN, NY 11231	14-1870357	501(C)(3)	9,428.				CAPACITY BUILDING
(11) GREENWOOD LEFLORE CARROLL ECONOMIC DEVELOPM 402 HIGHWAY 82 BYPASS BROOKLYN, NY 11226	64-0640864	501(C)(3)	8,945.				CAPACITY BUILDING
(12) NEIGHBORHOOD PROGRESS, INC. 1956 WEST 25 STREET ST. PAUL, MN 55102	34-1611055	501(C)(3)	8,428.				CAPACITY BUILDING

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

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Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

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1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

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(1) FORDHAM BEDFORD HOUSING CORPORATION 2751 GRAND CONCOURSE NEW ORLEANS, LA 70185	13-3010578	501(C)(3)	8,305.				CAPACITY BUILDING
(2) ARTSPACE PROJECTS, INC. 250 THIRD AVENUE NORTH LOS ANGELES, CA 9006	41-135007[illegible]	501(C)(3)	7,500.				CAPACITY BUILDING
(3) NORTHEAST DENVER HOUSING CENTER 1735 GAYLORD STREET GALLUP, NM 87305	84-0909291	501(C)(3)	7,480.				CAPACITY BUILDING
(4) NEZ PERCE TRIBAL HOUSING AUTHORITY 111 VETERANS DRIVE GALLUP, NM 87305	82-0262257	PUBLIC HSG AUTH	6,797.				CAPACITY BUILDING
(5) PEOPLE'S SELF HELP HOUSING CORPORATION 26 E. VICTORIA STREET SANTA MONICA, CA 9040	95-2750154	501(C)(3)	6,564.				CAPACITY BUILDING
(6) TRANSITIONAL HOUSING CORPORATION 5101 16TH STREET N.W. SEATTLE, WA 98104-230	52-1675958	501(C)(3)	6,563.				CAPACITY BUILDING
(7) ST. CLAIR SUPERIOR DEVELOPMENT CORPORATION 4205 ST. CLAIR AVENUE CLEVELAND, OH 44102	34-1238020	501(C)(3)	6,472.				CAPACITY BUILDING
(8) SACRAMENTO NEIGHBORHOOD HOUSING SERVICES, I 2400 ALHAMBRA BOULEVARD LAWRENCEVILLE, GA 3	68-0118032	501(C)(3)	5,985.				CAPACITY BUILDING
(9) INSTITUTO PARA EL DESARROLLO SOCIOECONOMICO P.O. BOX 7154 SOUTH BURLINGTON, VT 05403	66-0658219	501(C)(3)	5,917.				CAPACITY BUILDING
(10) NEW ORLEANS AREA HABITAT FOR HUMANITY, INC. 2900 ELYSIAN FIELDS AVENUE ST. PAUL, MN 551	72-0973161	501(C)(3)	5,735.				CAPACITY BUILDING
(11) INTERIM COMMUNITY DEVELOPMENT ASSOC. 310 MAYNARD AVENUE SOUTH SOUTH BURLINGTON,	91-1071277	501(C)(3)	5,400.				CAPACITY BUILDING
(12) BRIDGE STREET DEVELOPMENT CORPORATION 460 NOSTRAND AVENUE MINNEAPOLIS, MN 55401	11-3250772	501(C)(3)	5,189.				CAPACITY BUILDING

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

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

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount 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 Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount 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 Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount 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 Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount 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 Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount 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 Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

MANAGERS, AND GRANTS AND CONTRACTS MANAGEMENT STAFF. GRANTS AND CONTRACTS MANAGEMENT UTILIZE SALESFORCE AND COMPLEMENTARY SOFTWARE TO GENERATE THE GRANT AGREEMENT AND DOCUMENTS ARE REVIEWED FOR COMPLIANCE WITH FUNDER PROGRAM AND BUDGET REQUIREMENTS. THE ORGANIZATION'S STATUS IS ALSO CHECKED ON "CHARITY CHECK" AND AGAINST THE FEDERAL GOVERNMENT'S SYSTEM FOR AWARD MANAGEMENT. AFTER COMPLIANCE REVIEW IS COMPLETE, A GRANT AGREEMENT IS EMAILED VIA AN ADOBE-FLASH SUPPORTED LINK TO SALESFORCE TO THE ORGANIZATION WITH INSTRUCTIONS TO PRINT OUT TWO COPIES, SIGN BOTH COPIES AND RETURN TO ENTERPRISE FOR COUNTER SIGNATURE. WE ACCEPT EITHER SCANNED COPIES OF THE SIGNED ORIGINALS OR HARD COPIES. UPON

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount 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 Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

Part III **Grants and Other Assistance to Individuals in the United States.** 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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" 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.*

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	[X] First-class or charter travel		
	[ ] Travel for companions		
	[ ] Tax indemnification and gross-up payments		
	[ ] Discretionary spending account		
	[ ] Housing allowance or residence for personal use		
	[ ] Payments for business use of personal residence		
	[ ] Health or social club dues or initiation fees		
	[ ] Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
	[ ] Compensation committee		
	[X] Independent compensation consultant		
	[ ] Form 990 of other organizations		
	[ ] Written employment contract		
	[X] Compensation survey or study		
	[X] Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment? 4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement? 4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization? 5a		X
b	Any related organization? 5b		X
	If "Yes" to line 5a or 5b, describe in Part III.		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization? 6a		X
b	Any related organization? 6b	X	
	If "Yes" to line 6a or 6b, describe in Part III.		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7	X	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	JEFFREY SCHAFFER VICE PRESIDENT	(i)	190,833.	28,492.	1,642.	16,608.	22,459.	260,034.	
		(ii)	0	0	0				
2	TERRI L. LUDWIG TRUSTEE, PRESIDENT & CEO	(i)	424,167.	114,121.	719.	19,890.	18,598.	577,495.	
		(ii)	0	0	0				
3	WILLIAM R. FREY SENIOR VICE PRESIDENT	(i)	198,440.	41,750.	2,332.	18,279.	15,693.	276,494.	
		(ii)	0	0	0				
4	NAOMI S. BAYER SENIOR VICE PRESIDENT	(i)	249,057.	66,000.	3,810.	19,890.	21,326.	360,083.	
		(ii)	0	0	0				
5	RICHARD D. GROSS VICE PRESIDENT	(i)	188,255.	30,391.	10,261.	16,748.	20,571.	266,226.	
		(ii)	0	0	0				
6	MARK MCDERMOTT VICE PRESIDENT	(i)	177,779.	30,391.	2,090.	15,789.	24,061.	250,110.	
		(ii)	0	0	0				
7	LORI MICHELLE CHATMAN SENIOR VICE PRESIDENT	(i)	220,887.	56,892.	1,602.	19,890.		299,271.	
		(ii)	0	0	0				
8	MICHAEL MCNEELY SR VP	(i)	256,250.	66,000.	2,090.	19,890.		344,230.	
		(ii)	0	0	0				
9	ABBY JO SIGAL SENIOR VICE PRESIDENT	(i)	104,921.	53,900.	7,574.	4,617.	10,842.	181,854.	
		(ii)	0	0	0				
10	ALAN SCOTT ANDERSON VICE PRESIDENT	(i)	166,961.	17,000.	1,642.	13,734.	25,888.	225,225.	
		(ii)	0	0	0				
11	ALAZNE MIREN SOLIS SENIOR VICE PRESIDENT	(i)	254,493.	64,107.	652.	19,890.	15,305.	354,447.	
		(ii)	0	0	0				
12	FAITH E. THOMAS SVP &GENERAL COUNSEL/SECRETARY	(i)	226,313.	35,327.	2,332.	19,890.	14,133.	297,995.	
		(ii)	0	0	0				
13	MATTHEW D. HOFFMAN VICE PRESIDENT	(i)	171,079.	14,847.	300.	13,940.	26,561.	226,727.	
		(ii)	0	0	0				
14	MEAGHAN E. VLKOVIC VICE PRESIDENT	(i)	155,215.	25,865.	351.	11,104.	24,061.	216,596.	
		(ii)	0	0	0				
15	PAUL M. CUMMINGS SENIOR VICE PRESIDENT	(i)	57,500.	37,950.	232,007.	2,919.	4,650.	335,026.	
		(ii)	0	0	0				
16	AMALIA M. KASTBERG VICE PRESIDENT	(i)	237,968.	23,749.	450.	19,392.	24,061.	305,620.	
		(ii)	0	0	0				

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	MICHELLE WHETTEN VICE PRESIDENT	(i)	170,613.	29,700.	802.	14,663.	7,530.	223,308.	
		(ii)	0	0	0				
2	DAVID CHARLES BOWERS VICE PRESIDENT	(i)	172,857.	30,690.	300.	14,981.	8,174.	227,002.	
		(ii)	0	0	0				
3	CHARLES R. WERHANE TRUSTEE	(i)	393,372.	287,066.	204,751.	103,510.	14,133.	1,002,832.	
		(ii)	0	0	0				
4	EDWARD DAVID MANEKIN VICE PRESIDENT	(i)	154,515.	13,449.	1,041.	12,328.	26,258.	207,591.	
		(ii)	0	0	0				
5	MARY ANN LEONARD VICE PRESIDENT	(i)	173,856.	26,130.	1,980.	14,912.	16,913.	233,791.	
		(ii)	0	0	0				
6	KEITH E. FAIREY VICE PRESIDENT	(i)	200,089.	39,717.	652.	18,105.	18,598.	277,161.	
		(ii)	0	0	0				
7	ALEX S. AVITABILE VICE PRESIDENT	(i)	167,722.	14,246.	2,332.	13,265.	18,201.	215,766.	
		(ii)	0	0	0				
8	PETRA D. MONTAQUE VICE PRESIDENT	(i)	153,667.	13,017.	1,290.	9,829.	15,521.	193,324.	
		(ii)	0	0	0				
9	KAREN LADO VICE PRESIDENT	(i)	139,873.	23,017.	765.	11,862.	19,797.	195,314.	
		(ii)	0	0	0				
10	KATHERINE W. SWENSON VICE PRESIDENT	(i)	159,410.	16,000.	450.	13,005.	20,305.	209,170.	
		(ii)	0	0	0				
11	ANTHONY JOSEPH DISPIGNO SENIOR VICE PRESIDENT	(i)	244,557.	62,588.	690.	19,890.	25,621.	353,346.	
		(ii)	0	0	0				
12	ROBERT S. GROSSINGER VICE PRESIDENT	(i)	189,686.	15,730.	1,290.	14,977.		221,683.	
		(ii)	0	0	0				
13	ANDREW EDWARD GEER VICE PRESIDENT	(i)	153,742.	25,520.	450.	13,055.	23,387.	216,154.	
		(ii)	0	0	0				
14	MELINDA J. POLLACK VICE PRESIDENT	(i)	163,977.	18,975.	270.	13,666.	20,113.	217,001.	
		(ii)	0	0	0				
15	JACQUELINE WAGGONER DRM & DEPUTY DIRECTOR	(i)	144,410.	35,911.	617.	12,992.	8,974.	202,904.	
		(ii)	0	0	0				
16	JON SEARLES DEPUTY DIRECTOR & PR DIRECTOR	(i)	165,685.	13,831.	622.	12,777.	6,676.	199,591.	
		(ii)	0	0	0				

