Form **8879-EO**

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

For calendar year 2016, or fiscal year beginning 01/01 , 2016, and ending 12/31 , 20 16

▶ **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

2016

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

SALLY HEBNER, S.V.P.\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	99242968.
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, line 3c)	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 2016 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 to enter my PIN 1 4 2 4 6 as my signature

ERO firm name

Enter five numbers, but do not enter all zeros

on the organization's tax year 2016 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 2016 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 ▶ Sally Hebner Date ▶ 10/24/17

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 3 2 4 3 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 2016 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 ▶ Anne E Schaefer Date ▶ 09/15/2017

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

For Paperwork Reduction Act Notice, see back of form. Form **8879-EO** (2016)

JSA
6E1676 1.000

027

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

TAXABLE YEAR **2016**

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	99,544,522.
2 Total gross income (Form 199, line 8)	2	99,544,522.
3 Total expenses and disbursements (Form 199, Line 9)	3	69,160,517.

Part II Settle Your Account Electronically for Taxable Year 2016

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 to 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 2016 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 ▶ Sally Helman 10/2/17 ▶ S.V.P.\CFO

Signature of Officer | Date | Title

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 FTB Pub. 1345, 2016 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 ▶ Anna Dehn

Date	Check if also paid preparer	Check if self-employed	ERO's PTIN
09/15/2017	X	☐	P00230625

Firm's name (or yours if self-employed) and address ▶ COHNREZNICK LLP

FEIN: 22-1478099

7501 WISCONSIN AVENUE 400E

BETHESDA MD

ZIP code: 20814-6583

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

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

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

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning , 2016, 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 $: 99,894,872.

F Name and address of principal officer: SALLY HEBNER
11000 BROKEN LAND PARKWAY700 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

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.

Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	24.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23.
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	254.
	6 Total number of volunteers (estimate if necessary)	6	71.
	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.

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	68,558,911.	89,905,213.
	9 Program service revenue (Part VIII, line 2g)	8,141,668.	2,956,275.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	481,724.	574,671.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,804,031.	5,806,809.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	81,986,334.	99,242,968.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	15,593,111.	15,871,165.
	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)	32,957,156.	25,072,760.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	51,329.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,912,766.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	27,516,010.	28,165,263.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	76,066,277.	69,160,517.
	19 Revenue less expenses. Subtract line 18 from line 12	5,920,057.	30,082,451.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	299,415,980.	333,035,322.
	21 Total liabilities (Part X, line 26)	34,409,676.	26,952,542.
	22 Net assets or fund balances. Subtract line 21 from line 20	265,006,304.	306,082,780.

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: 06/01/2017

CLIENT'S COPY

▶ SALLY HEBNER, S.V.P.\CFO
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		09/15/2017		P00230625

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

Firm's address ▶ 7501 WISCONSIN AVENUE 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** (2016)

Part III **Statement of Program Service Accomplishments**

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

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

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 $ 60,833,672. including grants of $ 15,871,165.) (Revenue $ 2,956,275.)
OVER MORE THAN 30 YEARS, ENTERPRISE HAS CREATED MORE THAN 358,000 HOMES, INVESTED 23.4 BILLION DOLLARS AND TOUCHED MILLIONS OF LIVES.

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 ▶ 60,833,672.

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		X
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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
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		
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 241		
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 254		
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 . . . . . 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.	1a 24		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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	X	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 1

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: ▶
SALLY HEBNER 11000 BROKEN LAND PARKWAY#700 COLUMBIA, MD 21044 410-772-2683

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 X

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	40.00									
PRESIDENT	0.	X		X				626,216.	0.	34,082.
(2) BILL BECKMANN	1.00									
TRUSTEE	0.	X						0.	0.	0.
(3) EDWARD NORTON	1.00									
TRUSTEE	0.	X						0.	0.	0.
(4) JONATHAN F.P. ROSE	1.00									
TRUSTEE	0.	X						0.	0.	0.
(5) TONY SALAZAR	1.00									
TRUSTEE	0.	X						0.	0.	0.
(6) J RONALD TERWILLIGER	1.00									
TRUSTEE	0.	X						0.	0.	0.
(7) DORA LEONG GALLO	1.00									
TRUSTEE	0.	X						0.	0.	0.
(8) PRISCILLA ALMODOVAR	1.00									
TRUSTEE	0.	X						0.	0.	0.
(9) GREGORY BAER	1.00									
TRUSTEE	0.	X						0.	0.	0.
(10) MARIA BARRY	1.00									
TRUSTEE	0.	X						0.	0.	0.
(11) RICK LAZIO	1.00									
TRUSTEE	0.	X						0.	0.	0.
(12) LANCE FORS	1.00									
TRUSTEE	0.	X						0.	0.	0.
(13) CHRISTOPHER COLLINS	1.00									
TRUSTEE	0.	X						0.	0.	0.
(14) BABARA POPPE	1.00									
TRUSTEE	0.	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) DINA HABIB POWELL	1.00									
TRUSTEE	0.	X						0.	0.	0.
(16) RONALD RATNER	1.00									
TRUSTEE	0.	X						0.	0.	0.
(17) MEGAN SANDEL	1.00									
TRUSTEE	0.	X						0.	0.	0.
(18) ROY SWAN	1.00									
TRUSTEE	0.	X						0.	0.	0.
(19) DONALD S. FALK	1.00									
TRUSTEE	0.	X						0.	0.	0.
(20) CAROL GALANTE	1.00									
TRUSTEE	0.	X						0.	0.	0.
(21) RENEE LEWIS GLOVER	1.00									
TRUSTEE	0.	X						0.	0.	0.
(22) PATRICK MCENERNEY	1.00									
TRUSTEE	0.	X						0.	0.	0.
(23) BETH MYERS	1.00									
TRUSTEE	0.	X						0.	0.	0.
(24) RAPHAEL BOSTIC	1.00									
TRUSTEE	0.	X						0.	0.	0.
(25) JEFFREY SCHAFFER	40.00									
FORMER OFFICER	0.			X				38,599.	0.	0.
1b Sub-total ▶								626,216.	0.	34,082.
c Total from continuation sheets to Part VII, Section A ▶								7,651,198.	2,388,788.	883,063.
d Total (add lines 1b and 1c) ▶								8,277,414.	2,388,788.	917,145.

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 ▶ 69

		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
ATTACHMENT 2		

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 ▶ 10

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) RICHARD D. GROSS	40.00									
OFFICER	0.			X				254,003.	0.	26,133.
(27) MARK MCDERMOTT	40.00									
OFFICER	0.			X				228,734.	0.	21,371.
(28) LORI MICHELLE CHATMAN	1.00									
OFFICER	37.00			X				0.	314,225.	22,863.
(29) ALAN SCOTT ANDERSON	40.00									
OFFICER	0.			X				216,002.	0.	21,338.
(30) ALAZNE M. SOLIS	40.00									
OFFICER	0.			X				349,838.	0.	24,066.
(31) FAITH E. THOMAS	20.00									
OFFICER	20.00			X				0.	286,482.	37,686.
(32) MATTHEW D. HOFFMAN	1.00									
OFFICER	37.00			X				0.	223,895.	34,693.
(33) MEAGHAN E. VLKOVIC	40.00									
OFFICER	0.			X				201,229.	0.	20,793.
(34) AMALIA M. KASTBERG	40.00									
FORMER OFFICER	0.			X				406,066.	0.	1,724.
(35) MICHELLE WHETTEN	40.00									
OFFICER	0.			X				213,694.	0.	19,839.
(36) DAVID CHARLES BOWERS	40.00									
OFFICER	0.			X				217,510.	0.	18,102.
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 ▶ 69

		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			
(37) EDWARD DAVID MANEKIN	20.00									
OFFICER	20.00			X				0.	188,258.	28,326.
(38) KEITH E. FAIREY	40.00									
OFFICER	0.			X				256,635.	0.	27,116.
(39) PETRA D. MONTAGUE	40.00									
OFFICER	0.			X				183,890.	0.	13,498.
(40) KATHERINE W. SWENSON	40.00									
OFFICER	0.			X				193,667.	0.	18,038.
(41) ANTHONY JOSEPH DISPIGNO	40.00									
OFFICER	0.			X				332,467.	0.	29,592.
(42) ANDREW EDWARD GEER	40.00									
OFFICER	0.			X				197,590.	0.	19,653.
(43) MELINDA J. POLLACK	40.00									
OFFICER	0.			X				217,114.	0.	19,729.
(44) JACQUELINE WAGGONER	40.00									
OFFICER	0.			X				207,687.	0.	17,718.
(45) JON SEARLES	40.00									
OFFICER	0.			X				205,686.	0.	16,111.
(46) MARY JO BARRANCO	40.00									
OFFICER	0.			X				0.	222,690.	33,288.
(47) TIFFANY MANUEL	40.00									
OFFICER	0.			X				199,613.	0.	23,152.
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 ▶ 69

		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) BENJAMIN NICHOLS	40.00									
OFFICER	0.			X				181,566.	0.	18,599.
(49) THOMAS OSDOBA	40.00									
FORMER OFFICER	0.			X				177,618.	0.	3,173.
(50) DIANE YENTEL	40.00									
FORMER OFFICER	0.			X				55,446.	0.	3,221.
(51) ANDREW JAKABOVICS	40.00									
OFFICER	0.			X				190,427.	0.	20,971.
(52) ANGELA BOYD	40.00									
OFFICER	0.			X				186,337.	0.	14,448.
(53) LAUREL BLATCHFORD	40.00									
OFFICER	0.			X				367,679.	0.	20,295.
(54) ANDREW JOHNSTON	40.00									
OFFICER	0.			X				0.	291,753.	35,369.
(55) CRAIG MELLENDICK	40.00									
OFFICER	0.			X				0.	461,101.	43,477.
(56) JUDITH KENDE	40.00									
OFFICER	0.			X				264,720.	0.	34,864.
(57) BRYAN PITTINGER	40.00									
OFFICER	0.			X				0.	176,867.	40,978.
(58) EUN SHIN	40.00									
OFFICER	0.			X				0.	223,517.	16,526.
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 ▶ 69

		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) MARY ANN LEONARD	40.00									
OFFICER	0.			X				206,424.	0.	19,965.
(60) ALLISON KNAPP	40.00									
OFFICER	0.			X				149,365.	0.	4,291.
(61) PAUL BERNARD	40.00									
OFFICER	0.			X				213,113.	0.	17,895.
(62) MARION MCFADDEN	40.00									
OFFICER	0.			X				76,250.	0.	2,059.
(63) WILLIAM R. FREY	40.00									
HIGHLY COMPENSATED	0.					X		207,252.	0.	21,576.
(64) CATHERINE HYDE	40.00									
HIGHLY COMPENSATED	0.					X		182,276.	0.	14,663.
(65) TIMOTHY MAY	40.00									
HIGHLY COMPENSATED	0.					X		176,713.	0.	17,774.
(66) MATTHEW MORRIN	40.00									
HIGHLY COMPENSATED	0.					X		198,952.	0.	16,449.
(67) JAY PATRICK	40.00									
HIGHLY COMPENSATED	0.					X		167,383.	0.	17,497.
(68) MICHAEL MCNEELY	40.00									
FORMER OFFICER	0.						X	354,895.	0.	4,144.
(69) KAREN M. LADO	40.00									
FORMER OFFICER	0.						X	174,758.	0.	0.
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 ▶ 69

		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	1,284,259.			
	d	Related organizations	1d	9,430,000.			
	e	Government grants (contributions)	1e	25,543,854.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	53,647,100.			
	g	Noncash contributions included in lines 1a-1f: $ 301,554.					
	h	**Total.** Add lines 1a-1f ▶		89,905,213.			
Program Service Revenue			**Business Code**				
	2a	AFFILIATE SERVICES	531390	2,379,248.	2,379,248.		
	b	TRAINING PROGRAMS	531390	559,519.	559,519.		
	c	OTHER INCOME	531390	1,134.	1,134.		
	d	FLOW THRU FROM LAFITTE REDEVELOPMENT LLC	531390	16,374.	16,374.		
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f ▶		2,956,275.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts). ATTACHMENT 3 ▶		574,671.			574,671.
	4	Income from investment of tax-exempt bond proceeds ▶		0.			
	5	Royalties ▶		6,145,158.			6,145,158.
			(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 $ 1,284,259. of contributions reported on line 1c). See Part IV, line 18 ATCH 4	a 313,555.				
	b	Less: direct expenses	b 651,904.				
	c	Net income or (loss) from fundraising events ATCH 5 ▶		-338,349.			-338,349.
	9a	Gross income from gaming activities. See Part IV, line 19	a 0.				
	b	Less: direct expenses	b 0.				
	c	Net income or (loss) from gaming activities ▶		0.			
	10a	Gross sales of inventory, less returns and allowances	a 0.				
	b	Less: cost of goods sold	b 0.				
	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. ▶		99,242,968.	2,956,275.		6,381,480.