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	MARY JO BARRANCO	(i)	184,477.	36,765.	1,042.	17,082.	25,801.	265,167.	
	VICE PRESIDENT	(ii)	0	0	0				
2	TIFFANY MANUEL	(i)	157,766.	13,951.	300.	10,154.	29,061.	211,232.	
	VICE PRESIDENT	(ii)	0	0	0				
3	BENJAMIN NICHOLS	(i)	137,214.	13,000.	595.	10,513.	23,885.	185,207.	
	VICE PRESIDENT	(ii)	0	0	0				
4	THOMAS OSBODA	(i)	167,453.	14,025.	690.	9,391.	7,940.	199,499.	
	VICE PRESIDENT	(ii)	49.	0	0			49.	
5	VICTORIA SUSAN SHIRE	(i)	132,719.	11,900.	283.	10,424.	26,861.	182,187.	
	VICE PRESIDENT	(ii)	0	0	0				
6	DIANE YENTAL	(i)	156,116.	16,000.	300.	9,990.	26,483.	208,889.	
	VICE PRESIDENT	(ii)	0	0	0				
7	ANDREW JAKABOVICS	(i)	156,594.	15,624.	620.	12,341.	22,156.	207,335.	
	SENIOR DIRECTOR	(ii)	0	0	0				
8	ANGELA BOYD	(i)	146,895.	15,000.	236.	11,171.	6,801.	180,103.	
	VICE PRESIDENT	(ii)	0	0	0				
9	MARYANN LESHIN	(i)	151,038.	15,000.	1,290.	11,940.	24,228.	203,496.	
	VICE PRESIDENT	(ii)	0	0	0				
10	LAUREL BLACHFORD	(i)	252,019.	0	300.			252,319.	
	VICE PRESIDENT	(ii)	0	0	0				
11	ANDREW JOHNSTON	(i)	150,000.	0	489.	15,810.		166,299.	
	VICE PRESIDENT	(ii)	45,450.	39,600.	182.	1,866.		87,098.	
12	CRAIG MELLEDICK	(i)	255,825.	0	489.	15,553.	13,949.	285,816.	
	SENIOR VP, TREASURER, & CFO	(ii)	57,078.	131,109.	49,627.	4,337.	4,650.	246,801.	
13	BRYAN PITTENGER	(i)	103,000.	0	180.	9,857.	12,399.	125,436.	
	VICE PRESIDENT	(ii)	48,043.	20,235.	86.	2,048.	6,199.	76,611.	
14	EUN SHIN	(i)	171,780.	15,000.	450.	11,828.	3,220.	202,278.	
	VICE PRESIDENT	(ii)	0	0	0				
15	CATHERINE HYDE	(i)	144,484.	3,000.	1,612.	10,398.	25,310.	184,804.	
	SENIOR DIRECTOR	(ii)	0	0	0				
16	KAREN LORD	(i)	136,400.	11,485.	930.	10,016.	7,676.	166,507.	
	CONTROLLER	(ii)	0	0	0				

Part III Supplemental Information

Complete this part to 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.

SCHEDULE J

THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN AMOUNT IS PARTIALLY

CALCULATED BASED ON THE NET INCOME OF THE RELATED ORGANIZATION AS WELL AS

SPECIFIC GOALS MET BY THE EMPLOYEE.

SCHEDULE J

OFFICERS & KEY EMPLOYEES HAVE A PERFORMANCE PLAN BASED ON ACHIEVING

CERTAIN FINANCIAL TARGETS AND OTHER INDIVIDUAL PERFORMANCE CRITERIA.

SCHEDULE J

CHARLES WERHANE

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.*

OMB No. 1545-0047

2014

Open To Public Inspection

Name of the organization
ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number
52-1231931

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	5.	28,704.	FMV ON DATE ACQUIRED
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified 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 ▶(_____)				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
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		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
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 **Supplemental Information.** Complete this part to 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.

USE OF THIRD PARTIES TO SELL NON-CASH ITEMS

FINANCIAL INSTITUTIONS ARE USED TO REDEEM/SELL DONATED STOCK.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2014

Open to Public Inspection

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

GOVERNANCE

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

AN ANNUAL CONFLICT OF INTEREST DISCLOSURE EXERCISE IS PERFORMED BY THE ORGANIZATION EACH JANUARY. THIS EXERCISE REQUIRES EACH EMPLOYEE TO READ THE BUSINESS ETHICS POLICY AND COMPLETE THE CONFLICT OF INTERESTS DISCLOSURE FORM IDENTIFYING ANY POSSIBLE CONFLICTS KNOWN BY THE EMPLOYEE. NEW EMPLOYEES ARE ALSO REQUIRED TO COMPLETE THIS CONFLICT OF INTEREST DISCLOSURE FORM UPON HIRING. THE EXECUTIVE OFFICE INCLUDES THE CONFLICT OF INTEREST POLICY AND THE CONFLICT OF INTERESTS DISCLOSURE STATEMENT IN ITS MAILING TO THE TRUSTEES IN ADVANCE OF THE ANNUAL MEETING OF THE BOARD (USUALLY HELD IN MARCH). WE ASK THAT TRUSTEE RETURN THE DISCLOSURE FORM BY THE ANNUAL MEETING. THE CHIEF AUDIT EXECUTIVE REVIEWS AND APPROVES THE DOCUMENT (CONFLICT OF INTEREST DISCLOSURE FORM) CONTENT AND FOLLOWS UP ON ANY CONCERNS WITH THE EMPLOYEE. FOR NEW HIRES, A LOG IS MAINTAINED OF ANY DOCUMENTED CONFLICTS FOR FUTURE REFERENCING. THE EXECUTIVE OFFICE MONITORS AND FOLLOWS UP ON THE STATUS OF ANY UNRETURNED DISCLOSURE FORMS. THE GENERAL COUNSEL REVIEWS ALL DISCLOSURE FORMS AND FOLLOWS UP IF THERE ARE ANY ISSUES, IN ACCORDANCE WITH THE PROCEDURES SET FORTH IN THE POLICY.

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

GOVERNANCE

THE PROCESS FOR DETERMINING COMPENSATION FOR THE CEO AND OFFICER POSITIONS OF ENTERPRISE COMMUNITY PARTNERS IS AS FOLLOWS:

PARTNERS ENGAGES AN INDEPENDENT CONSULTING FIRM TO PROVIDE A COMPENSATION STUDY FOR THE CEO & OFFICER POSITIONS TO ESTABLISH A MARKET VALUE. THE MARKET ANALYSIS IS REVIEWED BY THE BOARD OF TRUSTEES. THE BOARD OF TRUSTEES DISCUSSES AND SETS THE CEO COMPENSATION. THE BOARD ALSO REVIEWS AND APPROVES THE CEO'S RECOMMENDATIONS FOR THE OTHER OFFICERS' COMPENSATION. THIS PROCESS IS DOCUMENTED THROUGH THE BOARD MEETING MINUTES.

GOVERNANCE

DOCUMENTS MADE AVAILABLE TO PUBLIC UPON REQUEST AND THROUGH OUR WEBSITE.

RECONCILIATION OF NET ASSETS

CHANGE IN NET ASSETS OF AFFILIATES	15,606,000
NET UNREALIZED GAIN ON INVESTMENT	921,000
CHANGE IN NON-CONTROLLING INTERESTS	1,957,000
AUDIT STATEMENT-ONLY CHANGE IN CONTROLLING INTERESTS	672,000
GAAP TO TAX ADJ	(313,000)
TOTAL	18,843.000

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

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

ATTACHMENT 2

FORM 990, PART VI, LINE 17 - STATES

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,

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
MATTER UNLIMITED, LLC 175 VARICK STREET NEW YORK, NY 10014	CONSULTING	789,754.
DELOITTE TAX, LLC P.O. BOX 844708 DALLAS, TX 75284	CONSULTING	778,239.
APA TEN G LLC 750 FIRST STREET, NE	CONSULTING	488,246.

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

ATTACHMENT 3 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
WASHINGTON, DC 20002		
HORNE, LLP 1020 HIGHLAND COLONY PARKWAY #400 RIDGELAND, MS 39157	CONSULTING	357,623.
101 MONTGOMERY STREET COMPANY 101 MONTGOMERY STREET # 2350 SAN FRANCISCO, CA 94104	CONSULTING	221,979.

ATTACHMENT 4

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INVESTMENT INCOME	483,658.			483,658.
TOTALS	483,658.			483,658.

ATTACHMENT 5

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT
FUNDRAISING EVENTS	1,200,030.
TOTAL	1,200,030.

ATTACHMENT 6

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

ATTACHMENT 6 (CONT'D)

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
FUNDRAISING EVENTS	235,690.	568,667.	-332,977.
TOTALS	235,690.	568,667.	-332,977.

ATTACHMENT 7

FORM 990, PART X - NOTES AND LOANS RECEIVABLE

BORROWER: NOTES RECEIVABLE

BEGINNING BALANCE DUE	22,922,111.
ENDING BALANCE DUE	23,966,257.
TOTAL BEGINNING NOTES AND LOANS RECEIVABLE	22,922,111.
TOTAL ENDING NOTES AND LOANS RECEIVABLES	23,966,257.

ATTACHMENT 8

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE
EQUITY FUNDS	12,637,126.
BOND FUNDS	9,306,757.
REAL ESTATE INVEST TRUST FUND	1,723,911.
TOTALS	23,667,794.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) 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
(1) ENTERPRISE LOUISIANA LOAN FUND, LLC 47-1718653 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	FINANCING	DE	172,925.	1,099,632.	ECP, INC
(2) ENTERPRISE NEW ORLEANS NT, LLC 52-1231931 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFFORD HSG	MD	90,745.	1,216,938.	ECP, INC.
(3) ENTERPRISE NEW GENERATION MEMBER LLC 1100 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	FINANCING	DE			ECP, INC.
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) ENTERPRISE COMMUNITY LOAN FUND, INC. 52-0192004 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	FINANCING	MD	501(C)(3)	509(A)(3)	ECP, INC		X
(2) ENTERPRISE HOME OWNERSHIP PARTNERS, INC 31-1737642 600 WILSHIRE BLVD LOS ANGELES, CA 90017	AFF. HOUSING	CA	501(C)(3)	509(A)(3)	ECP, INC		X
(3) EHOP- DALLAS, INC 72-1590088 500 AKARD STREET DALLAS, TX 75201	AFF. HOUSING	TX	501(C)(3)	509(A)(3)	ECP, INC		X
(4) NEIGHBORHOOD PARTNERSHIP HOUSING DEVELOP 13-3811616 1 WHITEHALL STREET NEW YORK, NY 10004	AFF. HOUSING	NY	501(C)(3)	509(A)(3)	ECP, INC		X
(5) ENTERPRISE MARYLAND, LLC 26-3262997 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC		X
(6) IAC/ENTERPRISE NEHEMIAH DEVELOPMENT 52-1742031 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC		X
(7) CORNERSTONE HOUSING CORPORATION 52-1742293 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC		X

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number

52-1231931

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) 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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) CITY HOMES, INC 52-1479114 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC		X
(2) ENTERPRISE ADVISORS, INC. 27-3846733 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC.		X
(3) AFFORDABLE HOUSING SOLUTIONS, INC. 35-2389470 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC.		X
(4) ENTERPRISE COMMUNITY INVESTMENT, INC 52-1206840 11000 BROKEN LAND PARKWAY COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(4)		N/A		X
(5)							
(6)							
(7)							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) ECLF TOAH MBR, LLC 27-5305396 11000 BROKEN LAND PARKWAY #700	FINANCING	DE	ECLF	RELATED	35,288.	99,297.		X			X	99.9900
(2) COMMUNITY WEATHERIZATION LLC 2 501 7TH AVENUE 7TH FLOOR	AFFORD HSGING	DE	ECP, INC	RELATED				X			X	50.0000
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
(1) ENTERPRISE GROUP INC 52-1348286 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	ECP, INC	C CORP			100.0000		X
(2) ENTERPRISE NEW ORLEANS, LLC 26-4201991 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFFORDABLE HS	MD	ECP, INC	C CORP			100.0000		X
(3)									
(4)									
(5)									
(6)									
(7)									

Part V **Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

			Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a	X	
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d	X	
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o	Sharing of paid employees with related organization(s)	1o		X
p	Reimbursement paid to related organization(s) for expenses	1p	X	
q	Reimbursement paid by related organization(s) for expenses	1q	X	
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	ENTERPRISE COMMUNITY INVESTMENT, INC.	A	4,621,467.	COST
(2)	ENTERPRISE COMMUNITY INVESTMENT, INC.	K	7,025,517.	COST
(3)	ENTERPRISE COMMUNITY INVESTMENT, INC.	L	6,067,929.	COST
(4)	ENTERPRISE COMMUNITY INVESTMENT, INC.	O	950,224.	COST
(5)	ENTERPRISE COMMUNITY INVESTMENT, INC.	P	769,746.	COST
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

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

COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA, MD 20814-6583

****

INSTRUCTIONS FOR FILING
ENTERPRISE COMMUNITY PARTNERS, INC.
CA FORM 199
CALIFORNIA FORM 199 - EXEMPT ORGANIZATION
FOR THE PERIOD ENDED DECEMBER 31, 2014

****

SIGNATURE...
THE ORIGINAL 8453-EO SHOULD BE SIGNED AND DATED BY AN AUTHORIZED OFFICER OF THE CORPORATION.

FILING...
RETURN YOUR SIGNED 8453-EO AUTHORIZATION TO:

COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA, MD 20814-6583

DO NOT SEPARATELY FILE YOUR TAX RETURN WITH THE STATE. DOING SO WILL DELAY THE PROCESS OF YOUR RETURN.

WE MUST RECEIVE YOUR SIGNED FORM BEFORE WE CAN ELECTRONICALLY TRANSMIT YOUR RETURN, WHICH IS DUE ON AUGUST 17, 2015. WE WOULD APPRECIATE YOUR RETURNING THIS FORM AS SOON AS POSSIBLE AS THIS WILL EXPEDITE THE PROCESSING OF YOUR RETURN. THE STATE WILL NOTIFY US WHEN YOUR RETURN IS ACCEPTED. YOUR RETURN IS NOT CONSIDERED FILED UNTIL THE STATE CONFIRMS THEIR ACCEPTANCE, WHICH MAY OCCUR AFTER THE DUE DATE OF YOUR RETURN.

TAXABLE YEAR **2014**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2014 or fiscal year beginning (mm/dd/yyyy) 01/01/2014 , and ending (mm/dd/yyyy) 12/31/2014

Corporation/Organization name
ENTERPRISE COMMUNITY PARTNERS, INC.

California corporation number
1548911

Additional information. See instructions.

FEIN
52-1231931

Street address (suite or room)
11000 BROKEN LAND PARKWAY 700

PMB no.

City
COLUMBIA

State
MD

Zip code
21044

Foreign country name

Foreign province/state/county

Foreign postal code

A First Return . . . . . ☐ Yes ☒ No

B Amended Return . . . . . ☐ Yes ☒ No

C IRC Section 4947(a)(1) trust . . . . . ☐ Yes ☒ No

D Final Information Return? ☐ Dissolved ☐ Surrendered (Withdrawn) ☐ Merged/Reorganized Enter date: (mm/dd/yyyy) _____

E Check accounting method: (1) ☐ Cash (2) ☒ Accrual (3) ☐ Other

F Federal return filed? (1) ☐ 990T (2) ☐ 990 PF (3) ☐ Sch H (990)

G Is this a group filing? See instructions . . . . . ☐ Yes ☒ No

H Is this organization in a group exemption? . . . . . ☐ Yes ☒ No
If "Yes," what is the parent's name?

I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. . . . . ☐ Yes ☒ No

J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. . . . . ☐ Yes ☒ No

K Is the organization exempt under R&TC Section 23701g? ☐ Yes ☒ No
If "Yes," enter the gross receipts from nonmember sources . . . . . $ _____

L If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required . . . . . ☒

M Is the organization a Limited Liability Company? . . . . ☐ Yes ☒ No

N Did the organization file Form 100 or Form 109 to report taxable income? . . . . . ☐ Yes ☒ No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? . . . . . ☐ Yes ☒ No

P Is an IRS Form 1023/1024 pending? . . . . . ☐ Yes ☒ No
Date filed with IRS _____

Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	13,645,157.00
	2	Gross dues and assessments from members and affiliates	2	.00
	3	Gross contributions, gifts, grants, and similar amounts received.	3	55,656,679.00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. **This line must be completed.** If the result is less than $50,000, see General Instruction B.	4	69,301,836.00
	5	Cost of goods sold. 5 .00		
	6	Cost or other basis, and sales expenses of assets sold 6 .00		
	7	Total costs. Add line 5 and line 6.	7	.00
	8	Total gross income. Subtract line 7 from line 4	8	69,301,836.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	68,555,156.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	746,680.00
Filing Fee	11	Filing fee $10 or $25. See General Instruction F.	11	.00
	12	Total payments	12	.00
	13	Penalties and Interest. See General Instruction J	13	.00
	14	Use tax. See General Instruction K	14	.00
	15	**Balance due.** Add line 11, line 13, and line 14. Then subtract line 12 from the result	15	.00

Sign Here

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

Signature of officer ▶ | Title | Date | Telephone 410-772-6016

Paid Preparer's Use Only

Preparer's signature ▶ ANNE SCHRANTZ , CPA | Date | Check if self-employed ▶ ☐ | PTIN P00230625

Firm's name (or yours, if self-employed) and address ▶ COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA, MD 20814-6583

FEIN 22-1478099

Telephone 301-652-9100

May the FTB discuss this return with the preparer shown above? See instructions . . . . . ☒ Yes ☐ No

Part II **Organizations with gross receipts of more than $50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

Receipts from Other Sources	1 Gross sales or receipts from all business activities. See instructions	1	8,873,009.00
	2 Interest	2	483,658.00
	3 Dividends	3	.00
	4 Gross rents	4	.00
	5 Gross royalties	5	4,621,467.00
	6 Gross amount received from sale of assets (See Instructions)	6	.00
	7 Other income. Attach schedule	7	-332,977.00
	8 **Total** gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	13,645,157.00
Expenses and Disbursements	9 Contributions, gifts, grants, and similar amounts paid. Attach schedule ATCH 2	9	16,995,692.00
	10 Disbursements to or for members	10	.00
	11 Compensation of officers, directors, and trustees. Attach schedule	11	11,306,037.00
	12 Other salaries and wages	12	11,718,700.00
	13 Interest	13	.00
	14 Taxes	14	.00
	15 Rents	15	2,576,714.00
	16 Depreciation and depletion (See instructions)	16	1,155,555.00
	17 Other Expenses and Disbursements. Attach schedule. ATCH 4	17	24,802,458.00
	18 **Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	68,555,156.00