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	15,871,165.	15,871,165.		
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	7,344,836.	6,153,374.	421,806.	769,656.
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	13,023,812.	10,337,610.	578,228.	2,107,974.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0.			
9 Other employee benefits	3,421,092.	2,752,709.	207,398.	460,985.
10 Payroll taxes	1,283,020.	1,039,246.	63,894.	179,880.
11 Fees for services (non-employees):				
a Management	0.			
b Legal	145,704.	122,236.	23,468.	
c Accounting	165,400.		165,400.	
d Lobbying	259,000.		259,000.	
e Professional fundraising services. See Part IV, line 17	51,329.			51,329.
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	380,734.	326,094.	43,480.	11,160.
13 Office expenses	532,671.	461,013.	28,046.	43,612.
14 Information technology	3,207,664.	3,207,664.		
15 Royalties	0.			
16 Occupancy	2,283,017.	1,938,966.	85,739.	258,312.
17 Travel	1,537,726.	1,349,187.	85,982.	102,557.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	961,020.	862,225.	83,884.	14,911.
20 Interest	0.			
21 Payments to affiliates	6,164,896.	4,452,005.	812,860.	900,031.
22 Depreciation, depletion, and amortization	1,678,047.	1,609,343.	56,345.	12,359.
23 Insurance	85,448.		85,448.	
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	10,269,586.	9,898,803.	370,783.	
b BAD DEBT	125,578.	125,578.		
c BANK FEES	134,206.	134,206.		
d MISC.	234,566.	192,248.	42,318.	
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	69,160,517.	60,833,672.	3,414,079.	4,912,766.
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		25,172,528.	1	45,552,162.
	2	Savings and temporary cash investments		3,758,454.	2	4,308,936.
	3	Pledges and grants receivable, net		13,204,855.	3	16,775,748.
	4	Accounts receivable, net		8,927,211.	4	5,845,276.
	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 6		22,877,235.	7	25,049,736.
	8	Inventories for sale or use		0.	8	0.
	9	Prepaid expenses and deferred charges		276,567.	9	0.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 13,026,791.			
	b	Less: accumulated depreciation	10b 8,040,757.	4,861,043.	10c	4,986,034.
	11	Investments - publicly traded securities ATCH 7		24,616,507.	11	25,034,292.
	12	Investments - other securities. See Part IV, line 11		437,783.	12	586,308.
	13	Investments - program-related. See Part IV, line 11		192,164,187.	13	198,056,401.
	14	Intangible assets		0.	14	0.
	15	Other assets. See Part IV, line 11		3,119,610.	15	6,840,429.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		299,415,980.	16	333,035,322.
Liabilities	17	Accounts payable and accrued expenses		11,550,545.	17	7,959,174.
	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		5,416,992.	21	1,540,614.
	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		17,442,139.	25	17,452,754.
	26	**Total liabilities.** Add lines 17 through 25		34,409,676.	26	26,952,542.
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		205,686,485.	27	205,342,359.
	28	Temporarily restricted net assets		59,319,819.	28	100,740,421.
	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		265,006,304.	33	306,082,780.
	34	Total liabilities and net assets/fund balances		299,415,980.	34	333,035,322.

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	99,242,968.
2	Total expenses (must equal Part IX, column (A), line 25)	2	69,160,517.
3	Revenue less expenses. Subtract line 2 from line 1	3	30,082,451.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	265,006,304.
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	10,994,025.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	306,082,780.

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

2016

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 12, 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 (Form 990 or 990-EZ).)

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

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

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

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

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

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

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ 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.)

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

12 ☐ 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

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

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

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

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

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

f Enter the number of supported organizations . . . . . ☐

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	45,074,369.	53,644,487.	55,656,679.	68,555,911.	89,905,213.	312,836,659.
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	45,074,369.	53,644,487.	55,656,679.	68,555,911.	89,905,213.	312,836,659.
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)						3,166,784.
6 **Public support.** Subtract line 5 from line 4.						309,669,875.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	45,074,369.	53,644,487.	55,656,679.	68,555,911.	89,905,213.	312,836,659.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,536,575.	4,691,954.	5,105,125.	5,619,619.	6,719,829.	27,673,102.
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						340,509,761.

12 Gross receipts from related activities, etc. (see instructions) . . . . . 12 42,733,396.

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 2016 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 90.94 %

15 Public support percentage from 2015 Schedule A, Part II, line 14 . . . . . 15 90.64 %

16a **33 1/3 % support test - 2016.** 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 - 2015.** 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 - 2016.** 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 - 2015.** 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 10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2016** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2015** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2016.** 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 - 2015.** 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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 12a or 12b 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	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 or 990-EZ).*	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 9a) 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 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 (explain in Part VI). **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 2016 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-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013.			
d	From 2014.			
e	From 2015.			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	**Excess distributions carryover to 2017**. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013. . . .			
c	Excess from 2014. . . .			
d	Excess from 2015. . . .			
e	Excess from 2016. . . .			

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

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

2016

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 for 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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	$ 16,265,591.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	THE KENDEDA FUND 501 SILVERSIDE ROAD SUITE 123 WILMINGTON, DE 19808	$ 2,331,908.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	ENTERPRISE COMMUNITY INVESTMENT, INC. 11000 BROKEN LAND PARKWAY SUITE 700 COLUMBIA, MD 21044	$ 9,430,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	CPD OFFICE OF TECHNICAL ASSIST & MGMT 451 7TH STREET, SUITE 7218 WASHINGTON, DC 20410	$ 2,566,356.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	BANK OF AMERICA 100 NORTH TRYON STREET CHARLOTTE, NC 28255	$ 2,639,981.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	J.P. MORGAN CHASE 270 PARK AVENUE, 38TH FLOOR NEW YORK, NY 10017	$ 2,006,899.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

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
7	US DEPARTMENT OF HOUSING & URBAN RENEWAL 451 7TH STREET SW WASINGTON, DC 20410	$ 2,773,102.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] 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

2016

Open to Public Inspection

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

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

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-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," on 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. (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) . . . . . ▶ $

3 Volunteer hours for political campaign activities (see instructions) . . . . . .

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)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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 on 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?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?	X		9,286.
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		611,056.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			620,342.
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 campaign activity 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.

SEE PAGE 4

Part IV Supplemental Information *(continued)*

PART IV DETAILED EXPLANATION

1A. ENTERPRISE CONDUCTED A LOBBY DAY AND HAD 13 VOLUNTEERS REPRESENTING MEMBERS OF THE BOARD OF TRUSTEES AND THE ENTERPRISE COMMUNITY LEADERSHIP COUNCIL, AN INDUSTRY GROUP, THAT PARTICIPATED IN MEETINGS WITH LEGISLATORS AND THEIR STAFF.

1D. ENTERPRISE MANAGES AN EMAIL PLATFORM TO SEND ACTION ALERT NOTIFICATIONS TO INTERESTED PARTIES REGARDING AFFORDABLE HOUSING RELATED LEGISLATION. THE COST OF STAFF PERFORMING THIS ACTIVITY WAS $2,086 AND THE COST OF THE CONSULTANT WAS $7,200.

1G. CONSISTENT WITH OUR MISSION TO CREATE OPPORTUNITIES FOR LOW AND MODERATE INCOME PEOPLE THROUGH AFFORDABLE HOUSING IN DIVERSE THRIVING COMMUNITIES, ENTERPRISE PRIMARILY PERFORMS LOBBYING ACTIVITES WITH STAFF MEMBERS OR PAID LOBBYISTS TO SUPPORT LEGISLATION ASSOCIATED WITH AFFORDABLE HOUSING AND RELATED FUNDING, SUCH AS LOW INCOME HOUSING TAX CREDIT, NEW MARKET TAX CREDIT, CERTAIN HUD PROGRAMS INCLUDING SECTION 4 AND OTHER PROGRAMS. VISITS TO CAPITOL HILL ARE CONDUCTED PERIODICALLY TO MEET WITH LEGISLATORS AND THEIR STAFF REGARDING THESE FEDERAL PROGRAMS AND ISSUES. STAFF EFFORTS ALSO OCCUR AT THE STATE AND LOCAL LEVEL TO ADDRESS LEGISLATION TO SUPPORT AFFORDABLE HOUSING MATTERS. THE COST OF STAFF WAS $303,338 AND OUTSIDE CONSULTANTS OF $307,718.

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" on 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

2016

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" on 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" on 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, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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" on 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 on Part XIII ☒

Part V Endowment Funds.
Complete if the organization answered "Yes" on 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 on 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" on line 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" on 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	1,902,059.		1,491,848.	410,211.
d Equipment	2,403,105.		1,887,222.	515,883.
e Other	8,721,627.		4,661,687.	4,059,940.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				4,986,034.

Schedule D (Form 990) 2016

Part VII Investments - Other Securities.
Complete if the organization answered "Yes" on 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" on 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.	144,844,808.	FMV
(2) OTHERS	2,818,825.	FMV
(3) ENTERPRISE COMMUNITY LOAN FUND	50,883,188.	FMV
(4) IMPACTUS MARKETPLACE,LLC	-490,420.	FMV
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶	198,056,401.	

Part IX Other Assets.
Complete if the organization answered "Yes" on 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" on 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 AGAINST RECEIVABLES	17,452,754.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	17,452,754.

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 [X]

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

1	Total revenue, gains, and other support per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	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" on 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, 2016. ACCORDINGLY, NO PROVISION OR BENEFIT FROM INCOME TAXES HAS BEEN RECORDED.

UNCERTAIN TAX POSITIONS

FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015, 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

Supplem .l Information Regarding Fundraising or G: .g Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2016

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" on 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 10 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	ATTACHMENT 1						
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total	▶					51,329.	

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" on 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	1,141,529.	232,640.	223,645.	1,597,814.
	2 Less: Contributions	937,279.	172,385.	174,595.	1,284,259.
	3 Gross income (line 1 minus line 2)	204,250.	60,255.	49,050.	313,555.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	222,746.	102,073.	121,443.	446,262.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	172,318.	13,018.	20,306.	205,642.
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				651,904.
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-338,349.

Part III **Gaming.** Complete if the organization answered "Yes" on 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: _____

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

b If "Yes," explain: _____

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

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

13 Indicate the percentage of gaming 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).

ATTACHMENT 1

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES	NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
SOCIAL CAPITAL INC. 980 NORTH MICHIGAN AVENUE, SUITE 1610 CHICAGO IL 60611	FUNDRAISING CAMPAIGN		X		14,410.	
ANNE BARNEY P.O BOX 146 GREAT CACAPON WV 25422	WRITING SERVICES		X		9,619.	
NORTH WATER PARTNERS 1455 W. 29TH CLEVELAND OH 44113	FUNDRAISING CAMPAIGN		X		9,650.	
GHEBRE S. MEHRETEAB 600 FRANKLIN WAY WEST CHESTER PA 19380	FUNDRAISING CAMPAIGN		X		17,650.	

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" on 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

2016

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" on 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 noncash assistance	(h) Purpose of grant or assistance
(1) MAKE ROOM, INC 1875 CONNECTICUT AVE NW WASHINGTON, DC 2000	81-4676815		2,300,000.				CAPACITY BULIDING
(2) NEIGHBORWORKS AMERICA, INC. 999 NORTH CAPITOL STREET, NE WASHINGTON, DC	34-1611055	501(C)(3)	280,200.				CAPACITY BULIDING
(3) HOPE COMMUNITY, INC. 177 EAST 104TH STREET NEW YORK, NY 10029	23-7013134	501(C)(3)	250,000.				CAPACITY BULIDING
(4) THE SAN FRANCISCO FOUNDATION ONE EMBARCADERO CENTER SAN FRANCISCO, CA 94	01-0679337	501(C)(3)	250,000.				CAPACITY BULIDING
(5) SUN VALLEY ECODISTRICT TRUST 1550 WEWATTA STREET DENVER, CO 80202	81-3256448	501(C)(3)	200,000.				CAPACITY BULIDING
(6) PACIFIC COMMUNITY VENTURES, INC 51 FEDERAL STREET, SUITE 100 SAN FRANCISCO,	77-0485877	501(C)(3)	180,000.				CAPACITY BULIDING
(7) PROJECT COMMUNITY CONNECTIONS, INC. 321 WEST HILL STREET DECATUR, GA 30030	58-2373779	501(C)(3)	155,861.				CAPACITY BULIDING
(8) MIDTOWN DETROIT, INC. 3939 WOODWARD DETROIT, MI 48201	45-4582324	501(C)(3)	147,132.				CAPACITY BULIDING
(9) CLEVELAND HOUSING NETWORK, INC 2999 PAYNE AVENUE CLEVELAND, OH 44114	34-1346763	501(C)(3)	150,925.				CAPACITY BULIDING
(10) JEFFERSON EAST, INC. 14628 E JEFFERSON AVENUE DETROIT, MI 48215	38-3231066	501(C)(3)	141,673.				CAPACITY BULIDING
(11) MERCY HOUSING CALIFORNIA 1500 S. GRAND AVENUE LOS ANGELES, CA 90015	94-3081666	501(C)(3)	132,998.				CAPACITY BULIDING
(12) FIRST COMMUNITY HOUSING, INC. 75 EAST SANTA CLARA STREET SAN JOSE, CA 951	77-0119210	501(C)(3)	130,000.				CAPACITY BULIDING

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" on 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

2016

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" on 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 noncash assistance	(h) Purpose of grant or assistance
(1) EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATIO 1825 SAN PABLO AVENUE OAKLAND, CA 94612-151	51-0171851	501(C)(3)	123,679.				CAPACITY BULIDING
(2) CAMBA, INC. 1720 CHURCH AVENUE BROOKLYN, NY 11226	11-2480339	501(C)(3)	125,032.				CAPACITY BULIDING
(3) FUND FOR PUBLIC HOUSING, INC 250 BROADWAY NEW YORK, NY 10007	47-4915755	501(C)(3)	119,999.				CAPACITY BULIDING
(4) THUNDER VALLEY COMMUNITY DEVELOPMENT CORPOR P.O. BOX 290 PORCUPINE, SD 57772	20-8090454	501(C)(3)	117,125.				CAPACITY BULIDING
(5) CAPITOL HILL HOUSING FOUNDATION 1620 12TH AVENUE SEATTLE, WA 98122	27-1682190	501(C)(3)	114,286.				CAPACITY BULIDING
(6) TENDERLOIN NEIGHBORHOOD DEVELOP. CORP. 201 EDDY STREET SAN FRANCISCO, CA 94102	94-2761808	501(C)(3)	113,462.				CAPACITY BULIDING
(7) A COMMUNITY OF FRIENDS 3701 WILSHIRE BOULEVARD LOS ANGELES, CA 900	954203106	501(C)(3)	102,871.				CAPACITY BULIDING
(8) SATELLITE AFFORDABLE HOUSING ASSOCIATES 1835 ALCATRAZ AVE BERKELEY, CA 94703	94-3031375	501(C)(3)	100,000.				CAPACITY BULIDING
(9) SEATTLE CHINATOWN-INTERNATIONAL DISTRICT PR 409 MAYNARD AVENUE SOUTH SEATTLE, WA 98114	91-1645126	501(C)(3)	100,000.				CAPACITY BULIDING
(10) EAH, INC. DAVIES PACIFIC CENTER HONOLULU, HI 96813	94-1699153	501(C)(3)	98,000.				CAPACITY BULIDING
(11) SKID ROW HOUSING TRUST 1317 EAST SEVENTH STREET LOS ANGELES, CA 90	95-4205316	501(C)(3)	97,164.				CAPACITY BULIDING
(12) THE MAYOR'S FUND TO ADVANCE NEW YORK CITY 253 BROADWAY NEW YORK, NY 10007	13-3783906	501(C)(3)	95,895.				CAPACITY BULIDING

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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" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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OMB No. 1545-0047

2016

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 (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 noncash assistance	(h) Purpose of grant or assistance
(1) LOTT COMMUNITY DEVELOPMENT CORPORATION 421 EAST 116TH STREET NEW YORK, NY 10029	13-3620671	501(C)(3)	95,729.				CAPACITY BULIDING
(2) HEARTLAND HOUSING, INC. 208 S. LASALLE CHICAGO, IL 60604	36-3642952	501(C)(3)	92,560.				CAPACITY BULIDING
(3) ARTSPACE PROJECTS, INC. 250 THIRD AVENUE NORTH MINNEAPOLIS, MN 5540	41-1350071	501(C)(3)	90,875.				CAPACITY BULIDING
(4) CARRFOUR SUPPORTIVE HOUSING, INC. 1398 SOUTHWEST 1ST STREET MIAMI, FL 33135	65-0387766	501(C)(3)	90,000.				CAPACITY BULIDING
(5) EASTERN MARKET CORPORATION 2934 RUSSELL DETROIT, MI 48207	32-0030432	501(C)(3)	90,000.				CAPACITY BULIDING
(6) HOME BY HAND 1324 RIVIERA AVENUE NEW ORLEANS, LA 70122	47-3700373	501(C)(3)	90,000.				CAPACITY BULIDING
(7) REACH COMMUNITY DEVELOPMENT 4150 SW MOODY AVE. PORTLAND, OR 97239	93-0813981	501(C)(3)	90,000.				CAPACITY BULIDING
(8) PARK HEIGHTS RENAISSANCE, INC. 3939 REISTERSTOWN ROAD BALTIMORE, MD 21215	77-0673126	501(C)(3)	87,290.				CAPACITY BULIDING
(9) GULF COAST HOUSING PARTNERSHIP, INC. 1610-A ORETHA CASTLE HALEY BOULEVARD NEW OR	20-4216595	501(C)(3)	85,934.				CAPACITY BULIDING
(10) ATLANTA CLT COLLABORATIVE, INC. 3235 PEACHTREE ROAD ATLANTA, GA 30305-3609	90-0605040	501(C)(3)	83,000.				CAPACITY BULIDING
(11) CAPITOL HILL HOUSING IMPROVEMENT PROGRAM 1406 TENTH AVENUE SEATTLE, WA 98122	91-0979968	501(C)(3)	82,172.				CAPACITY BULIDING
(12) PROVIDENCE COMMUNITY HOUSING 1050 SOUTH JEFFERSON DAVIS PARKWAY NEW ORLE	20-4627275	501(C)(3)	88,387.				CAPACITY BULIDING

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(1) FRIENDS OF JEWISH COMMUNITY HOUSING FOR THE 30 WALLINGFORD ROAD BOSTON, MA 02135	04-2607197	501(C)(3)	80,528.				CAPACITY BULIDING
(2) EAST LA COMMUNITY CORPORATION 2917 EAST 1ST STREET, SUITE 101 LOS ANGELES	95-4531076	501(C)(3)	80,000.				CAPACITY BULIDING
(3) WBC COMMUNITY DEVELOPMENT CORPORATION 3809 FAIRVIEW AVENUE BALTIMORE, MD 21216	20-2652453	501(C)(3)	78,411.				CAPACITY BULIDING
(4) PROJECT ACCESS NOW PO BOX 10953 PORTLAND, OR 97296	20-8928388	501(C)(3)	76,000.				CAPACITY BULIDING
(5) CARE ALLIANCE HEALTH CENTER 1530 ST. CLAIR AVENUE CLEVELAND, OH 44114-2	34-1748776	501(C)(3)	75,909.				CAPACITY BULIDING
(6) COMMUNITY CORPORATION OF SANTA MONICA 1423 SECOND STREET SANTA MONICA, CA 90401	95-3795161	501(C)(3)	75,240.				CAPACITY BULIDING
(7) DOWNTOWN EMERGENCY SERVICE CENTER 515 THIRD AVENUE SEATTLE, WA 98104-2304	91-1275815	501(C)(3)	75,200.				CAPACITY BULIDING
(8) CUYAHOGA PFS, LLC 11000 BROKEN LAND PARKWAY COLUMBIA, MD 2014	30-0840591	501(C)(3)	75,000.				CAPACITY BULIDING
(9) NEWSED COMMUNITY DEVELOPMENT CORPORATION 901 W. 10TH AVENUE 2A DENVER, CO 80204	74-2275534	501(C)(3)	75,000.				CAPACITY BULIDING
(10) PATH VENTURES 340 NORTH MADISON AVENUE LOS ANGELES, CA 90	20-1892523	501(C)(3)	75,000.				CAPACITY BULIDING
(11) PLYMOUTH HOUSING GROUP 2113 3RD AVENUE SEATTLE, WA 98121-1614	91-1122621	501(C)(3)	75,000.				CAPACITY BULIDING
(12) COMMUNITY HOUSING PARTNERSHIP 20 JONES STREET SAN FRANCISCO, CA 94102	94-3112338	501(C)(3)	74,055.				CAPACITY BULIDING

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(1) FAMICOS FOUNDATION, INC. 1325 ANSEL ROAD CLEVELAND, OH 44106	34-1053534	501(C)(3)	84,991.				CAPACITY BULIDING
(2) COLORADO COALITION FOR THE HOMELESS 2111 CHAMPA STREET DENVER, CO 80205	84-0951575	501(C)(3)	70,912.				CAPACITY BULIDING
(3) PROJECT HOMECOMING, INC 2221 FILMORE AVE NEW ORLEANS, LA 70122	32-0312933	501(C)(3)	70,811.				CAPACITY BULIDING
(4) IFF ONE NORTH LASALLE CHICAGO, IL 60602	36-3656836	501(C)(3)	68,681.				CAPACITY BULIDING
(5) SOUTHWEST HOUSING SOLUTIONS 1920 25TH STREET DETROIT, MI 48216	38-2324335	501(C)(3)	68,000.				CAPACITY BULIDING
(6) LINC HOUSING CORPORATION 555 E . OCEAN BOULEVARD LONG BEACH, CA 9080	33-0578620	501(C)(3)	67,000.				CAPACITY BULIDING
(7) WOMEN ORGANIZING RESOURCES KNOWLEDGE AND SE 795 N AVENUE 50 LOS ANGELES, CA 90042	95-4680440	501(C)(3)	66,263.				CAPACITY BULIDING
(8) MENTAL HEALTH CENTER OF DENVER 4141 EAST DICKENSON PLACE DENVER, CO 80222	84-1359401	501(C)(3)	65,169.				CAPACITY BULIDING
(9) MERCY HOUSING NORTHWEST 2505 THIRD AVENUE SEATTLE, WA 98121	91-1546525	501(C)(3)	64,584.				CAPACITY BULIDING
(10) NORTHEAST DENVER HOUSING CENTER 1735 GAYLORD STREET DENVER, CO 80206	84-0909291	501(C)(3)	60,000.				CAPACITY BULIDING
(11) TREMONT WEST DEVELOPMENT CORPORATION 2406 PROFESSOR STREET CLEVELAND, OH 44113	23-7029247	501(C)(3)	61,500.				CAPACITY BULIDING
(12) TRANSITIONAL HOUSING CORPORATION 5101 16TH STREET N.W. WASHINGTON, DC 20011	52-1675958	501(C)(3)	58,750.				CAPACITY BULIDING

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(1) PRESIDENT & FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVENUE CAMBRIDGE, MA 021	04-2103580	501(C)(3)	56,667.				CAPACITY BULIDING
(2) SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVENUE SLAYTON, MN 56172	41-1721815	501(C)(3)	56,574.				CAPACITY BULIDING
(3) MUTUAL HOUSING CALIFORNIA 8001 FRUITRIDGE RD SACRAMENTO, CA 95820	94-3093354	501(C)(3)	55,518.				CAPACITY BULIDING
(4) DETROIT CATHOLIC PASTORAL ALLIANCE 9200 GRATIOT DETROIT, MI 48213	38-2938993	501(C)(3)	55,000.				CAPACITY BULIDING
(5) LOCAL INITIATIVES SUPPORT CORPORATION 501 SEVENTH AVENUE NEW YORK, NY 10018	13-3030229	501(C)(3)	55,000.				CAPACITY BULIDING
(6) SOUTH MISSISSIPPI HOUSING AND DEVELOPMENT C P.O. BOX 2099 GULFPORT, MS 39505	20-5640452	501(C)(3)	53,036.				CAPACITY BULIDING
(7) NEW YORK CITY HOUSING AUTHORITY 90 CHURCH STREET NEW YORK, NY 10007	13-6400571	501(C)(3)	50,116.				CAPACITY BULIDING
(8) ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSIN 4318 CARLIN SPRINGS ROAD ARLINGTON, VA 2220	54-1515133	501(C)(3)	52,500.				CAPACITY BULIDING
(9) BHP COMMUNITY LAND TRUST, INC. 300 SW 2ND STREET FORT LAUDERDALE, FL 33304	20-4202758	501(C)(3)	50,000.				CAPACITY BULIDING
(10) CASA OF OREGON COMMUNITY & SHELTER ASSISTAN 20508 SW ROY ROGERS ROAD SHERWOOD, OR 97140	93-0977842	501(C)(3)	50,000.				CAPACITY BULIDING
(11) CENTRAL CITY CONCERN 232 NORTHWEST SIXTH AVENUE PORTLAND, OR 972	93-0728816	501(C)(3)	50,000.				CAPACITY BULIDING
(12) CHARLOTTE MECKLENBURG HOUSING PARTNERSHIP, 4601 CHARLOTTE PARK DRIVE CHARLOTTE, NC 282	56-1620516	501(C)(3)	50,000.				CAPACITY BULIDING

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(1) FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA 1720 BIG LAKE ROAD CLOQUET, MN 55720	41-0965719	501(C)(3)	50,000.				CAPACITY BULIDING
(2) FORDHAM BEDFORD HOUSING CORPORATION 2751 GRAND CONCOURSE BRONX, NY 10468	13-3010578	501(C)(3)	65,000.				CAPACITY BULIDING
(3) HABITAT FOR HUMANITY DETROIT 14325 JANE STREET DETROIT, MI 48205	38-2708025	501(C)(3)	50,000.				CAPACITY BULIDING
(4) INTERIM COMMUNITY DEVELOPMENT ASSOC. 310 MAYNARD AVENUE SOUTH SEATTLE, WA 98104	91-1071277	501(C)(3)	50,000.				CAPACITY BULIDING
(5) INTERNATIONAL SONORAN DESERT ALLIANCE P.O. BOX 687 AJO, AZ 85321	86-0778917	501(C)(3)	50,000.				CAPACITY BULIDING
(6) ISRAEL MANOR 1251 SARATOGA AVE WASHINGTON, DC 20018	52-2094101	501(C)(3)	50,000.				CAPACITY BULIDING
(7) MAZASKA OWECASO OTIPI FINANCIAL, INC. PO BOX 1996 PINE RIDGE, SD 57770	76-0761743	501(C)(3)	50,000.				CAPACITY BULIDING
(8) MERCY HOUSING, INC. SOUTHEAST 260 PEACHTREE STREET ATLANTA, GA 30303	56-1993872	501(C)(3)	50,000.				CAPACITY BULIDING
(9) NORTHWEST HOUSING ALTERNATIVES, INC. 2316 SE WILLARD STREET MILWAUKIE, OR 97222	93-0814473	501(C)(3)	50,000.				CAPACITY BULIDING
(10) PATHSTONE CORPORATION 400 EAST AVENUE ROCHESTER, NY 14607	16-0984913	501(C)(3)	50,000.				CAPACITY BULIDING
(11) ROBISON JEWISH HOME 6125 SW BOUNDARY STREET PORTLAND, OR 97221-	93-0386852	501(C)(3)	50,000.				CAPACITY BULIDING
(12) THE FORTUNE SOCIETY 2976 NORTHERN BOULEVARD LIC, NY 11101	13-2645436	501(C)(3)	51,000.				CAPACITY BULIDING