Schedule L **Balance Sheets**

Assets	Beginning of taxable year (a)	(b)	End of taxable year (c)	(d)
1 Cash		28,195,359.		20,044,327.
2 Net accounts receivable		6,042,027.		6,064,446.
3 Net notes receivable		34,885,895.		39,031,659.
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock	ATCH 6	159,318,436.		188,338,950.
8 Mortgage loans				
9 Other investments. Attach schedule				
10 a Depreciable assets	10,132,245.		11,513,684.	
b Less accumulated depreciation	(5,834,159)	4,298,086.	(6,923,244)	4,590,440.
11 Land				
12 Other assets. Attach schedule	ATCH 7	8,892,308.		6,511,523.
13 **Total assets**		241,632,111.		264,581,345.
Liabilities and net worth				
14 Accounts payable		6,525,948.		8,672,164.
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities. Attach schedule		20,438,798.		2,950,285.
19 Capital stock or principle fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		214,667,365.		234,257,043.
22 **Total liabilities and net worth**		241,632,111.		245,879,492.

Schedule M-1 **Reconciliation of income per books with income per return**
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than $50,000

1 Net income per books	19,589,678.	7 Income recorded on books this year not included in this return. Attach schedule	ATCH 8 / 18,843,000.
2 Federal income tax		8 Deductions in this return not charged against book income this year. Attach schedule	
3 Excess of capital losses over capital gains			
4 Income not recorded on books this year. Attach schedule		9 Total. Add line 7 and line 8	18,843,000.
5 Expenses recorded on books this year not deducted in this return. Attach schedule		10 Net income per return. Subtract line 9 from line 6	746,678.
6 Total. Add line 1 through line 5	19,589,678.		

Date Accepted _____ **DO NOT MAIL THIS FORM TO THE FTB**

TAXABLE YEAR **2014**

California e-file Return Authorization for Exempt Organizations

FORM **8453-EO**

Exempt Organization name: ENTERPRISE COMMUNITY PARTNERS, INC.

Identifying number: 52-1231931

Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	69,301,836.
2 Total gross income (Form 199, line 8)	2	69,301,836.
3 Total expenses and disbursements (Form 199, Line 9)	3	68,555,156.

Part II Settle Your Account Electronically for Taxable Year 2014

4 ☐ Electronic funds withdrawal **4a** Amount _____ **4b** Withdrawal date (mm/dd/yyyy) _____

Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____

6 Account number _____ 7 Type of account: ☐ Checking ☐ Savings

Part IV Declaration of Officer

I authorize the exempt organization's account be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my Electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2014 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider, the reason(s) for the delay.**

Sign Here ▶ Signature of Officer _____ Date 07/15/2015 ▶ Title SVP AND CFO

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer. See instructions.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an Intermediate Service Provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in in FTB Pub. 1345, 2014 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO Must Sign

ERO's signature ▶ _____ Date _____ Check if also paid preparer ☐ Check if self-employed ☐ ERO's PTIN _____

Firm's name (or yours if self-employed) and address ▶ _____ FEIN _____ ZIP Code _____

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Must Sign

Paid preparer's signature ▶ _____ Date _____ Check if self-employed ☐ Paid preparer's PTIN P00230625

Firm's name (or yours if self-employed) and address ▶ COHNREZNICK LLP
7501 WISCONSIN AVENUE, SUITE 400E
BETHESDA MD 20814-6583

FEIN 22-1478099

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRANTS PAID			
HEARTLAND HOUSING, INC. 208 S. LASALLE BROOKLYN, NY 11231	501(C)(3)	CAPACITY BUILDING	741,163.
NUESTRA COMUNIDAD DEVELOPMENT CORPORATION 56 WARREN STREET GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	441,857.
PATHSTONE CORPORATION 400 EAST AVENUE SANTA MONICA, CA 90401	501(C)(3)	CAPACITY BUILDING	428,977.
CLEVELAND HOUSING NETWORK, INC 2999 PAYNE AVENUE BILOXI, MS 39530	501(C)(3)	CAPACITY BUILDING	405,991.
THE SAN FRANCISCO FOUNDATION ONE EMBARCADERO CENTER SEATTLE, WA 98104-2304	501(C)(3)	CAPACITY BUILDING	375,000.
CAMBA HOUSING VENTURES, INC. 1720 CHURCH AVENUE NEW YORK, NY 10002	501(C)(3)	CAPACITY BUILDING	357,392.
PROVIDENCE COMMUNITY HOUSING 1050 SOUTH JEFFERSON DAVIS PARKWAY CHRISTIANSBURG, VA 24073	501(C)(3)	CAPACITY BUILDING	306,152.
HANAC, INC. 49 WEST 45TH STREET SEATTLE, WA 98101	501(C)(3)	CAPACITY BUILDING	300,000.