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(1) THE HUMANITIES FOUNDATION, INC. 476 WANDO PARK BOULEVARD CHARLESTON, SC 294	57-0952289	501(C)(3)	50,000.				CAPACITY BULIDING
(2) UMPQUA COMMUNITY DEVELOPMENT CORPORATION 605 SE KANE STREET ROSEBURG, OR 97470	93-1057208	501(C)(3)	50,000.				CAPACITY BULIDING
(3) OPPORTUNITY LINK, INC. 2229 5TH AVENUE HAVRE, MT 59501	42-1628365	501(C)(3)	49,993.				CAPACITY BULIDING
(4) UTE MOUNTAIN UTE HOUSING AUTHORITY P.O. BOX EE TOWAOL, CO 81334	84-1044454	501(C)(3)	49,969.				CAPACITY BULIDING
(5) IMPACT SEVEN, INC 147 LAKE ALMENA DR ALMENA, WI 54805	39-1141037	501(C)(3)	49,863.				CAPACITY BULIDING
(6) LITTLE TOKYO SERVICE CENTER CDC 231 EAST THIRD STREET LOS ANGELES, CA 90013	95-3451280	501(C)(3)	49,717.				CAPACITY BULIDING
(7) CENTER CITY HOUSING CORPORATION 105 1/2 W. SUPERIOR STREET DULUTH, MN 55802	36-3485584	501(C)(3)	49,242.				CAPACITY BULIDING
(8) A BETTER CITY 33 BROAD STREET, 3RD FLOOR BOSTON, MA 02109	56-2605048	501(C)(3)	49,077.				CAPACITY BULIDING
(9) DHIC, INC. 113 SOUTH WILMINGTON STREET RALEIGH, NC 276	56-1085131	501(C)(3)	48,000.				CAPACITY BULIDING
(10) LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS 7500 ODAWA CIRCLE HARBOR SPRINGS, MI 49740	38-3236295	501(C)(3)	47,363.				CAPACITY BULIDING
(11) HACIENDA CDC 5136 NE 42ND AVENUE PORTLAND, OR 97218	93-0979064	501(C)(3)	45,000.				CAPACITY BULIDING
(12) ST. FRANCIS CENTER 2323 CURTIS STREET DENVER, CO 80205	84-1185856	501(C)(3)	45,000.				CAPACITY BULIDING

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(1) HABITAT FOR HUMANITY/METRO JACKSON, INC. P.O. BOX 55634 JACKSON, MS 39296	64-0750633	501(C)(3)	42,984.				CAPACITY BULIDING
(2) SELFHELP COMMUNITY SERVICES, INC. 520 EIGHTH AVENUE NEW YORK, NY 10018	13-1624178	501(C)(3)	42,960.				CAPACITY BULIDING
(3) BURTEN, BELL, CARR DEVELOPMENT, INC. 7201 KINSMAN ROAD CLEVELAND, OH 44104	34-1657533	501(C)(3)	42,461.				CAPACITY BULIDING
(4) AHC, INC 1501 LEE HIGHWAY ARLINGTON, VA 22209	54-1026365	501(C)(3)	42,386.				CAPACITY BULIDING
(5) NORTH RIVER COMMISSION 3403 W LAWRENCE AVE CHICAGO, IL 60625	36-2526797	501(C)(3)	42,384.				CAPACITY BULIDING
(6) SETTLEMENT HOUSING FUND, INC 247 W. 37TH STREET NEW YORK, NY 10018	23-7078882	501(C)(3)	42,355.				CAPACITY BULIDING
(7) ST. NICKS ALLIANCE 2 KINGLAND AVENUE BROOKLYN, NY 11211	51-0192170	501(C)(3)	42,190.				CAPACITY BULIDING
(8) THE DELORES PROJECT P.O. BOX 1406 DENVER, CO 80207	20-1122039	501(C)(3)	42,008.				CAPACITY BULIDING
(9) URBAN RESTORATION ENHANCEMENT CORPORATION PO BOX 73032 BATON ROUGE, LA 70874	72-1223347	501(C)(3)	41,577.				CAPACITY BULIDING
(10) DEL NORTE NEIGHBORHOOD DEVELOPMENT CORPORAT 3275 W 14TH AVENUE DENVER, CO 80204	84-0783694	501(C)(3)	40,420.				CAPACITY BULIDING
(11) COLUMBIA CASCADE HOUSING CORPORATION 312 COURT STREET THE DALLES, OR 97058	94-3111736	501(C)(3)	40,000.				CAPACITY BULIDING
(12) DETROIT SHOREWAY COMMUNITY DEV. ORG. 6516 DETROIT AVENUE CLEVELAND, OH 44102	23-7376130	501(C)(3)	43,250.				CAPACITY BULIDING

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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" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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OMB No. 1545-0047

2016

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" on 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 noncash assistance	(h) Purpose of grant or assistance
(1) GLOBAL GREEN 1617 BROADWAY, 2ND FLOOR SANTA MONICA, CA 9	77-0387124	501(C)(3)	40,000.				CAPACITY BULIDING
(2) MHANY MANAGEMENT, INC. 1 METRO TECH CENTER NORTH BROOKLYN, NY 1120	72-1303737	501(C)(3)	40,000.				CAPACITY BULIDING
(3) MISSION ECONOMIC DEVELOPMENT AGENCY 2301 MISSION STREET SAN FRANCISCO, CA 94110	51-0187791	501(C)(3)	40,000.				CAPACITY BULIDING
(4) NEIGHBORHOOD NONPROFIT HOUS CORP 195 GOLF COURSE ROAD LOGAN, UT 84321	87-0559307	501(C)(3)	40,000.				CAPACITY BULIDING
(5) PROJECT INTERCONNECTIONS, INC. 2198 DRESDEN DRIVE CHAMBLEE, GA 30341	58-1899845	501(C)(3)	40,000.				CAPACITY BULIDING
(6) SRO HOUSING CORPORATION 1055 W. 7TH STREET, SUITE 3250 LOS ANGELES,	95-3909215	501(C)(3)	40,000.				CAPACITY BULIDING
(7) HUDSON RIVER HOUSING, INC. 313 MILL STREET POUGHKEEPSIE, NY 12601	22-2456648	501(C)(3)	39,978.				CAPACITY BULIDING
(8) HANCOCK RESOURCE CENTER 308 HIGHWAY 90 WAVELAND, MS 39576	26-3648017	501(C)(3)	39,907.				CAPACITY BULIDING
(9) CLIFFORD BEERS HOUSING, INC. 1200 WILSHIRE BOULEVARD LOS ANGELES, CA 900	95-4485263	501(C)(3)	39,500.				CAPACITY BULIDING
(10) SINGLE ROOM OCCUPANCY HOUSING CORPORATION 1055 W. 7TH STREET LOS ANGELES, CA 90017	95-3909215	501(C)(3)	39,500.				CAPACITY BULIDING
(11) MONTGOMERY HOUSING PARTNERSHIP, INC. 12200 TECH ROAD SILVER SPRING, MD 20904	52-1631939	501(C)(3)	38,699.				CAPACITY BULIDING
(12) CLARETIAN ASSOCIATES, INC. 9108 SOUTH BRANDON AVENUE CHICAGO, IL 60617	36-4087259	501(C)(3)	38,620.				CAPACITY BULIDING

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(1) COMMONBOND COMMUNITIES 1080 MONTREAL AVE ST. PAUL, MN 55116	41-1260469	501(C)(3)	38,038.				CAPACITY BULIDING
(2) DENVER HOUSING AUTHORITY 777 GRANT STREET DENVER, CO 80203	84-6002414	501(C)(3)	37,500.				CAPACITY BULIDING
(3) RURAL HOUSING DEVELOPMENT CORPORATION 63 N 400 WEST PROVO, UT 84601	87-0622732	501(C)(3)	37,500.				CAPACITY BULIDING
(4) THE RESURECTION PROJECT 1818 S. PAULINA CHICAGO, IL 60608	36-3576073	501(C)(3)	36,850.				CAPACITY BULIDING
(5) SALISH & KOOTENAI HOUSING AUTHORITY PO BOX 38 PABLO, MT 59855	81-0464576	501(C)(3)	36,349.				CAPACITY BULIDING
(6) ABILITY HOUSING OF NORTHEAST FLORIDA, INC. 76 S LAURA STREET JACKSONVILLE, FL 32202-34	59-3087085	501(C)(3)	36,142.				CAPACITY BULIDING
(7) DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORA 594 COLUMBIA ROAD DORCHESTER, MA 02125	04-2681632	501(C)(3)	36,000.				CAPACITY BULIDING
(8) OAK PARK RESIDENCE CORPORATION 21 SOUTH BOULEVARD OAK PARK, IL 60302	36-2666771	501(C)(3)	36,000.				CAPACITY BULIDING
(9) THE THRESHOLDS 4101 N RAVENSWOOD CHICAGO, IL 60613	36-2518901	501(C)(3)	36,000.				CAPACITY BULIDING
(10) METROPOLITAN AFFORDABLE HOUSING CORPORATION P.O. BOX 11923 EUGENE, OR 97440	93-1078543	501(C)(3)	35,372.				CAPACITY BULIDING
(11) SOUTHEAST COMMUNITY DEVELOPMENT CORPORATION 3323 EASTERN AVENUE BALTIMORE, MD 21224	52-1034466	501(C)(3)	35,086.				CAPACITY BULIDING
(12) CENTURY VILLAGES AT CABRILLO 1000 CORPORATE POINTE CULVER CITY, CA 90230	95-4646521	501(C)(3)	35,000.				CAPACITY BULIDING

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(1) CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORP 587 WASHINGTON STREET DORCHESTER, MA 02124	04-2752507	501(C)(3)	35,000.				CAPACITY BULIDING
(2) INDIANTOWN NON PROFIT HOUSING, INC. P.O. BOX 456 INDIANTOWN, FL 34956	59-1978388	501(C)(3)	35,000.				CAPACITY BULIDING
(3) JEWISH ASSOCIATION FOR SERVICES FOR THE AGE 247 WEST 37TH STREET NEW YORK, NY 10018	13-2620896	501(C)(3)	35,000.				CAPACITY BULIDING
(4) NORTHERN PUEBLOS HOUSING AUTHORITY 5 WEST GUTIERREZ SANTA FE, NM 87506	85-0219256	501(C)(3)	35,000.				CAPACITY BULIDING
(5) THE PRATT AREA COMMUNITY COUNCIL, INC. 201 DEKALB AVENUE BROOKLYN, NY 11205	11-2451752	501(C)(3)	35,000.				CAPACITY BULIDING
(6) URBAN EDGE HOUSING CORPORATION 1542 COLUMBUS AVENUE ROXBURY, MA 02119	22-24[illegible]3475	501(C)(3)	35,000.				CAPACITY BULIDING
(7) CHINATOWN COMMUNITY DEVELOPMENT CENTER 1525 GRANT AVENUE SAN FRANCISCO, CA 94133	94-2514053	501(C)(3)	34,721.				CAPACITY BULIDING
(8) UNIVERSITY NEIGHBORHOOD HOUSING PROGRAM 2751 GRAND CONCOURSE BRONX, NY 10468-3001	13-3206603	501(C)(3)	37,122.				CAPACITY BULIDING
(9) SAN FRANCISCO COMMUNITY LAND TRUST 21 COLUMBUS AVENUE SAN FRANCISCO, CA 94111	11-3700403	501(C)(3)	34,554.				CAPACITY BULIDING
(10) NEIGHBORHOOD HOUSING SERVICES OF THE INLAND 1390 NORTH D STREET SAN BERNARDINO, CA 9240	95-3571587	501(C)(3)	34,500.				CAPACITY BULIDING
(11) CHICAGO NEIGHBORHOOD INITIATIVES, INC. 1000 E 111TH STREET CHICAGO, IL 60628	27-1832686	501(C)(3)	33,950.				CAPACITY BULIDING
(12) OFFICE OF RURAL & FARMWORKER HOUSING 1400 SUMMITVIEW AVE. #203 YAKIMA, WA 98902	91-1218499	501(C)(3)	33,854.				CAPACITY BULIDING

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(1) RENAISSANCE HOUSING DEVELOPMENT CORPORATION 2111 CHAMPA STREET DENVER, CO 80205	84-1322816	501(C)(3)	33,338.				CAPACITY BULIDING
(2) FIFTH AVENUE COMMITTEE, INC. 621 DEGRAW STREET BROOKLYN, NY 11217	11-2475743	501(C)(3)	33,333.				CAPACITY BULIDING
(3) RESOURCES FOR COMMUNITY DEVELOPMENT 2220 OXFORD STREET BERKELEY, CA 94704	94-2952466	501(C)(3)	33,000.				CAPACITY BULIDING
(4) CENTER FOR NEIGHBORHOOD TECHNOLOGY 2125 W. NORTH AVENUE CHICAGO, IL 60647	36-2967283	501(C)(3)	32,875.				CAPACITY BULIDING
(5) TULE RIVER INDIAN HOUSING AUTHORITY 342 N RESERVATION ROAD PORTERVILLE, CA 9325	94-2363564	501(C)(3)	32,814.				CAPACITY BULIDING
(6) GREENWOOD LEFLORE CARROLL ECONOMIC DEVELOPM 402 HIGHWAY 82 BYPASS GREENWOOD, MS 38935-0	64-0640864	501(C)(3)	32,591.				CAPACITY BULIDING
(7) BICKERDIKE REDEVELOPMENT CORPORATION 2550 WEST NORTH AVENUE CHICAGO, IL 60647-52	23-7087890	501(C)(3)	32,420.				CAPACITY BULIDING
(8) HARMONY NEIGHBORHOOD DEVELOPMENT 3301 LASALLE STREET NEW ORLEANS, LA 70115	72-1436907	501(C)(3)	32,000.				CAPACITY BULIDING
(9) NEIGHBORHOOD HOUSING SERVICES OF SOUTH FLOR 300 NW 12 AVENUE MIAMI, FL 33128	59-1845761	501(C)(3)	32,000.				CAPACITY BULIDING
(10) CATHOLIC CHARITIES HOUSING SERVICES 5301 TIETON DRIVE YAKIMA, WA 98908	91-1955616	501(C)(3)	31,455.				CAPACITY BULIDING
(11) MIDPEN HOUSING CORPORATION 303 VINTAGE PARK DRIVE FOSTER CITY, CA 9440	23-7089977	501(C)(3)	30,953.				CAPACITY BULIDING
(12) OPAL COMMUNITY LAND TRUST 286 ENCHANTED FOREST ROAD EASTSOUND, WA 982	94-3116010	501(C)(3)	30,658.				CAPACITY BULIDING