FORM CA-199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ENTERPRISE LOUISIANA LOAN FUND 643 MAGAZINE STREET CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	297,044.
MONTGOMERY HOUSING PARTNERSHIP, INC. 12200 TECH ROAD WAYNE, WV 25570	501(C)(3)	CAPACITY BUILDING	277,749.
JUBILEE HOUSING, INC. 1640 COLUMBIA ROAD, NW SEATTLE, WA 98144	501(C)(3)	CAPACITY BUILDING	267,387.
FAMICOS FOUNDATION, INC. 1325 ANSEL ROAD CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	255,373.
COMMONBOND COMMUNITIES 328 KELLOGG BLVD. W SEATTLE, WA 98122-2014	501(C)(3)	CAPACITY BUILDING	253,370.
NEIGHBORHOOD PROGRESS, INC. 11327 SHAKER BOULEVARD ST. PAUL, MN 55116	501(C)(3)	CAPACITY BUILDING	205,000.
EL CENTRO DE LA RAZA DEVELOPMENT OFFICE CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	204,817.
RENAISSANCE NEIGHBORHOOD DEVELOPMENT CORPORATION 4162 CANAL STREET NEW YORK, NY 10032	501(C)(3)	CAPACITY BUILDING	197,649.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PHI ONE TRINITY DRIVE EAST SANTA MONICA, CA 90401	501(C)(3)	CAPACITY BUILDING	161,271.
CATHEDRAL SQUARE CORPORATION 412 FARRELL STREET BROOKLYN, NY 11224	501(C)(3)	CAPACITY BUILDING	160,723.
HARMONY NEIGHBORHOOD DEVELOPMENT 3301 LASALLE STREET MIAMI, FL 33135	501(C)(3)	CAPACITY BUILDING	150,509.
A NEW LEAF 868 E. UNIVERSITY DRIVE PHILADELPHIA, PA 19103	501(C)(3)	CAPACITY BUILDING	150,000.
HOUSING INITIATIVE PARTNERSHIP 6525 BELCREST ROAD SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	130,000.
DETROIT SHOREWAY COMMUNITY DEV. ORG. 6516 DETROIT AVENUE SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	129,698.
SATELLITE AFFORDABLE HOUSING ASSOCIATES 1521 UNIVERSITY AVENUE TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUILDING	128,026.
PARK HEIGHTS RENAISSANCE, INC. 3939 REISTERSTOWN ROAD GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	124,459.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHP, INC. 229 PEACHTREE STREET, NE ARLINGTON, VA 22201	501(C)(3)	CAPACITY BUILDING	113,679.
MERCY HOUSING CALIFORNIA 1360 MISSION STREET CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	111,352.
ATLANTA REGIONAL COMMISSION 40 COURTLAND STREET, NE HOGANSBURG, NY 13655	501(C)(3)	CAPACITY BUILDING	105,000.
EAST LA COMMUNITY CORPORATION 530 SOUTH BOYLE AVENUE RAPID CITY, SD 57701	501(C)(3)	CAPACITY BUILDING	103,569.
ENTERPRISE COMMUNITY LOAN FUND 70 CORPORATE CENTER CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	103,372.
MIDTOWN DETROIT, INC. 3939 WOODWARD WAYNE, WV 25570	501(C)(3)	CAPACITY BUILDING	102,564.
ST. BERNARD PROJECT 8324 PARC PLACE CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	100,422.
1100 TULANE, LLC 4162 CANAL STREET NEW ORLEANS, LA 70119-5941	LLC	CAPACITY BUILDING	96,037.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHINATOWN COMMUNITY DEVELOPMENT CENTER 1525 GRANT AVENUE ATLANTA, GA 30303	501(C)(3)	CAPACITY BUILDING	94,751.
PROJECT HOMECOMING, INC 2221 FILMORE AVE CHRISTIANSBURG, VA 24073	501(C)(3)	CAPACITY BUILDING	89,674.
ARCH COMMUNITY HOUSING TRUST, INC. P.O. BOX 1292 MESA, AZ 85203	501(C)(3)	CAPACITY BUILDING	89,194.
OFFICE OF RURAL & FARMWORKER HOUSING 1400 SUMMITVIEW AVE. #203 GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	86,083.
LITTLE TOKYO SERVICE CENTER CDC 231 EAST THIRD STREET SAN FRANCISCO, CA 94133	501(C)(3)	CAPACITY BUILDING	84,829.
EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATION 1825 SAN PABLO AVENUE RAPID CITY, SD 57701	501(C)(3)	CAPACITY BUILDING	84,206.
SAINT PAUL RIVERFRONT CORPORATION 25 SIXTH STREET WEST SAN JUAN, PR 00940-1308	501(C)(3)	CAPACITY BUILDING	84,152.
TENDERLOIN NEIGHBORHOOD DEVELOP. CORP. 201 EDDY STREET DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	81,453.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MOUNTAIN HOUSING OPPORTUNITIES 64 CLINGMAN AVENUE WAYNE, WV 25570	501(C)(3)	CAPACITY BUILDING	81,316.
SELFHELP COMMUNITY SERVICES, INC. 520 EIGHTH AVENUE TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUILDING	79,999.
EAH, INC. 2169 E. FRANCISCO BOULEVARD CHICAGO, IL 60647-5216	501(C)(3)	CAPACITY BUILDING	77,231.
JEWISH ASSOCIATION FOR SERVICES FOR THE AGED 247 WEST 37TH STREET SYRACUSE, NY 13202	501(C)(3)	CAPACITY BUILDING	75,603.
VANNGUARD URBAN IMPROVEMENT ASSN., INC. 516 MACDONOUGH STREET LOS ANGELES, CA 90033	501(C)(3)	CAPACITY BUILDING	75,000.
SANTO DOMINGO TRIBAL HOUSING AUTHORITY P.O. BOX 10 TRUJILLO ALTO, PR 00977	PUBLIC HSG AUTH	CAPACITY BUILDING	74,517.
SUMMECH COMMUNITY DEV. CORP. 633 PRYOR STREET, SW CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	74,195.
COMMUNITY HOUSING PARTNERS CORPORATION 930 CAMBRIA ST. SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	73,699.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JANE PLACE NEIGHBORHOOD SUSTAINABILITY INITIATIVE, P.O. BOX 53011 YAKIMA, WA 98908	501(C)(3)	CAPACITY BUILDING	72,248.
NATIVE AMERICAN CONNECTIONS 4520 N. CENTRAL AVENUE THE DALLES, OR 97058	501(C)(3)	CAPACITY BUILDING	71,931.
BELLWETHER HOUSING 1651 BELLEVUE AVENUE DENVER, CO 80209	501(C)(3)	CAPACITY BUILDING	70,127.
COALFIELD DEVELOPMENT CORPORATION P.O. BOX 1133 NEW YORK, NY 10035	501(C)(3)	CAPACITY BUILDING	68,361.
JERICHO ROAD EPISCOPAL HOUSING INITIATIVE 2919 ST. CHARLES AVENUE SYRACUSE, NY 13202	501(C)(3)	CAPACITY BUILDING	67,439.
RURAL HOUSING DEVELOPMENT CORPORATION 709 NORTH 1890 WEST LAWRENCEVILLE, GA 30043	501(C)(3)	CAPACITY BUILDING	66,395.
HOUSING VISIONS UNLIMITED, INC. 1201 E. FAYETTE STREET SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	66,323.
DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION 594 COLUMBIA ROAD SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	65,997.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
TAPESTRY DEVELOPMENT GROUP 321 W. HILL STREET DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	65,818.
CARRFOUR SUPPORTIVE HOUSING, INC. 1398 SOUTHWEST 1ST STREET BALTIMORE, MD 21201	501(C)(3)	CAPACITY BUILDING	65,500.
COMMUNITY AREA RESOURCE ENTERPRISE, INC. P.O. BOX 4298 SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	65,409.
PATHSTONE CORPORATION 7 PRINCE STREET LOS ANGELES, CA 90008	501(C)(3)	CAPACITY BUILDING	62,615.
SERVICES FOR THE UNDERSERVED, INC. 305 SEVENTH AVENUE, 10TH FL TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUILDING	62,500.
UNIVERSITY OF DETROIT MERCY 4001 W. MCNICHOLS ROAD OAKLAND, CA 94612-1517	501(C)(3)	CAPACITY BUILDING	62,360.
MERCY HOUSING NORTHWEST 2505 THIRD AVENUE CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	60,460.
NEIGHBORHOOD HOUSING SERVICES OF CHICAGO, INC. 1279 N. MILWAUKEE AVENUE THE DALLES, OR 97058	501(C)(3)	CAPACITY BUILDING	58,983.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FOUNDATION COMMUNITIES, INC. 3036 SOUTH 1ST STREET CLEVELAND, OH 44104	501(C)(3)	CAPACITY BUILDING	58,818.
THE LOWER 9TH WARD NEIGHBORHOOD EMPOWERMENT NETWOR 1123 LAMANCHE STREET DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	58,065.
NATIONAL HOUSING TRUST 1101 30TH STREET, NW THE DALLES, OR 97058	501(C)(3)	CAPACITY BUILDING	58,000.
JUBILEE BALTIMORE, INC. 1228 N. CALVERT STREET SEATTLE, WA 98144	501(C)(3)	CAPACITY BUILDING	57,029.
SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVENUE CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	56,781.
FIFTH AVENUE COMMITTEE, INC. 621 DEGRAW STREET NEW ORLEANS, LA 70185	501(C)(3)	CAPACITY BUILDING	56,000.
COMMUNITY CORPORATION OF SANTA MONICA 1423 SECOND STREET SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	55,780.
CASA DE MARYLAND, INC. 8151 15TH AVENUE NEW ORLEANS, LA 70113	501(C)(3)	CAPACITY BUILDING	55,000.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOPEWORKS SOCIAL ENTERPRISES 5830 EVERGREEN WAY PORTLAND, OR 97232	501(C)(3)	CAPACITY BUILDING	53,000.
ROC USA LLC 7 WALL STREET MOAB, UT 84532	501(C)(3)	CAPACITY BUILDING	52,433.
MANNA, INC. 828 EVARTS STREET, NE CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	51,823.
HOUSING ASSISTANCE COUNCIL 1025 VERMONT AVENUE NW, SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	50,701.
LOW INCOME HOUSING INSTITUTE 2407 FIRST AVE, SUITE 200 SAN FRANCISCO, CA 94133	501(C)(3)	CAPACITY BUILDING	50,000.
ARCHWAY HOUSING AND SERVICES, INC. P.O. BOX 9189 JACKSONVILLE, FL 32202-3436	501(C)(3)	CAPACITY BUILDING	50,000.
COLUMBUS HOUSING PARTNERSHIP, INC. 562 EAST MAIN STREET SEATTLE, WA 98122-2014	501(C)(3)	CAPACITY BUILDING	50,000.
COMMUNITY INVESTMENT STRATEGIES, INC. 1970 BRUNSWICK AVENUE SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	50,000.