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(1) QUEST 35, INC. 878 ROCK STREET, NW ATLANTA, GA 30314-0208	58-2634738	501(C)(3)	30,572.				CAPACITY BULIDING
(2) COMMUNITY HOUSING DEVELOPMENT CORPORATION O 1535 A FRED JACKSON WAY RICHMOND, CA 94801	68-0235719	501(C)(3)	30,307.				CAPACITY BULIDING
(3) COMPREHENSIVE HOUSING ASSISTANCE, INC. 5809 PARK HEIGHTS AVENUE BALTIMORE, MD 2121	23-7097000	501(C)(3)	30,187.				CAPACITY BULIDING
(4) BASTION COMMUNITY OF RESILIENCE 7506 ZIMPEL STREET NEW ORLEANS, LA 70118	27-4383654	501(C)(3)	30,000.				CAPACITY BULIDING
(5) HANAC, INC. 49 WEST 45TH STREET NEW YORK, NY 10036	11-2290832	501(C)(3)	30,000.				CAPACITY BULIDING
(6) JAMAICA PLAIN NEIGHBORHOOD DEVELOPMENT CORP 31 GERMANIA STREET JAMAICA PLAIN, MA 02130	04-2652919	501(C)(3)	30,000.				CAPACITY BULIDING
(7) NEIGHBORHOOD OF AFFORDABLE HOUSING, INC 143 BORDER STREET EAST BOSTON, MA 02127	04-2964630	501(C)(3)	30,000.				CAPACITY BULIDING
(8) NORTH SHORE COMMUNITY DEVELOPMENT COALITION 102 LAFAYETTE STREET SALEM, MA 01970	04-2686893	501(C)(3)	29,408.				CAPACITY BULIDING
(9) HOUSING SOLUTIONS FOR THE SOUTHWEST 295 GIRARD STREET DURANGO, CO 81303	84-0853925	501(C)(3)	29,271.				CAPACITY BULIDING
(10) SOUTHSIDE UNITED HDFC 434 SOUTH 5TH STREET BROOKLYN, NY 11211	11-2268359	501(C)(3)	29,266.				CAPACITY BULIDING
(11) HOUSING INITIATIVE PARTNERSHIP 6525 BELCREST ROAD HYATTSVILLE, MD 20782	52-1596171	501(C)(3)	28,284.				CAPACITY BULIDING
(12) MANNA, INC. 828 EVARTS STREET, NE WASHINGTON, DC 20018	52-1260698	501(C)(3)	28,284.				CAPACITY BULIDING

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(1) CITY FIRST HOMES, INC. 1436 U STREET, NW WASHINGTON, DC 20009	26-2335395	501(C)(3)	28,283.				CAPACITY BULIDING
(2) OHKAY OWINGEH HOUSING AUTHORITY P.O. BOX 1059 OHKAY OWINGEH, NM 87566	85-0446828	501(C)(3)	26,920.				CAPACITY BULIDING
(3) ASIAN AMERICANS FOR EQUALITY 2 ALLEN STREET, 7TH FLOOR NEW YORK, NY 1000	13-3187792	501(C)(3)	30,300.				CAPACITY BULIDING
(4) ATHENS LAND TRUST, INC. 685 N. POPE STREET ATHENS, GA 30601	58-2154133	501(C)(3)	26,232.				CAPACITY BULIDING
(5) NEIGHBORHOOD HOUSING SERVICES OF CHICAGO, I 1279 N. MILWAUKEE AVENUE CHICAGO, IL 60622	23-7443009	501(C)(3)	26,000.				CAPACITY BULIDING
(6) INSTITUTO PARA EL DESARROLLO SOCIOECONOMICO P.O. BOX 7154 MAYAGUEZ, PR 00680	66-0658219	501(C)(3)	25,475.				CAPACITY BULIDING
(7) SANTO DOMINGO TRIBAL HOUSING AUTHORITY P.O. BOX 10 SANTO DOMINGO PUEBLO, NM 87052	85-0194331	501(C)(3)	25,291.				CAPACITY BULIDING
(8) HOUSING VISIONS UNLIMITED, INC. 1201 E. FAYETTE STREET SYRACUSE, NY 13210	16-1598458	501(C)(3)	25,285.				CAPACITY BULIDING
(9) CITY OF LAKES COMMUNITY TRUST 1930 GLENWOOD AVENUE MINNEAPOLIS, MN 55405	06-1665031	501(C)(3)	25,247.				CAPACITY BULIDING
(10) SANTA FE COMMUNITY HOUSING TRUST P.O. BOX 713 SANTA FE, NM 87504	85-0392520	501(C)(3)	25,010.				CAPACITY BULIDING
(11) COMMUNITY DEVELOPMENT COLLABORATIVE OF GREA 175 SOUTH THIRD STREET COLUMBUS, OH 43215	31-1595197	501(C)(3)	25,000.				CAPACITY BULIDING
(12) ENLACE CHICAGO 2756 S. HARDING STREET CHICAGO, IL 60623	36-3727669	501(C)(3)	25,000.				CAPACITY BULIDING

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(1) MID CITY REDEVELOPMENT ALLIANCE, INC 419 N 19TH STREET BATON ROUGE, LA 70802	72-1196990	501(C)(3)	25,000.				CAPACITY BULIDING
(2) OLD BROOKLYN COMMUNITY DEVELOPMENT CORP 2339 BROADVIEW RD CLEVELAND, OH 44109	34-1177633	501(C)(3)	25,000.				CAPACITY BULIDING
(3) ST. JOHN COMMUNITY DEVELOPMENT CORPORATION 1324 NW 3RD AVENUE MIAMI, FL 33136	59-2657550	501(C)(3)	25,000.				CAPACITY BULIDING
(4) TENEMOS QUE RECLAMAR Y UNIDOS SALVAR LA TIE 4331 SOUTH MAIN STREET LOS ANGELES, CA 9003	42-1687057	501(C)(3)	25,500.				CAPACITY BULIDING
(5) ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHP 229 PEACHTREE STREET, NE ATLANTA, GA 30303-	58-1946632	501(C)(3)	24,893.				CAPACITY BULIDING
(6) PROJECT BUILD A FUTURE 2306 THIRD STREET LAKE CHARLES, LA 70601	72-1510673	501(C)(3)	24,273.				CAPACITY BULIDING
(7) ROC USA LLC 7 WALL STREET CONCORD, NH 03301	35-2319441	501(C)(3)	23,700.				CAPACITY BULIDING
(8) GOOD SHEPHERD HOUSING & FAMILY SERVICES, IN 8305 RICHMOND HIGHWAY ALEXANDRIA, VA 22309	23-7447962	501(C)(3)	23,375.				CAPACITY BULIDING
(9) COMMUNITY AREA RESOURCE ENTERPRISE, INC. P.O. BOX 4298 GALLUP, NM 87305	20-0870956	501(C)(3)	22,781.				CAPACITY BULIDING
(10) CAMBA HOUSING VENTURES, INC. 1720 CHURCH AVENUE BROOKLYN, NY 11226	55-0881162	501(C)(3)	21,000.				CAPACITY BULIDING
(11) THE AFFORDABLE HOUSING GROUP OF NORTH CAROL 4600 PARK ROAD CHARLOTTE, NC 28209	56-0883684	501(C)(3)	20,762.				CAPACITY BULIDING
(12) 5225 MARLBORO VENTURES, LLC 2308 19TH STREET, NW WASHINGTON, DC 20009	81-0699473	501(C)(3)	20,301.				CAPACITY BULIDING

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" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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OMB No. 1545-0047

2016

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) WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORP 50 EAST 168TH STREET BRONX, NY 10452	11-3099604	501(C)(3)	20,120.				CAPACITY BULIDING
(2) ALL HANDS VOLUNTEERS 6 COUNTY ROAD, SUITE 6 MATTAPOISETT, MA 027	20-3414952	501(C)(3)	20,000.				CAPACITY BULIDING
(3) GREATER NEW ORLEANS HOUSING ALLIANCE 1050 S. JEFFERSON DAVIS PARKWAY NEW ORLEANS	46-2122510	501(C)(3)	20,000.				CAPACITY BULIDING
(4) H STREET COMMUNITY DEVELOPMENT CORPORATION 916 PENNSYLVANIA AVE, SE WASHINGTON, DC 200	52-1356903	501(C)(3)	20,000.				CAPACITY BULIDING
(5) HABITAT FOR HUMANITY OF GREATER BATON ROUGE 6554 FLORIDA BLVD, SUITE 200 BATON ROUGE, L	72-1141747	501(C)(3)	20,000.				CAPACITY BULIDING
(6) HOMEOWNER'S REHAB., INC. 280 FRANKLIN STREET CAMBRIDGE, MA 02139	04-2519279	501(C)(3)	20,000.				CAPACITY BULIDING
(7) HOPEWORKS SOCIAL ENTERPRISES 5830 EVERGREEN WAY EVERETT, WA 98203	80-0684608	501(C)(3)	20,000.				CAPACITY BULIDING
(8) REBUILDING TOGETHER BATON ROUGE PO BOX 1109 BATON ROUGE, LA 70821-1109	20-1459780	501(C)(3)	20,000.				CAPACITY BULIDING
(9) SPRINGBOARD TO OPPORTUNITIES 3000 OLD CANTON ROAD SUITE 470 JACKSON, MS	46-1917760	501(C)(3)	20,000.				CAPACITY BULIDING
(10) THE ARC BATON ROUGE 8326 KELWOOD AVE BATON ROUGE, LA 70806	72-0540957	501(C)(3)	20,000.				CAPACITY BULIDING
(11) THE CORNERSTONE GROUP 7661 BUSH LAKE DRIVE BLOOMINGTON, MN 55438	41-1762459	501(C)(3)	20,000.				CAPACITY BULIDING
(12) WEST ANGELES COMMUNITY DEVELOPMENT CORPORAT 6028 CRENSHAW BOULEVARD LOS ANGELES, CA 900	95-4486925	501(C)(3)	19,720.				CAPACITY BULIDING

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(1) EMPIRE HOMES OF MARYLAND, INC. 1800 N. CHARLES STREET BALTIMORE, MD 21201	20-3521473	501(C)(3)	19,652.				CAPACITY BULIDING
(2) MIAMI HOMES FOR ALL, INC 140 WEST FLAGLER STREET, SUITE 105 MIAMI, F	59-2521237	501(C)(3)	19,575.				CAPACITY BULIDING
(3) MERCY HOUSING LAKEFRONT 120 SOUTH LASALLE STREET CHICAGO, IL 60603	36-3453183	501(C)(3)	19,500.				CAPACITY BULIDING
(4) HISPANIC HOUSING DEVELOPMENT CORPORATION 325 N. WELLS CHICAGO, IL 60654	36-2889871	501(C)(3)	19,118.				CAPACITY BULIDING
(5) JANE PLACE NEIGHBORHOOD SUSTAINABILITY INIT P.O. BOX 53011 NEW ORLEANS, LA 70153	26-3909820	501(C)(3)	18,778.				CAPACITY BULIDING
(6) NORTHWEST SIDE COMMUNITY DEVELOPMENT CORPOR 4201 NORTH 27TH STREET MILWAUKEE, WI 53216	39-1478014	501(C)(3)	18,341.				CAPACITY BULIDING
(7) LUCHA CONTRA EL SIDA, INC. PO BOX 8479 SAN JUAN, PR 00910-0479	66-0514937	501(C)(3)	17,451.				CAPACITY BULIDING
(8) SEA MAR COMMUNITY HEALTH CENTERS 1040 S HENDERSON STREET SEATTLE, WA 98108	91-1020139	501(C)(3)	15,779.				CAPACITY BULIDING
(9) GILMAN HOUSING TRUST, INC. P.O. BOX 259 LYNDONVILLE, VT 05851	03-03001520	501(C)(3)	15,470.				CAPACITY BULIDING
(10) MULTISERVICE CENTER 1200 SOUTH 336TH STREET FEDERAL WAY, WA 980	23-7120815	501(C)(3)	15,429.				CAPACITY BULIDING
(11) CASA DE MARYLAND, INC. 8151 15TH AVENUE HYATTSVILLE, MD 20783	52-1372972	501(C)(3)	16,302.				CAPACITY BULIDING
(12) MIAMI BEACH COMMUNITY DEVELOPMENT CORP 945 PENNSYLVANIA AVE MIAMI BEACH, FL 33139	59-2110264	501(C)(3)	15,275.				CAPACITY BULIDING

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(1) COLORADO CENTER ON LAW AND POLICY 789 SHERMAN STREET, SUITE 300 DENVER, CO 80	84-1264154	501(C)(3)	15,000.				CAPACITY BULIDING
(2) HEALTHY NEIGHBORHOODS, INC. 2 E. READ STREET BALTIMORE, MD 21202	30-0272104	501(C)(3)	15,000.				CAPACITY BULIDING
(3) MENTAL HEALTH SERVICES FOR HOMELESS PERSONS 1744 PAYNE AVENUE CLEVELAND, OH 44114	34-1607734	501(C)(3)	16,500.				CAPACITY BULIDING
(4) NUESTRA COMUNIDAD DEVELOPMENT CORPORATION 56 WARREN STREET ROXBURY, MA 02119	04-2741543	501(C)(3)	15,000.				CAPACITY BULIDING
(5) PATHSTONE ALLIANCE FOR BETTER HOUSING 648 BUENA VISTA DRIVE KENNETT SQUARE, PA 19	23-2754537	501(C)(3)	15,000.				CAPACITY BULIDING
(6) PHI ONE TRINITY DRIVE EAST DILLSBURG, PA 17019-	23-1381404	501(C)(3)	14,583.				CAPACITY BULIDING
(7) FRONTIER HOUSING, INC. 5445 FLEMINGSBURG ROAD MOREHEAD, KY 40351	61-0863958	501(C)(3)	14,371.				CAPACITY BULIDING
(8) MARY HOUSE, INC 4303 13TH ST NE WASHINGTON, DC 20017	52-1253494	501(C)(3)	14,073.				CAPACITY BULIDING
(9) LITTLE HAITI HOUSING ASSOCIATION, INC. 181 NORTHEAST 82ND STREET MIAMI, FL 33138	59-2801211	501(C)(3)	13,569.				CAPACITY BULIDING
(10) JUBILEE HOUSING, INC. 1640 COLUMBIA ROAD, NW WASHINGTON, DC 20009	52-0986261	501(C)(3)	13,509.				CAPACITY BULIDING
(11) HABITAT FOR HUMANITY OF THE CHESAPEAKE, INC 3741 COMMERCE DRIVE BALTIMORE, MD 21227-166	52-1226188	501(C)(3)	12,901.				CAPACITY BULIDING
(12) RENAISSANCE NEIGHBORHOOD DEVELOPMENT CORPOR 4162 CANAL STREET NEW ORLEANS, LA 70119	20-8947208	501(C)(3)	12,547.				CAPACITY BULIDING