FORM CA-199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CROW TRIBE OF INDIANS P.O. BOX 159 SAN FRANCISCO, CA 94110	TRIBAL GOV'T	CAPACITY BUILDING	50,000.
EDEN HOUSING, INC. 22645 GRAND STREET CHICAGO, IL 60637	501(C)(3)	CAPACITY BUIDLING	50,000.
GILMAN HOUSING TRUST, INC. P.O. BOX 259 CLEVELAND, OH 44104	501(C)(3)	CAPACITY BUIDLING	50,000.
HISPANIC HOUSING DEVELOPMENT CORPORATION 325 N. WELLS LANGLEY PARK, MD 20783	501(C)(3)	CAPACITY BUIDLING	50,000.
LEECH LAKE BAND OF OJIBWE HOUSING AUTHORITY 611 ELM AVENUE PORTLAND, OR 97209	501(C)(3)	CAPACITY BUIDLING	50,000.
NEIGHBORHOOD NONPROFIT HOUS CORP 195 GOLF COURSE ROAD ST. PAUL, MN 55116	501(C)(3)	CAPACITY BUIDLING	50,000.
NEW ECONOMICS FOR WOMEN 303 SOUTH LOMA DRIVE ST. PAUL, MN 55102	501(C)(3)	CAPACITY BUIDLING	50,000.
NORTHWEST MONTANA HUMAN RESOURCES 214 MAIN STREET GALLUP, NM 87305	501(C)(3)	CAPACITY BUIDLING	50,000.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ROSEBUD ECONOMIC DEVELOPMENT CORPORATION P.O. BOX 236 BALTIMORE, MD 21215	501(C)(3)	CAPACITY BUIDLING	50,000.
SOKAOGAN CHIPPEWA COMMUNITY 3265 INDIAN SETTLEMENT ROAD DENVER, CO 80211	501(C)(3)	CAPACITY BUILDING	50,000.
UMPQUA COMMUNITY DEVELOPMENT CORPORATION 605 SE KANE STREET SAN RAFAEL, CA 94901	501(C)(3)	CAPACITY BUIDLING	50,000.
HABITAT FOR HUMANITY OF PUERTO RICO, INC 1357 ASHFORD AVENUE BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	50,000.
RED CLIFF BAND OF LAKE SUPERIOR CHIPPEWA 88358 PIKE ROAD LAWRENCEVILLE, NJ 08648	501(C)(3)	CAPACITY BUIDLING	49,790.
CORPORACION PARA EL DESARROLLO ECONOMICO DE TRUJIL P.O. BOX 1685 SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUIDLING	48,871.
LOWER EAST SIDE PEOPLES MUTUAL HOUSING ASSOCIATION 228 EAST 3RD STREET SAN FRANCISCO, CA 94133	501(C)(3)	CAPACITY BUIDLING	48,582.
SEBCO DEVELOPMENT INC. 885 BRUCKNER BLVD TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUIDLING	47,934.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNITY PROPERTIES, INC. 2000 WEST BALTIMORE STREET OAKLAND, CA 94612-1517	501(C)(3)	CAPACITY BUILDING	47,596.
GULF COAST HOUSING PARTNERSHIP, INC. 1610-A ORETHA CASTLE HALEY BOULEVARD BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUIDLING	47,000.
RESOURCES FOR COMMUNITY DEVELOPMENT 2220 OXFORD STREET NEW YORK, NY 10032	501(C)(3)	CAPACITY BUILDING	46,570.
UNIVERSITY CULTURAL CENTER ASSOCIATION 3939 WOODWARD AVENUE OAKLAND, CA 94612-1517	501(C)(3)	CAPACITY BUILDING	45,000.
NATIONAL CHURCH RESIDENCES 2335 NORTH BANK DRIVE DORCHESTER, MA 02124	501(C)(3)	CAPACITY BUILDING	43,839.
CASCADIA BEHAVIORAL HEALTHCARE, INC. 847 NE 19TH AVENUE NEW ORLEANS, LA 70113	501(C)(3)	CAPACITY BUILDING	43,296.
HABITAT FOR HUMANITY OF THE CHESAPEAKE, INC. 3741 COMMERCE DRIVE BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	41,000.
WEST ANGELES COMMUNITY DEVELOPMENT CORPORATION 6028 CRENSHAW BOULEVARD LOS ANGELES, CA 90033	501(C)(3)	CAPACITY BUILDING	40,665.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BERNAL HEIGHTS NEIGHBORHOOD CENTER 515 CORTLAND AVE DENVER, CO 80209	501(C)(3)	CAPACITY BUILDING	40,000.
COLUMBIA CASCADE HOUSING CORPORATION 312 COURT STREET BALTIMORE, MD 21202	501(C)(3)	CAPACITY BUILDING	40,000.
HUMAN SOLUTIONS, INC. 12350 SE POWELL BOULEVARD SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	40,000.
SINGLE ROOM OCCUPANCY HOUSING CORPORATION 1055 W. 7TH STREET TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUILDING	40,000.
CONSTRUCTION EDUCATION FOUNDATION OF GEORGIA 1255 LAKES PARKWAY SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	39,750.
SANTA FE COMMUNITY HOUSING TRUST P.O. BOX 713 SAN JUAN, PR 00940-1308	501(C)(3)	CAPACITY BUIDLING	39,693.
WHITE EARTH BAND OF CHIPPEWA INDIANS 35500 EAGLEVIEW ROAD DETROIT, MI 48207	TRIBAL GOV'T	CAPACITY BUIDLING	38,666.
LINC HOUSING CORPORATION 555 E . OCEAN BOULEVARD ATLANTA, GA 30316	501(C)(3)	CAPACITY BUILDING	38,650.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SKID ROW HOUSING TRUST 1317 EAST SEVENTH STREET CROW AGENCY, MT 59022	501(C)(3)	CAPACITY BUIDLING	38,508.
HANCOCK RESOURCE CENTER 454 HIGHWAY 90 MIAMI, FL 33135	501(C)(3)	CAPACITY BUILDING	38,120.
ROBISON JEWISH HOME 6125 SW BOUNDARY STREET WASHINGTON, DC 20015	501(C)(3)	CAPACITY BUILDING	37,546.
HOUSING COUNSELING SERVICES 2410 17TH STREET, NW SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	37,480.
MI CASA, INC. 6230 3RD STREET, NW CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUIDLING	37,480.
RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC. NEW YORK, NY 10032	501(C)(3)	CAPACITY BUILDING	37,289.
MENTAL HEALTH SERVICES FOR HOMELESS PERSONS, INC. 1744 PAYNE AVENUE CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	36,908.
NEIGHBORHOOD HOUSING SERVICES OF NEW ORLEANS, INC. 4528 FRERET STREET COLUMBUS, OH 43215	501(C)(3)	CAPACITY BUILDING	36,290.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
AHC, INC 2230 NORTH FAIRFAX DRIVE MESA, AZ 85203	501(C)(3)	CAPACITY BUILDING	36,195.
ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSING 2704 N. PERSHING DRIVE JACKSONVILLE, FL 32202-3436	501(C)(3)	CAPACITY BUILDING	35,057.
1260 HOUSING DEVELOPMENT CORPORATION 2042-48 ARCH STREET NEW ORLEANS, LA 70119-5941	501(C)(3)	CAPACITY BUILDING	35,000.
URBAN EDGE HOUSING CORPORATION 1542 COLUMBUS AVENUE OAKLAND, CA 94612-1517	501(C)(3)	CAPACITY BUILDING	35,000.
BROADMOOR DEVELOPMENT CORPORATION P.O. BOX 13369 NEW YORK, NY 10002	501(C)(3)	CAPACITY BUILDING	34,869.
EL BARRIO'S OPERATION FIGHTBACK, INC. 413 E. 120TH STREET CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	34,690.
GREATER ROCHESTER HOUSING PARTNERSHIP 183 E. MAIN STREET BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	34,145.
HEALTHY NEIGHBORHOODS, INC. 2 E. READ STREET BROOKLYN, NY 11231	501(C)(3)	CAPACITY BUILDING	32,437.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORPORATION 587 WASHINGTON STREET NEW YORK, NY 10035	501(C)(3)	CAPACITY BUILDING	32,230.
SELF-HELP HOUSING CORPORATION OF HAWAII 1427 DILLINGHAM BOULEVARD TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUILDING	32,200.
GRACE ENGLISH EVANGELICAL LUTHERAN CONGREGATION, I 9 CALLE RODRIGUEZ SERRA 3A BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	31,990.
EASTERN MARKET CORPORATION 2934 RUSSELL NEW YORK, NY 10001	501(C)(3)	CAPACITY BUILDING	31,853.
TENEMOS QUE RECLAMAR Y UNIDOS SALVAR LA TIERRA-SOU 4331 SOUTH MAIN STREET DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	31,811.
LINC HOUSING CORPORATION 110 PINE AVENUE, SUITE 500 PORTLAND, OR 97209	501(C)(3)	CAPACITY BUILDING	31,354.
BURTEN, BELL, CARR DEVELOPMENT, INC. 7201 KINSMAN ROAD NEW YORK, NY 10002	501(C)(3)	CAPACITY BUILDING	31,078.
GREENWOOD LEFLORE CARROLL ECONOMIC DEVELOPMENT FOU 402 HIGHWAY 82 BYPASS BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	30,672.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MISSION ECONOMIC DEVELOPMENT AGENCY 2301 MISSION STREET WAYNE, WV 25570	501(C)(3)	CAPACITY BUILDING	30,000.
SLAVIC VILLAGE DEVELOPMENT 5620 BROADWAY AVENUE CROW AGENCY, MT 59022	501(C)(3)	CAPACITY BUILDING	30,000.
ST. VINCENT DE PAUL SOCIETY OF LANE COUNTY VOCATIONAL SERVICE CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	30,000.
LA PLATA HOMES FUND 124 E 9TH STREET PORTLAND, OR 97209	501(C)(3)	CAPACITY BUILDING	29,857.
FIRST COMMUNITY HOUSING, INC. 75 EAST SANTA CLARA STREET NEW ORLEANS, LA 70185	501(C)(3)	CAPACITY BUILDING	29,820.
INNOVATIVE HOUSING, INC. 219 NW SECOND AVENUE SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	29,817.
SOUTHERN UNITED NEIGHBORHOODS 827 TUPELO STREET CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	29,302.
H STREET COMMUNITY DEVELOPMENT CORPORATION 900 2ND STREET, NE BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	28,999.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MQVN CDC 4626 ALCEE FORTIER BOULEVARD DORCHESTER, MA 02124	501(C)(3)	CAPACITY BUILDING	28,500.
PUERTO RICO HOUSING & HUMAN DEVELOPMENT TRUST FUND 208 PONCE DE LEON AVENUE CHRISTIANSBURG, VA 24073	501(C)(3)	CAPACITY BUILDING	28,286.
SRO HOUSING CORPORATION 1055 W. 7TH STREET, SUITE 3250 CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	28,284.
HISTORIC EAST BALTIMORE COMMUNITY ACTION COALITION 1212 N. WOLFE STREET LANGLEY PARK, MD 20783	501(C)(3)	CAPACITY BUILDING	28,000.
COMMUNITY LEAGUE OF THE HEIGHTS, INC. 500 WEST 159TH STREET SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	27,768.
THE VILLAGES COMMUNITY DEVELOPMENT CORPORATION 8109 EAST JEFFERSON AVENUE SEATTLE, WA 98104-2304	501(C)(3)	CAPACITY BUILDING	27,654.
CENTRAL AREA DEVELOPMENT ASSOCIATION 320 17TH AVENUE S ATLANTA, GA 30303-1605	501(C)(3)	CAPACITY BUILDING	27,500.
ASSOCIATED NEIGHBORHOOD DEVELOPMENT 1429 S RAMPART STREET ARLINGTON, VA 22201	501(C)(3)	CAPACITY BUILDING	27,290.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JAMAICA PLAIN NEIGHBORHOOD DEVELOPMENT CORPORATION 31 GERMANIA STREET CHICAGO, IL 60654	501(C)(3)	CAPACITY BUILDING	26,490.
INTERNATIONAL SONORAN DESERT ALLIANCE P.O. BOX 687 SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	25,670.
BOWERY RESIDENTS COMMITTEE, INC. 131 WEST 25TH STREET ARLINGTON, VA 22201	501(C)(3)	CAPACITY BUILDING	25,000.
CHHAYA COMMUNITY DEVELOPMENT 37-43 77TH STREET ATLANTA, GA 30303	501(C)(3)	CAPACITY BUILDING	25,000.
CITY FIRST HOMES, INC. 1436 U STREET, NW BILOXI, MS 39530	501(C)(3)	CAPACITY BUILDING	25,000.
COMMUNITY DEVELOPMENT COLLABORATIVE OF GREATER COL 110 N 17TH STREET SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	25,000.
ESPERANZA COMMUNITY HOUSING CORPORATION 2337 SOUTH FIGUEROA STREET CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	25,000.
HOMES FOR AMERICA, INC. 318 SIXTH STREET PORTLAND, OR 97232	501(C)(3)	CAPACITY BUILDING	25,000.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOUSING OPPORTUNITY DEVELOPMENT CORPORATION 2001 WAUKEGAN ROAD SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	25,000.
INDIANTOWN NON PROFIT HOUSING, INC. P.O. BOX 456 SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	25,000.
MERCY HOUSING LAKEFRONT 120 SOUTH LASALLE STREET CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	25,000.
MHANY MANAGEMENT, INC. 2-4 NEVINS STREET CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	25,000.
NEWCOURTLAND ELDER SERVICES 6970 GERMANTOWN AVENUE ST. HELENS, OR 97051	501(C)(3)	CAPACITY BUILDING	25,000.
NORTHFIELD COMMUNITY LDC OF STATEN ISLAND, INC. 160 HEBERTON AVENUE GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	25,000.
PORTLAND COMMUNITY REINVESTMENT INITIATIVES 6329 N.E. MLK JR. BOULEVARD SANTA MONICA, CA 90401	501(C)(3)	CAPACITY BUILDING	25,000.
STEUBEN CHURCHPEOPLE AGAINST POVERTY 16 WEST WILLIAM STREET CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	25,000.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THC AFFORDABLE HOUSING, INC. 5101 16TH STREET, NW DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	25,000.
UNITED CHURCH HOMES OF READING, INC. 50 BAY STATE ROAD SAN RAFAEL, CA 94901	501(C)(3)	CAPACTIY BUILDING	25,000.
UNITY OF GREATER NEW ORLEANS 2475 CANAL STREET SAN RAFAEL, CA 94901	501(C)(3)	CAPACITY BUILDING	25,000.
VENICE COMMUNITY HOUSING CORPORATION 720 ROSE AVENUE LOS ANGELES, CA 90033	501(C)(3)	CAPACITY BUILDING	25,000.
MAKE IT RIGHT FOUNDATION 912 MAGAZINE STREET WASHINGTON, DC 20009	501(C)(3)	CAPACITY BUILDING	24,911.
ASSOCIATED CATHOLIC CHARITIES, INC. 320 CATHEDRAL STREET ARLINGTON, VA 22201	501(C)(3)	CAPACITY BUILDING	24,553.
CATHOLIC CHARITIES HOUSING SERVICES 5301 TIETON DRIVE ATLANTA, GA 30303-1605	501(C)(3)	CAPACITY BUILDING	24,500.
SOUTH COUNTY HOUSING CORPORATION 7455 CARMEL STREET CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	24,058.

FORM CA-199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CARROLL GARDENS ASSOCIATION, INC. 201 COLUMBIA STREET NEW ORLEANS, LA 70113	501(C)(3)	CAPACITY BUILDING	23,627.
EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY 4800 WEST 57TH STREET CHICAGO, IL 60637	501(C)(3)	CAPACITY BUILDING	23,010.
BACK BAY MISSION, INC. 1012 DIVISION STREET KETCHUM, ID 83340-1292	501(C)(3)	CAPACITY BUILDING	22,351.
COMMUNITY ACTION TEAM 125 NORTH 17TH STREET SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	22,000.
TRIPLE C HOUSING, INC. 1 DISTRIBUTION WAY SAN RAFAEL, CA 94901	501(C)(3)	CAPACITY BUILDING	21,962.
HABITAT FOR HUMANITY MISSISSIPPI CAPITAL AREA P.O. BOX 55634 BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	21,500.
PEOPLE'S SELF HELP HOUSING CORPORATION 3533 EMPLEO STREET SANTA MONICA, CA 90401	501(C)(3)	CAPACITY BUILDING	21,336.
LUCHA CONTRA EL SIDA, INC. URB VALENCIA NEW YORK, NY 10004	501(C)(3)	CAPACITY BUILDING	21,254.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CAPITOL HILL HOUSING FOUNDATION 1402 THIRD AVENUE BALTIMORE, MD 21201	501(C)(3)	CAPACITY BUILDING	20,365.
HOUSING AUTHORITY OF THE CITY OF JERSEY CITY, INC. 400 US HIGHWAY # 1` SOUTH BURLINGTON, VT 05403	PUBLIC HSG AUTH	CAPACITY BUILDING	20,224.
FLEMISTER HOUSING DEVELOPMENT CORPORATION 527 WEST 22ND STREET NEW ORLEANS, LA 70185	501(C)(3)	CAPACITY BUILDING	20,000.
HACIENDA CDC 5136 NE 42ND AVENUE SEATTLE, WA 98101	501(C)(3)	CAPACITY BUILDING	20,000.
PROJECT COMMUNITY CONNECTIONS, INC. 321 WEST HILL STREET SPENCER, IA 51301	501(C)(3)	CAPACITY BUILDING	20,000.
SETTLEMENT HOUSING FUND, INC 247 W. 37TH STREET TRUJILLO ALTO, PR 00977	501(C)(3)	CAPACITY BUILDING	19,910.
OHKAY OWINGEH HOUSING AUTHORITY P.O. BOX 1059 GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	19,674.
COMPREHENSIVE HOUSING ASSISTANCE, INC. 5809 PARK HEIGHTS AVENUE SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	19,608.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WEST HOLLYWOOD COMMUNITY HOUSING CORPORATION 7530 SANTA MONICA BOULEVARD LOS ANGELES, CA 90033	501(C)(3)	CAPACITY BUILDING	19,466.
CENTER FOR COMMUNITY ALTERNATIVES 115 EAST JEFFERSON STREET ATLANTA, GA 30303-1605	501(C)(3)	CAPACITY BUILDING	19,282.
DOWNTOWN EMERGENCY SERVICE CENTER 515 THIRD AVENUE CHICAGO, IL 60647-5216	501(C)(3)	CAPACITY BUILDING	19,201.
QUEST 35, INC. 878 ROCK STREET, NW SAN FRANCISCO, CA 94102	501(C)(3)	CAPACITY BUILDING	18,923.
ASIAN AMERICANS FOR EQUALITY 108 NORFOLK STREET LOS ANGELES, CA 90067	501(C)(3)	CAPACITY BUILDING	18,750.
JAMBOREE HOUSING CORPORATION 17701 COWAN YAKIMA, WA 98908	501(C)(3)	CAPACITY BUILDING	18,707.
CENTRAL CITY CONCERN 232 NORTHWEST SIXTH AVENUE ATLANTA, GA 30303-1605	501(C)(3)	CAPACITY BUILDNIG	18,585.
HOLLYWOOD COMMUNITY HOUSING CORPORATION 5020 SANTA MONICA BLVD. LANGLEY PARK, MD 20783	501(C)(3)	CAPACITY BUILDING	18,476.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SUPPORTIVE HOUSING COALITION OF NEW MEXICO P.O. BOX 27459 DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	18,421.
BLACK HILLS AREA HABITAT FOR HUMANITY 825 SAINT JOSEPH STREET DENVER, CO 80209	501(C)(3)	CAPACITY BUILDING	18,378.
CHARIS COMMUNITY HOUSING, INC. 750 GLENWOOD AVENUE, SE ATLANTA, GA 30303-1605	501(C)(3)	CAPACITY BUILDING	18,152.
LOTT COMMUNITY DEVELOPMENT CORPORATION 421 EAST 116TH STREET SAN FRANCISCO, CA 94133	501(C)(3)	CAPACITY BUILDING	18,062.
A COMMUNITY OF FRIENDS 3701 WILSHIRE BOULEVARD PHILADELPHIA, PA 19103	501(C)(3)	CAPACITY BUILDING	17,604.
PATH VENTURES 340 NORTH MADISON AVENUE GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	16,895.
COMMONBOND COMMUNITIES 1080 MONTREAL AVE SEATTLE, WA 98122-2014	501(C)(3)	CAPACITY BUILDING	16,739.
UNIVERSITY NEIGHBORHOOD HOUSING PROGRAM 2751 GRAND CONCOURSE OAKLAND, CA 94612-1517	501(C)(3)	CAPACITY BUILDING	16,724.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FAMILY RESOURCES OF NEW ORLEANS 817 N. CLAIBORNE AVENUE BROOKLYN, NY 11216	501(C)(3)	CAPACITY BUILDING	16,413.
AKWESASNE HOUSING AUTHORITY, INC. 378 STATE ROUTE 37 MESA, AZ 85203	PUBLIC HSG AUTH	CAPACITY BUILDING	16,136.
FUNDACION DE DESARROLLO COMUNAL DE PUERTO RICO, IN P.O. BOX 6300 CLEVELAND, OH 44104	501(C)(3)	CAPACITY BUILDING	16,000.
DEL NORTE NEIGHBORHOOD DEVELOPMENT CORPORATION 2926 ZUNI STREET SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	15,804.
HOUSING TRUST SILICON VALLEY 95 S MARKET STREET SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	15,787.
BRAND NEW BEGINNINGS 113 E. 58TH STREET ARLINGTON, VA 22201	501(C)(3)	CAPACITY BUILDING	15,131.
ABILITY HOUSING OF NORTHEAST FLORIDA, INC. 76 S LAURA STREET LOS ANGELES, CA 90010	501(C)(3)	CAPACITY BUILDING	15,130.
HOLY NATIVITY AND SAINT JOHNS DEVELOPMENT CORPORAT 4330-D PIMLICO ROAD PORTLAND, OR 97232	501(C)(3)	CAPACITY BUILDING	15,000.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST. NICKS ALLIANCE 2 KINGLAND AVENUE CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	14,865.
PRESBYTERIAN VILLAGES OF MICHIGAN 26200 LAHSER ROAD COLUMBUS, OH 43203	501(C)(3)	CAPACITY BUILDING	14,729.
REACH COMMUNITY DEVELOPMENT 4150 SW MOODY AVE. LAWRENCEVILLE, NJ 08648	501(C)(3)	CAPACITY BUILDING	14,710.
BICKERDIKE REDEVLOPMENT CORPORATION 2550 WEST NORTH AVENUE DENVER, CO 80209	501(C)(3)	CAPACITY BUILDING	14,418.
AFFORDABLE LIVING FOR THE AGING 2029 CENTURY PARK EAST LOS ANGELES, CA 90010	501(C)(3)	CAPACITY BUILDING	14,353.
GOOD SHEPHERD HOUSING & FAMILY SERVICES, INC. 8305 RICHMOND HIGHWAY CLEVELAND, OH 44104	501(C)(3)	CAPACITY BUILDING	14,240.
HO-CHUNK HOUSING & COMMUNITY DEVELOPMENT AGENCY P.O. BOX 730 LANGLEY PARK, MD 20783	501(C)(3)	CAPACITY BUILDING	13,869.
HABITAT FOR HUMANITY SUSQUEHANNA, INC. 205 S. HAYS STREET BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	13,542.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CATHOLIC CHARITIES HOUSING DEVELOPMENT CORPORATION 721 N. LASALLE STREET BROOKLYN, NY 11224	501(C)(3)	CAPACITY BUILDING	13,000.
MERCY HOUSING, INC. 1999 BROADWAY CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	13,000.
COMMUNITY PRESERVATION & DEVELOPMENT CORPORATION 5513 CONNECTICUT AVENUE SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	12,800.
METROPOLITAN DENVER HOMELESS INITIATIVE 711 PARK AVENUE WEST CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	12,737.
BAILEY HOUSE, INC. 1751 PARK AVENUE KETCHUM, ID 83340-1292	501(C)(3)	CAPACITY BUILDING	12,500.
DEVCORP NORTH 1448 W MORSE SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	12,500.
CORPORACION DEL PROYECTO ENLACE DEL CANO MARTIN PE P.O. BOX 41308 SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	12,050.
MERCY HOUSING CALIFORNIA 1500 S. GRAND AVENUE CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	10,753.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HANNAHVILLE INDIAN COMMUNITY N14911 HANNAHVILLE MIAMI, FL 33135	501(C)(3)	CAPACITY BUILDING	10,072.
BALTIMORE COMMUNITY FOUNDATION 2 EAST READ STREET KETCHUM, ID 83340-1292	501(C)(3)	CAPACITY BUILDING	10,000.
GREYSTON FOUNDATION 21 PARK AVE. BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	10,000.
LOWER EASTSIDE SERVICE CENTER, INC. 80 MAIDEN LANE SAN FRANCISCO, CA 94133	501(C)(3)	CAPACITY BUILDING	10,000.
HOME AGAIN, INC. 4 OLD RIVER PLACE PORTLAND, OR 97232	501(C)(3)	CAPACITY BUILDING	9,968.
HELLO HOUSING 1901 ROYAL OAKS DRIVE BROOKLYN, NY 11231	501(C)(3)	CAPACITY BUILDING	9,428.
GREENWOOD LEFLORE CARROLL ECONOMIC DEVELOPMENT FOU 402 HIGHWAY 82 BYPASS BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	8,945.
NEIGHBORHOOD PROGRESS, INC. 1956 WEST 25 STREET ST. PAUL, MN 55102	501(C)(3)	CAPACITY BUILDING	8,428.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FORDHAM BEDFORD HOUSING CORPORATION 2751 GRAND CONCOURSE NEW ORLEANS, LA 70185	501(C)(3)	CAPACITY BUILDING	8,305.
ARTSPACE PROJECTS, INC. 250 THIRD AVENUE NORTH LOS ANGELES, CA 90067	501(C)(3)	CAPACITY BUILDING	7,500.
NORTHEAST DENVER HOUSING CENTER 1735 GAYLORD STREET GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	7,480.
NEZ PERCE TRIBAL HOUSING AUTHORITY 111 VETERANS DRIVE GALLUP, NM 87305	PUBLIC HSG AUTH	CAPACITY BUILDING	6,797.
PEOPLE'S SELF HELP HOUSING CORPORATION 26 E. VICTORIA STREET SANTA MONICA, CA 90401	501(C)(3)	CAPACITY BUILDING	6,564.
TRANSITIONAL HOUSING CORPORATION 5101 16TH STREET N.W. SEATTLE, WA 98104-2304	501(C)(3)	CAPACITY BUILDING	6,563.
ST. CLAIR SUPERIOR DEVELOPMENT CORPORATION 4205 ST. CLAIR AVENUE CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	6,472.
SACRAMENTO NEIGHBORHOOD HOUSING SERVICES, INC. 2400 ALHAMBRA BOULEVARD LAWRENCEVILLE, GA 30043	501(C)(3)	CAPACITY BUILDING	5,985.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
INSTITUTO PARA EL DESARROLLO SOCIOECONOMICO Y DE V P.O. BOX 7154 SOUTH BURLINGTON, VT 05403	501(C)(3)	CAPACITY BUILDING	5,917.
NEW ORLEANS AREA HABITAT FOR HUMANITY, INC. 2900 ELYSIAN FIELDS AVENUE ST. PAUL, MN 55102	501(C)(3)	CAPACITY BUILDING	5,735.
INTERIM COMMUNITY DEVELOPMENT ASSOC. 310 MAYNARD AVENUE SOUTH SOUTH BURLINGTON, VT 05403	501(C)(3)		5,400.
BRIDGE STREET DEVELOPMENT CORPORATION 460 NOSTRAND AVENUE MINNEAPOLIS, MN 55401	501(C)(3)		5,189.
CITIZENS HOUSING AND PLANNING COUNCIL OF NEW YORK, 42 BROADWAY BILOXI, MS 39530	501(C)(3)	CAPACITY BUILDING	5,000.
COMMUNITY REBUILDS 548 LOCUST LANE SAN FRANCISCO, CA 94110	501(C)(3)		4,923.
NEIGHBORHOOD HOUSING SERVICES OF RICHLAND COUNTY 125 E. SEMINARY STREET COLUMBUS, OH 43215	501(C)(3)		4,043.
COMMUNITY HOUSING PARTNERSHIP 20 JONES STREET SAN FRANCISCO, CA 94110	501(C)(3)		4,009.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SOUTHERN CALIFORNIA ASSOCIATION OF NON-PROFIT HOUS 501 SHATTO PLACE CLEVELAND, OH 44102	501(C)(3)		4,000.
OPENHOUSE 1800 MARKET STREET GALLUP, NM 87305	501(C)(3)		3,983.
EMPIRE HOMES OF MARYLAND, INC. 1800 N. CHARLES STREET CHICAGO, IL 60637	501(C)(3)		3,191.
SUNBURST COMMUNITY SERVICE FOUNDATION P.O. BOX 1863 CHICAGO, IL 60626	501(C)(3)		2,848.
LITTLE HAITI HOUSING ASSOCIATION, INC. 181 NORTHEAST 82ND STREET JACKSON HEIGHTS, NY 11372	501(C)(3)		2,500.
SICANGU WICOTI AWAYANKAPE CORPORATION P.O. BOX 69 TRUJILLO ALTO, PR 00977	501(C)(3)		2,209.
THE AFFORDABLE HOUSING GROUP OF NORTH CAROLINA, IN 4600 PARK ROAD DORCHESTER, MA 02125	501(C)(3)		1,815.
COMMUNITY HOUSING INITIATIVES, INC. 14 WEST 21ST STREET SAN FRANCISCO, CA 94110	501(C)(3)		1,617.