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(1) CHHAYA COMMUNITY DEVELOPMENT 37-43 77TH STREET JACKSON HEIGHTS, NY 11372	11-3580935	501(C)(3)	12,500.				CAPACITY BULIDING
(2) ROCKY MOUNTAIN MUTUAL HOUSING ASSOCIATION, 225 E 16TH AVENUE DENVER, CO 80203	84-0777280	501(C)(3)	12,001.				CAPACITY BULIDING
(3) FOCUS: HOPE 1355 OAKMAN BOULEVARD DETROIT, MI 48238	38-1948285	501(C)(3)	11,936.				CAPACITY BULIDING
(4) MOUNTAIN HOUSING OPPORTUNITIES 64 CLINGMAN AVENUE ASHEVILLE, NC 28801	58-1816998	501(C)(3)	11,875.				CAPACITY BULIDING
(5) NEIGHBORHOOD HOUSING SERVICES OF RICHLAND C 125 E. SEMINARY STREET RICHLAND CENTER, WI	39-1431651	501(C)(3)	11,677.				CAPACITY BULIDING
(6) GREATER ROCHESTER HOUSING PARTNERSHIP 16 E. MAIN STREET ROCHESTER, NY 14614	16-1399793	501(C)(3)	11,135.				CAPACITY BULIDING
(7) ST. AMBROSE HOUSING AID CENTER 321 E 25TH ST BALTIMORE, MD 21218	52-1729460	501(C)(3)	11,000.				CAPACITY BULIDING
(8) COMMUNITY RESOURCES & HOUSING DEVELOPMENT C 7305 LOWELL BOULEVARD WESTMINSTER, CO 80030	23-7102834	501(C)(3)	10,485.				CAPACITY BULIDING
(9) HOUSING COUNSELING SERVICES 2410 17TH STREET, NW WASHINGTON, DC 20009	52-0958568	501(C)(3)	10,442.				CAPACITY BULIDING
(10) NEIGHBORHOOD DEVELOPMENT ALLIANCE 481 WABASHA STREET S ST. PAUL, MN 55107	41-1658636	501(C)(3)	10,010.				CAPACITY BULIDING
(11) ACTION MINISTRIES, INC 17 EXECUTIVE PARK DRIVE ATLANTA, GA 30329	58-2070427	501(C)(3)	10,000.				CAPACITY BULIDING
(12) BALTIMORE COMMUNITY FOUNDATION 2 EAST READ STREET BALTIMORE, MD 21202	23-7180620	501(C)(3)	10,000.				CAPACITY BULIDING

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(1) CARINGWORKS, INC. 2785 LAWRENCEVILLE HIGHWAY DECATUR, GA 3003	56-2370081	501(C)(3)	10,000.				CAPACITY BULIDING
(2) CHICAGO AREA FAIR HOUSING ALLIANCE 100 N LASALLE STREET SUITE 600 CHICAGO, IL	36-3384397	501(C)(3)	10,000.				CAPACITY BULIDING
(3) CONSTRUCTION EDUCATION FOUNDATION OF GEORGI P.O. BOX 92121 ATLANTA, GA 30314	58-2062862	501(C)(3)	10,000.				CAPACITY BULIDING
(4) GEORGIA ADVANCING COMMUNITIES TOGETHER, INC 250 GEORGIA AVE, SE, SUITE 350 ATLANTA, GA	58-2661528	501(C)(3)	10,000.				CAPACITY BULIDING
(5) GRANT HOUSING ECONOMIC DEVELOPMENT CORPORAT 10435 S CENTRAL AVE LOS ANGELES, CA 90002	95-4505619	501(C)(3)	10,000.				CAPACITY BULIDING
(6) GREYSTON FOUNDATION 21 PARK AVE. YONKERS, NY 10703	13-3717310	501(C)(3)	10,000.				CAPACITY BULIDING
(7) LABC INSTITUTE 2029 CENTURY PARK EAST, SUITE 1240 LOS ANGE	27-1485429	501(C)(3)	10,000.				CAPACITY BULIDING
(8) LATIN UNITED COMMUNITY HOUSING ASSOCIATION 3541 W. NORTH AVENUE CHICAGO, IL 60647	36-3213453	501(C)(3)	10,000.				CAPACITY BULIDING
(9) MARIN REHAB CORP 98 CUTTER MILL ROAD, SUITE 342 S GREAT NECK	13-3609748	501(C)(3)	10,000.				CAPACITY BULIDING
(10) SUPPORTIVE HOUSING NETWORK OF NEW YORK 247 WEST 37TH STREET NEW YORK, NY 10018	13-3755149	501(C)(3)	21,450.				CAPACITY BULIDING
(11) WEST HOLLYWOOD COMMUNITY HOUSING CORPORATIO 7530 SANTA MONICA BOULEVARD WEST HOLLYWOOD,	95-4122368	501(C)(3)	10,000.				CAPACITY BULIDING
(12) HOMES FOR AMERICA, INC. 318 SIXTH STREET ANNAPOLIS, MD 21403	52-1901220	501(C)(3)	9,812.				CAPACITY BULIDING

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(1) LEECH LAKE BAND OF OJIBWE HOUSING AUTHORITY 611 ELM AVENUE CASS LAKE, MN 56633	41-0913364	501(C)(3)	9,399.				CAPACITY BULIDING
(2) VIETNAMESE INITIATIVES IN ECONOMIC TRAINING 13435 GRANVILLE STREET NEW ORLEANS, LA 7012	72-1496796	501(C)(3)	9,137.				CAPACITY BULIDING
(3) CASCADIA BEHAVIORAL HEALTHCARE, INC. P.O. BOX 8459 PORTLAND, OR 97207	93-0770054	501(C)(3)	8,817.				CAPACITY BULIDING
(4) GEORGIA LAW CENTER ON HOMELESSNESS & POVERT 100 EDGEWOOD STREET SUITE 1625 ALTANTA, GA	58-1850632	501(C)(3)	8,000.				CAPACITY BULIDING
(5) HOUSING DEVELOPMENT CONSORTIUM OF SEATTLE-K 1402 THIRD AVENUE SEATTLE, WA 98101	94-3073588	501(C)(3)	8,000.				CAPACITY BULIDING
(6) COMMUNITY DEVELOPMENT FOR ALL PEOPLE 946 PARSONS AVENUE COLUMBUS, OH 43206	51-0476886	501(C)(3)	7,492.				CAPACITY BULIDING
(7) JUBILEE BALTIMORE, INC. 25 EAST 20TH STREET BALTIMORE, MD 21218	52-1222237	501(C)(3)	7,271.				CAPACITY BULIDING
(8) MI CASA, INC. 6230 3RD STREET, NW WASHINGTON, DC 20011	52-1796840	501(C)(3)	7,141.				CAPACITY BULIDING
(9) HOUSING OPPORTUNITY DEVELOPMENT CORPORATION 2001 WAUKEGAN ROAD TECHNY, IL 60082	36-3237455	501(C)(3)	6,520.				CAPACITY BULIDING
(10) WONDERROOT 982 MEMORIAL DRIVE SE ATLANTA, GA 30316	56-2482941	501(C)(3)	6,000.				CAPACITY BULIDING
(11) PARTNERSHIP FOR SOUTHERN EQUITY 100 PEACHTREE STREET NW ATLANTA, GA 30303	27-4424115	501(C)(3)	5,500.				CAPACITY BULIDING
(12) SOUTHFACE ENERGY INSTITUTE 241 PINE STREET ATLANTA, GA 30308	58-1357547	501(C)(3)	5,500.				CAPACITY BULIDING

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
(1) HABITAT FOR HUMANITY BAY-WAVELAND AREA, INC 414 HWY 90 BAY ST. LOUIS, MS 39520	26-1325894	501(C)(3)	5,096.				CAPACITY BULIDING
(2) WASHINGTON REGIONAL ASSOCIATION OF GRANTMAK 1400 16TH STREET,NW WASHINGTON, DC 20036	52-1756856	501(C)(3)	80,000.				CAPACITY BUILDING
(3) WBC COMMUNITY DEVELOPMNET CORPORATION 3809 FAIRVIEW AVENUE BALTIMORE, MD 21216	20-2652453	501(C)(3)	8,411.				CAPACITY BUILDING
(4) IMPACTUS MARKETPLACE LLC 1875 CONNECTICUT AVENUE NW	47-3333274		1,150,000.				CAPACITY BUILDING
(5) CLEVELAND FOOD BANK 15500 S. WATERLOO ROAD CLEVELAND, OH 44110	34-91292848	501(C)(3)	10,000.				CAPACITY BUILDING
(6) COSMIC BOBBINS 13226 SHAKER SQUARE CLEVELAND, OH 44120		501(C)(3)	10,000.				CAPACITY BUILDING
(7) ECODISTRICTS 1223 SW WASHINGTON STREET	80-0407220	501(C)(3)	10,000.				CAPACITY BUILDING
(8) NYS ASSOCIATION FOR AFFORDABLE HOUSING 242 W. 36TH STREET NEW YORK, NY 10018	13-4001946	501(C)(3)	5,875.				CAPACITY BUILDING
(9)							
(10)							
(11)							
(12)							

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

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

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" 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.** 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 THE MAJORITY OF PASS THROUGH FUNDING UTILIZED BY ENTERPRISE IS THROUGH THE SECTION 4 PROGRAM, A CAPACITY BUILDING PROGRAM ADMINISTERED BY THE DEPARTMENT OF HOUSING & URBAN DEVELOPMENT. EACH YEAR SINCE THE EARLY 1990S, CONGRESS HAS APPROPRIATED FUNDS TO THE SECTION 4 PROGRAM. ELIGIBLE APPLICANTS FOR THIS FUNDING HAVE BEEN LIMITED TO HABITAT FOR HUMANITY, LOCAL INITIATIVES SUPPORT CORPORATION, AND ENTERPRISE COMMUNITY PARTNERS. OF EACH ANNUAL AWARD RECEIVED A PORTION OF THE FUNDS IS RESTRICTED TO USE WITHIN RURAL AREAS OF THE COUNTRY. ELIGIBLE ACTIVITIES UNDER THE SECTION 4 PROGRAM ARE CAPACITY BUILDING

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) 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.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

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 IS AWARDED TO ORGANIZATIONS THROUGH A RFP PROCESS, OR IN UNIQUE SITUATIONS, THROUGH A

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) 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.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SOLE SOURCE PROCESS. AFTER THE GRANTEE SELECTION PROCESS IS COMPLETE, A GRANT PACKAGE IS DRAFTED AND PROCESSED BY GRANTS AND CONTRACTS MANAGEMENT. ADDITIONALLY SOME OF THE SECTION 4 FUNDING IS USED FOR PREDEVELOPMENT AND WORKING CAPITAL LOANS. THESE LOANS ARE ADMINISTERED BY ENTERPRISE COMMUNITY LOAN FUND. PRIVATELY FUNDED GRANTS - ENTERPRISE RECEIVES FUNDS FROM VARIOUS PRIVATE FUNDING SOURCES. SOME FUNDERS INCLUDE CITI FOUNDATION, BANK OF AMERICA, KRESGE FOUNDATION, ETC. MANY OF THE PRIVATE FUNDERS RESTRICT THE USES OF THEIR FUNDS TO SPECIFIC PROGRAMS, GEOGRAPHY OR USES. ENTERPRISE PROGRAM STAFF DETERMINES THE MOST APPROPRIATE USE OF THESE FUNDS WITHIN THEIR SPECIFIC PROGRAM AREAS.

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) 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.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

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 A WORK PLAN, BUDGET, ORGANIZATIONAL DUE DILIGENCE DOCUMENTS SUCH AS FINANCIAL AUDITS, FINANCIAL ASSESSMENT, ETC. FIELD STAFF INITIATE A WORKFLOW PROCESS IN SALESFORCE TO REQUEST AND DOCUMENT APPROVALS FROM PROGRAM STAFF, FUNDING MANAGERS, AND GRANTS AND CONTRACTS MANAGEMENT

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) 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.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

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 SALESFORCE TO THE ORGANIZATION WITH INSTRUCTIONS TO PRINT OUT TWO COPIES, SIGN BOTH COPIES AND RETURN TO ENTERPRISE FOR COUNTER SIGNATURE. WE ACCEPT EITHER SCANNED COPIES OF THE SIGNED ORIGINALS OR HARD COPIES. UPON RECEIPT, THE GRANT AGREEMENT IS COUNTER SIGNED, ONE

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) 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.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

ORIGINAL FULLY EXECUTED COPY OF THE GRANT AGREEMENT IS MAILED BACK TO THE ORGANIZATION, AND ONE ORIGINAL AGREEMENT IS UPLOADED INTO SALESFORCE AND A HARD COPY 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 GRANTS AND CONTRACTS MANAGEMENT VIA A SALESFORCE WORKFLOW PROCESS, AND REVIEWED FOR COMPLIANCE AND VALIDATION.