FORM CA 199, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR ATTACHMENT 2 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
COMMUNITY BUILD, INC. 4305 DEGNAN BOULEVARD SAN FRANCISCO, CA 94110	501(C)(3)		1,500.
SOUTHEAST EFFECTIVE DEVELOPMENT 5117 RAINIER AVENUE SOUTH CLEVELAND, OH 44102	501(C)(3)		1,265.
VALDOSTA-LOWNDES COUNTY HABITAT FOR HUMANITY, INC. 2010 EAST CYPRESS STREET LOS ANGELES, CA 90033	501(C)(3)		497.
ASTELLA DEVELOPMENT CORPORATION 1618 MERMAID AVENUE ARLINGTON, VA 22201	501(C)(3)		
SATELLITE HOUSING 1521 UNIVERSITY AVENUE TRUJILLO ALTO, PR 00977	501(C)(3)		-36,879.
		TOTAL CONTRIBUTIONS PAID	14,995,685.

ATTACHMENT 4

PART II - OTHER EXPENSES

PENSION EXPENSE	4,833,038.
ADVERTISING	712,374.
TRAVEL EXPENSES	1,659,861.
CONFERENCES	1,089,603.
PROFESSIONAL AND CONTRACT SERV	15,079,260.
MISCELLANEOUS	1,704,578.
MARKETING	292,411.
DIRECT FUNDRAISING	-568,667.
INDIRECT COSTS	
TOTAL OTHER EXPENSES	24,802,458.

ATTACHMENT 6

SCHEDULE L - INVESTMENTS IN STOCK

DESCRIPTION	BEG. OF YEAR	END OF YEAR
EQUITY FUNDS	6,333,068.	12,637,126.
BOND FUNDS	6,088,303.	9,306,757.
ENTERPRISE COMMUNITY INVEST.	109,020,137.	119,084,137.
OTHER EQUITY INVESTMENTS	342,939.	1,040,828.
EHOP	218,876.	224,249.
CORNERSTONE	2,964,533.	3,531,909.
ENTERPRISE COMMUNITY LOAN FUND	33,652,877.	40,553,109.
ALTERNATIVE INVESTMENTS	697,050.	236,924.
REAL ESTATE INVEST TRUST FUND		1,723,911.
TOTAL INVESTMENTS IN STOCK	159,318,436.	188,338,950.

ATTACHMENT 7

SCHEDULE L - OTHER ASSETS

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DUE FROM AFFILIATE	8,656,673.	6,218,539.
PREPAID EXPENSES	235,635.	292,984.
TOTAL OTHER ASSETS	8,892,308.	6,511,523.

ATTACHMENT 8

SCHEDULE M-1 - INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED

EQUITY IN AFFILIATES	15,606,000.
CHANGE IN NON-CONTROLLING INTERESTS	1,957,000.
AUDIT STATEMENT-ONLY CHANGE IFN CONTROLLING INTER	672,000.
GAAP TO TAX ADJ	-313,000.
NET UNREALIZED GAIN ON INVESTMENTS	921,000.
TOTAL INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED	18,843,000.