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) 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.** Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

ONCE CONTRACTS VERIFIES THAT ALL DOCUMENTATION IS IN ORDER, PROJECT CODES

ARE CORRECT AND THAT THERE IS AVAILABLE FUNDING, THE DISBURSEMENT REQUEST

IS FORWARDED VIA SALESFORCE 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

2016

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 on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (such as, 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		
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 on line 1a?	2		
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	☐ Written employment contract		
	☒ Independent compensation consultant	☒ Compensation survey or study		
	☐ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4	During the year, did any person listed on 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 on 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" on line 5a or 5b, describe in Part III.			
6	For persons listed on 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" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on 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" on 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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't 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 on prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
	JEFFREY SCHAFFER	(i)	0.	34,257.	4,342.			38,599.	
1	FORMER OFFICER	(ii)	0.	0.	0.				
	TERRI L. LUDWIG	(i)	471,083.	154,414.	719.	20,295.	13,787.	660,298.	
2	PRESIDENT	(ii)	0.	0.	0.				
	WILLIAM R. FREY	(i)	200,000.	5,000.	2,252.	14,919.	6,657.	228,828.	
3	HIGHLY COMPENSATED	(ii)	0.	0.	0.				
	RICHARD D. GROSS	(i)	206,550.	35,264.	12,189.	19,127.	7,006.	280,136.	
4	OFFICER	(ii)	0.	0.	0.				
	MARK MCDERMOTT	(i)	194,402.	32,242.	2,090.	16,915.	4,456.	250,105.	
5	OFFICER	(ii)	0.	0.	0.				
	LORI MICHELLE CHATMAN	(i)	0.	0.	0.				
6	OFFICER	(ii)	251,007.	61,728.	1,490.	20,295.	2,568.	337,088.	
	MICHAEL MCNEELY	(i)	66,306.	71,611.	216,978.	4,144.		359,039.	
7	FORMER OFFICER	(ii)	0.	0.	0.				
	ALAN SCOTT ANDERSON	(i)	194,750.	19,000.	2,252.	15,707.	5,631.	237,340.	
8	OFFICER	(ii)	0.	0.	0.				
	ALAZNE M. SOLIS	(i)	273,376.	76,012.	450.	20,295.	3,771.	373,904.	
9	OFFICER	(ii)	0.	0.	0.				
	FAITH E. THOMAS	(i)	0.	0.	0.				
10	OFFICER	(ii)	240,096.	42,704.	3,682.	20,295.	17,391.	324,168.	
	MATTHEW D. HOFFMAN	(i)	0.	0.	0.				
11	OFFICER	(ii)	189,945.	33,356.	594.	11,511.	23,182.	258,588.	
	MEAGHAN E. VLKOVIC	(i)	170,463.	30,766.	0.	14,556.	6,237.	222,022.	
12	OFFICER	(ii)	0.	0.	0.				
	AMALIA M. KASTBERG	(i)	31,495.	50,391.	324,180.	944.	780.	407,790.	
13	FORMER OFFICER	(ii)	0.	0.	0.				
	MICHELLE WHETTEN	(i)	182,908.	30,336.	450.	15,637.	4,202.	233,533.	
14	OFFICER	(ii)	0.	0.	0.				
	DAVID CHARLES BOWERS	(i)	185,405.	31,655.	450.	15,980.	2,122.	235,612.	
15	OFFICER	(ii)	0.	0.	0.				
	EDWARD DAVID MANEKIN	(i)	0.	0.	0.				
16	OFFICER	(ii)	172,052.	14,687.	1,519.	13,252.	15,074.	216,584.	

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't 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 on prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	KEITH E. FAIREY	(i)	215,894.	40,019.	722.	19,502.	7,614.	283,751.	
	OFFICER	(ii)	0.	0.	0.				
2	PETRA D. MONTAGUE	(i)	168,790.	13,810.	1,290.	10,776.	2,722.	197,388.	
	OFFICER	(ii)	0.	0.	0.				
3	KAREN M. LADO	(i)	0.	23,061.	151,697.			174,758.	
	FORMER OFFICER	(ii)	0.	0.	0.				
4	KATHERINE W. SWENSON	(i)	178,421.	14,796.	450.	13,835.	4,203.	211,705.	
	OFFICER	(ii)	0.	0.	0.				
5	ANTHONY JOSEPH DISPIGNO	(i)	259,127.	72,050.	1,290.	20,295.	9,297.	362,059.	
	OFFICER	(ii)	0.	0.	0.				
6	ANDREW EDWARD GEER	(i)	168,185.	28,715.	690.	14,166.	5,487.	217,243.	
	OFFICER	(ii)	0.	0.	0.				
7	MELINDA J. POLLACK	(i)	182,909.	33,905.	300.	15,958.	3,771.	236,843.	
	OFFICER	(ii)	0.	0.	0.				
8	JACQUELINE WAGGONER	(i)	178,750.	28,215.	722.	15,096.	2,622.	225,405.	
	OFFICER	(ii)	0.	0.	0.				
9	JON SEARLES	(i)	189,565.	15,536.	585.	14,929.	1,182.	221,797.	
	OFFICER	(ii)	0.	0.	0.				
10	MARY JO BARRANCO	(i)	0.	0.	0.				
	OFFICER	(ii)	203,354.	18,351.	985.	16,398.	16,890.	255,978.	
11	TIFFANY MANUEL	(i)	183,473.	15,671.	469.	11,831.	11,321.	222,765.	
	OFFICER	(ii)	0.	0.	0.				
12	BENJAMIN NICHOLS	(i)	167,283.	13,833.	450.	12,745.	5,854.	200,165.	
	OFFICER	(ii)	0.	0.	0.				
13	THOMAS OSDOBA	(i)	112,506.	14,879.	50,233.	1,911.	1,262.	180,791.	
	FORMER OFFICER	(ii)	0.	0.	0.				
14	DIANE YENTEL	(i)	35,374.	15,817.	4,255.	1,298.	1,923.	58,667.	
	FORMER OFFICER	(ii)	0.	0.	0.				
15	ANDREW JAKABOVICS	(i)	172,979.	16,876.	572.	13,556.	7,415.	211,398.	
	OFFICER	(ii)	0.	0.	0.				
16	ANGELA BOYD	(i)	171,667.	14,400.	270.	13,191.	1,257.	200,785.	
	OFFICER	(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 on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't 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 on prior Form 990
			(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
	LAUREL BLATCHFORD	(i)	290,172.	77,207.	300.	20,295.		387,974.	
1	OFFICER	(ii)	0.	0.	0.				
	ANDREW JOHNSTON	(i)	0.	0.	0.				
2	OFFICER	(ii)	227,750.	63,000.	1,003.	20,295.	15,074.	327,122.	
	CRAIG MELLENDICK	(i)	0.	0.	0.				
3	OFFICER	(ii)	357,961.	102,330.	810.	20,295.	23,182.	504,578.	70,049.
	JUDITH KENDE	(i)	224,794.	39,476.	450.	20,229.	14,635.	299,584.	
4	OFFICER	(ii)	0.	0.	0.				
	BRYAN PITTINGER	(i)	0.	0.	0.				
5	OFFICER	(ii)	162,319.	14,252.	296.	11,909.	29,069.	217,845.	
	EUN SHIN	(i)	0.	0.	0.				
6	OFFICER	(ii)	189,625.	33,300.	592.	16,508.	18.	240,043.	
	CATHERINE HYDE	(i)	166,127.	14,587.	1,562.	12,734.	1,929.	196,939.	
7	HIGHLY COMPENSATED	(ii)	0.	0.	0.				
	MARY ANN LEONARD	(i)	184,808.	19,636.	1,980.	14,845.	5,120.	226,389.	
8	OFFICER	(ii)	0.	0.	0.				
	ALLISON KNAPP	(i)	148,958.	0.	407.		4,291.	153,656.	
9	OFFICER	(ii)	0.	0.	0.				
	TIMOTHY MAY	(i)	160,754.	15,000.	959.	12,287.	5,487.	194,487.	
10	HIGHLY COMPENSATED	(ii)	0.	0.	0.				
	MATTHEW MORRIN	(i)	147,284.	51,154.	514.	14,327.	2,122.	215,401.	
11	HIGHLY COMPENSATED	(ii)	0.	0.	0.				
	PAUL BERNARD	(i)	200,000.	11,551.	1,562.	12,158.	5,737.	231,008.	
12	OFFICER	(ii)	0.	0.	0.				
	MARION MCFADDEN	(i)	76,125.	0.	125.		2,059.	78,309.	
13	OFFICER	(ii)	0.	0.	0.				
	JAY PATRICK	(i)	151,996.	14,829.	558.	10,885.	6,612.	184,880.	
14	HIGHLY COMPENSATED	(ii)	0.	0.	0.				
		(i)							
15		(ii)							
		(i)							
16		(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PT I LINE 4A

DUE TO THE RESTRUCTURE OF A NUMBER OF DEPARTMENTS WITHIN THE COMPANY THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE PAYMENTS IN 2016:

AMALIA KASTENBERG - $320,996

KAREN LADO - $149,465

MICHAEL MCNEELY - $205,999

THOMAS OSDOBA - $45,075

PT 1 QUESTION 7

OFFICERS AND KEY EMPLOYEES HAVE PERFORMANCE BONUS PLAN BASED ON ACHIEVING CERTAIN FINANCIAL TARGETS AND OTHER INDIVIDUAL PERFORMANCE CRITERIA.

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

2016

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	4.	45,477.	FMV AT 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 ▶(ATCH 1)		2.	256,077.	
26	Other ▶( )				
27	Other ▶( )				
28	Other ▶( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't 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 nonstandard 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 didn't 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.** 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.

1

USE OF THIRD PARTIES TO SELL NON-CASH ITEMS

FINANCIAL INSTITUTIONS ARE USED TO REDEEM/SELL DONATED STOCK.

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

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
PROBONO LEGAL	X	1.	47,935.	FMV
PROBONO PROGRAM SERVICES	X	1.	208,142.	FMV
USE			0.	
TOTALS		2.	256,077.	

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.	2016 Open to Public Inspection

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

GOVERNANCE PART VI 11B

THE ENTIRE BOARD IS GIVEN A COPY OF THE 990 RETURN TO REVIEW PRIOR TO FILING THE 990 RETURN. THE AUDIT COMMITTEE OF THE BOARD REVIEWS AND APPROVES THE 990 RETURN IN A MEETING.

GOVERNANCE PART VI 12-A,B,C

AN ANNUAL CONFLICT OF INTEREST DISCLOSURE EXERCISE IS PERFORMED BY THE ORGANIZATION EACH 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 FIRST QUARTER MEETING OF THE BOARD (USUALLY HELD IN MARCH). WE ASK THAT TRUSTEES RETURN THE DISCLOSURE FORM BY MAY. THE CHIEF AUDIT EXECUTIVE REVIEWS AND APPROVES THE DOCUMENT (CONFLICT OF INTEREST DISCLOSURE FORM) CONTENT AND FOLLOWS UP ON ANY CONCERNS WITH THE EMPLOYEE. FOR NEW HIRES, A LOG IS MAINTAINED OF ANY DOCUMENTED CONFLICTS FOR FUTURE REFERENCING. THE EXECUTIVE OFFICE MONITORS AND FOLLOWS UP ON THE STATUS OF ANY UNRETURNED DISCLOSURE FORMS. THE GENERAL COUNSEL REVIEWS ALL TRUSTEE DISCLOSURE FORMS AND FOLLOWS UP IF THERE ARE ANY ISSUES, IN ACCORDANCE WITH THE PROCEDURES SET FORTH IN THE POLICY.

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

GOVERNANCE PART VI 15-A&B

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 AND THE HR AND COMPENSATION COMMITTEE. THE BOARD OF TRUSTEES DISCUSSES AND SETS THE CEO COMPENSATION AND THE CFO COMPENSATION. THE BOARD HANDLES COMPENSATION COMMITTEE 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	15,820,810
NET UNREALIZED GAIN ON INVESTMENT	1,041,974
CHANGE IN NON-CONTROLLING INTERESTS	(6,192,172)
GAAP TO TAX ADJ.	323,413
TOTAL	10,994,025

ATTACHMENT 1

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,

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

ATTACHMENT 2

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
APA TEN G LLC 750 FIRST STREET, NE WASHINGTON, DC 20002	CONSULTING	531,831.
OMNI 600 WILSHIRE LIMITED PARTNERSHIP 600 WISSHIRE BLVD UNITE 950 LOS ANGELES, CA 90017	CONSULTING	226,467.
PIER SIXTY LLC 23RD AND THE WESRSIDE HWY NEW YORK, NY 10011	FUNDRAISING CATERING	222,468.
COHNREZNICK LLP 7501 WISCONSIN AVE, SUITE 400E BETHESDA, MD 20814	ACCOUNTING SERVICES	219,800.
HUMAN DESIGN LLC 954 PEARL STREET BOULDER, CO 80302	IT SERVICES	216,000.

ATTACHMENT 3

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INVESTMENT INCOME	574,671.			574,671.
TOTALS	574,671.			574,671.

ATTACHMENT 4

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT
FUNDRAISING EVENTS	1,284,259.
TOTAL	1,284,259.

Name of the organization: ENTERPRISE COMMUNITY PARTNERS, INC.

Employer identification number: 52-1231931

ATTACHMENT 5

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
FUNDRAISING EVENTS	313,555.	651,904.	-338,349.
TOTALS	313,555.	651,904.	-338,349.

ATTACHMENT 6

FORM 990, PART X - NOTES AND LOANS RECEIVABLE

BORROWER:	NOTES RECEIVABLE
BEGINNING BALANCE DUE	22,877,235.
ENDING BALANCE DUE	25,049,736.
TOTAL BEGINNING NOTES AND LOANS RECEIVABLE	22,877,235.
TOTAL ENDING NOTES AND LOANS RECEIVABLES	25,049,736.

ATTACHMENT 7

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE
EQUITY FUNDS	15,344,091.
BOND FUNDS	9,690,201.
TOTALS	25,034,292.

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

2016

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	13,000.	798,000.	ECP, INC
(2) ENTERPRISE NEW ORLEANS NT, LLC 52-1231931 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFFORD HSG	MD	159,666.	1,092,832.	ECP, INC.
(3) ENTERPRISE NEW GENERATION MEMBER LLC 1100 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	FINANCING	DE	296,000.	56,790,000.	ECP, INC.
(4) FSGP INN TRANSITION, LLC 26-1760018 11000 BROKEN LAND PARKWAY COLUMBIA, MD 21044	AFFOR HOUSING	FL	0.	0.	ECP
(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 MARYLAND, LLC 26-3262997 11000 BROKEN LAND PARKWAY #700 COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(3)	509(A)(3)	ECP, INC		X
(3) 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
(4) 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
(5) 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
(6) 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
(7) ENTERPRISE COMMUNITY INVESTMENT, INC 52-1206840 11000 BROKEN LAND PARKWAY COLUMBIA, MD 21044	AFF. HOUSING	MD	501(C)(4)		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

2016

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) 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
(2)							
(3)							
(4)							
(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		39,980.	4,225,705.		X				99.9900
(2)	COMMUNITY WEATHERIZATION LLC 2 501 7TH AVENUE 7TH FLOOR NEW Y	AFFORD HSGING	DE	ECP, INC									
(3)	IMPACTUS MARKETPLACE, LLC 47-3 1875 CONNECTICUT AVENUE NW WAS	FINANCING	DE	ECP		-3,274,382.	680,520.		X				92.0000
(4)	DENVER PFS, LLC 81-0784340 11000 BROKEN LAND PARKWAY COLU	FINANCING		ECP		-680,012.	414,949.		X				50.0000
(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 52-1348268 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.

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

			Yes	No
1	During the tax year, did the 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	6,145,158.	COST
(2)	ENTERPRISE COMMUNITY INVESTMENT, INC.	L	2,260,978.	COST
(3)	ENTERPRISE COMMUNITY INVESTMENT, INC.	M	13,272,199.	COST
(4)	ENTERPRISE COMMUNITY INVESTMENT, INC.	P	825,776.	COST
(5)	ENTERPRISE COMMUNITY INVESTMENT, INC.	Q	843,127.	COST
(6)	IMPACTUS MARKETPLACE LLC	B	1,961,383.	COST

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

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

			Yes	No
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		
b	Gift, grant, or capital contribution to related organization(s)	1b		
c	Gift, grant, or capital contribution from related organization(s)	1c		
d	Loans or loan guarantees to or for related organization(s)	1d		
e	Loans or loan guarantees by related organization(s)	1e		
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1g		
h	Purchase of assets from related organization(s)	1h		
i	Exchange of assets with related organization(s)	1i		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o	Sharing of paid employees with related organization(s)	1o		
p	Reimbursement paid to related organization(s) for expenses	1p		
q	Reimbursement paid by related organization(s) for expenses	1q		
r	Other transfer of cash or property to related organization(s)	1r		
s	Other transfer of cash or property from related organization(s)	1s		

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.	C	9,430,000.	COST
(2)				
(3)				
(4)				
(5)				
(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)													

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, 2016

****

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

FILING...
RETURN YOUR SIGNED 8453-EO

FAX OR E-MAIL SIGNED FORMS TO:
FAX (301) 280-1845
BETHEFILE@COHNREZNICK.COM

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 NOVEMBER 15, 2017. 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 **2016**

California Exempt Organization Annual Information Return

FORM **199**

Calendar Year 2016 or fiscal year beginning (mm/dd/yyyy) 01/01/2016 , and ending (mm/dd/yyyy) 12/31/2016

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 (X) No

B Amended Return . . . . . ( ) Yes (X) No

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

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

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

F Federal return filed?
(1) ( ) 990T (2) ( ) 990PF (3) ( ) Sch H (990) (4) ( ) Other 990 series

G Is this a group filing? See instructions . . . . . ( ) Yes (X) No

H Is this organization in a goup exemption . . . . . ( ) Yes (X) 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 (X) No

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

K Is the organization exempt under R&TC Section 23701g? ( ) Yes (X) 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. . . . . (X)

M Is the organization a Limited Liability Company? . . . . ( ) Yes (X) No

N Did the organization file Form 100 or Form 109 to report taxable income? . . . . . ( ) Yes (X) No

O Is the organization under audit by the IRS or has the IRS audited in a prior year? . . . . . ( ) Yes (X) No

P Is federal Form 1023/1024 pending? . . . . . ( ) Yes (X) 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	9,337,755 00
	2 Gross dues and assessments from members and affiliates		2	00
	3 Gross contributions, gifts, grants, and similar amounts received. ATCH 1		3	90,206,767 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	99,544,522 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	99,544,522 00
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18.		9	69,160,517 00
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8		10	30,384,005 00
Filing Fee	11 Total payments.		11	00
	12 Use tax. See General Instruction K.		12	00
	13 Payments balance. If line 11 is more than line 12, subtract line 12 from line 11		13	00
	14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12		14	00
	15 Filing fee $10 or $25. See General Instruction F		15	00
	16 Penalties and Interest. See General Instruction J		16	00
	17 **Balance due.** Add line 12, line 15, and line 16. Then subtract line 11 from the result		17	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 ▶ SALLY HEBNER CLIENT'S COPY Title S.V.P. CFO Date Telephone 410-772-2683

Paid Preparer's Use Only

Preparer's signature ▶ ANNE SCHRANTZ CPA Date 09/15/2017 Check if self-employed ▶ ( ) PTIN P00230625

Firm's name (or yours, if self-employed) and address ▶ COHNREZNICK LLP, 7501 WISCONSIN AVENUE 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 . . . . . (X) 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	2,956,275	00
	2 Interest	2	574,671	00
	3 Dividends	3		00
	4 Gross rents	4		00
	5 Gross royalties	5	6,145,158	00
	6 Gross amount received from sale of assets (See Instructions)	6		00
	7 Other income. Attach schedule	7	-338,349	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	9,337,755	00
Expenses and Disbursements	9 Contributions, gifts, grants, and similar amounts paid. Attach schedule ATCH 2	9	15,871,165	00
	10 Disbursements to or for members	10		00
	11 Compensation of officers, directors, and trustees. Attach schedule ATCH 3	11	10,590,782	00
	12 Other salaries and wages	12	13,023,812	00
	13 Interest	13		00
	14 Taxes	14	1,283,020	00
	15 Rents	15	2,283,017	00
	16 Depreciation and depletion (See instructions)	16	1,678,047	00
	17 Other Expenses and Disbursements. Attach schedule ATCH 4	17	24,430,674	00
	18 **Total** expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	69,160,517	00

Schedule L **Balance Sheets**

Assets	Beginning of taxable year (a)	Beginning of taxable year (b)	End of taxable year (c)	End of taxable year (d)
1 Cash		28,930,982.		49,861,098.
2 Net accounts receivable		8,927,211.		5,845,276.
3 Net notes receivable	ATCH 5	36,082,090.		41,825,484.
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock	ATCH 6	218,773,088.		223,090,693.
8 Mortgage loans				
9 Other investments. Attach schedule				
10 a Depreciable assets	11,463,969.		13,026,791.	
b Less accumulated depreciation	(6,602,926)	4,861,043.	(8,040,757)	4,986,034.
11 Land				
12 Other assets. Attach schedule	ATCH 7	1,841,566.		7,426,737.
13 **Total assets**		299,415,980.		333,035,322.
Liabilities and net worth				
14 Accounts payable		11,550,545.		7,959,174.
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable		22,859,131.		18,993,368.
17 Mortgages payable				
18 Other liabilities. Attach schedule				
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		265,006,304.		306,082,780.
22 **Total liabilities and net worth**		299,415,980.		333,035,322.

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	30,082,451.	7 Income recorded on books this year not included in this return. Attach schedule	ATCH 8 -10,994,025.
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	-10,994,025.
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	41,076,476.
6 Total. Add line 1 through line 5	30,082,451.		

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

TAXABLE YEAR **2016**

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	99,544,522.
2 Total gross income (Form 199, line 8)	2	99,544,522.
3 Total expenses and disbursements (Form 199, Line 9)	3	69,160,517.

Part II Settle Your Account Electronically for Taxable Year 2016

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 to 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 2016 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 CLIENT'S COPY Signature of Officer — 06/01/2017 Date — S.V.P.\CFO Title

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 FTB Pub. 1345, 2016 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 09/15/2017 | Check if also paid preparer ☒ | Check if self-employed ☐ | ERO's PTIN P00230625

Firm's name (or yours if self-employed) and address ▶ COHNREZNICK LLP | FEIN 22-1478099

7501 WISCONSIN AVENUE 400E BETHESDA MD | ZIP code 20814-6583

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

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

FORM 199, PART I, LINE 3 - LIST OF CONTRIBUTORS ATTACHMENT 1

NAME AND ADDRESS	DATE	DIRECT PUBLIC SUPPORT	GOVERNMENT GRANTS
US DEPARTMENT OF HOUSING & URBAN DEV 310 MARYLAND AVENUE WASHINGTON, DC 20024	12/31/2016		16,265,591.
LIVING CITIES: NATIONAL COMM. DEV. INT. 330 WEST 108TH STREET NEW YORK, NY 10025			
STARR FOUNDATION 399 PARK AVENUE, 17TH FLOOR NEW YORK, NY 10022			
FANNIE MAE FOUNDATION 3900 WISCONSIN AVENUE WASHINGTON, DC 20016			
HOME DEPOT FOUNDATION 2455 PACES FERRY RD ATLANTA, GA 30339			
WAMU 245 PARK AVENUE, 2ND FLOOR NEW YORK, NY 10167			
ATLANTA RENEWAL 34 PEACHTREE STREET, SUITE 2360 ATLANTA, GA 30303			
CITIGROUP FOUNDATION 399 PARK AVENUE NEW YORK, NY 10043			

FORM 199, PART I, LINE 3 - LIST OF CONTRIBUTORS

ATTACHMENT 1 (CONT'D)

NAME AND ADDRESS	DATE	DIRECT PUBLIC SUPPORT	GOVERNMENT GRANTS
THE KENDEDA FUND 501 SILVERSIDE ROAD SUITE 123 WILMINGTON, DE 19808	12/31/2016	2,331,908.	
COUNTRYWIDE/TREASURY BANK 100 NORTH TYRON STREET CHARLOTTE, NC 28255-0011			
FREDDIE MAC 8200 JONES BRANCH DRIVE MCCLEAN, VA 22102-3110			
AHMANSON FOUNDATION 9215 WILSHIRE BOULEVARD BEVERLY HILLS, CA 90210			
CITY OF DALLAS - HOUSING DEPARTMENT CITY HALL 6DN, 1500 MARILLA STREET DALLAS, TX 75201			
COUNTY OF LOS ANGELES- CDC 2 CORAL CIRCLE MONTEREY PARK, CA 91755-7425			
STATE OF LOUISIANA- DISASTER RECOVERY P.O. BOX 94095 BATON ROUGE, LA 70804-9095			
OTHER CONTRIBUTIONS 10227 WINCOPIN CIRCLE, SUITE 500 COLUMBIA, MD 21044			

FORM 199, PART I, LINE 3 - LIST OF CONTRIBUTORS

ATTACHMENT 1 (CONT'D)

NAME AND ADDRESS	DATE	DIRECT PUBLIC SUPPORT	GOVERNMENT GRANTS
ENTERPRISE COMMUNITY INVESTMENT, INC. 11000 BROKEN LAND PARKWAY SUITE 700 COLUMBIA, MD 21044	12/31/2016	9,430,000.	
KRESGE FOUNDATION 3215 WEST BIG BEAVER ROAD TROY, MI 48084			
VARIOUS 11000 BROKEN LAND PARKWAY COLUMBIA, MD 20814	12/15/2016	301,554.	
CPD OFFICE OF TECHNICAL ASSIST & MGMT 451 7TH STREET, SUITE 7218 WASHINGTON, DC 20410	12/31/2016		2,566,356.
J. RONALD TERWILLIGER 55 WEST 125TH STREET NEW YORK, NY 10027			
CPD OFFICE OF TECHINICAL ASSIST & MGMT 451 7TH STREET SUITE 7218 WASHINGTON, DC 20410			
OTHER GOVERNMENT GRANTS 10227 WINCOPIN CIRCLE SUITE 500 COLUMBIA, MD 21044			
FUNDRASIING 11000 BROKEN LAND PARKWAY COLUMBIA, MD 21044			

FORM 199, PART I, LINE 3 - LIST OF CONTRIBUTORS ATTACHMENT 1 (CONT'D)

NAME AND ADDRESS	DATE	DIRECT PUBLIC SUPPORT	GOVERNMENT GRANTS
HOUSING AUTHORITY OF NEW ORLEANS (HANO) 4100 TOURO STREET NEW ORLEANS, LA 70122			
BANK OF AMERICA 100 NORTH TRYON STREET CHARLOTTE, NC 28255	12/31/2016	2,839,981.	
J.P. MORGAN CHASE 270 PARK AVENUE, 38TH FLOOR NEW YORK, NY 10017	12/31/2016	2,006,899.	
CORNERSTONE HOUSING CORPORATION 11000 BROKEN LAND PARKWAY COLUMBIA, MD 21044			
US DEPARTMENT OF HOUSING & URBAN RENEWAL 451 7TH STREET SW WASINGTON, DC 20410	12/31/2016		2,773,102.
TOTAL CONTRIBUTION AMOUNTS		16,910,342.	21,605,049.

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			
MAKE ROOM, INC 1875 CONNECTICUT AVE NW 11TH FLOOR WASHINGTON, DC 20009	501(C)(3)	CAPACITY BUILDING	2,300,000.
NEIGHBORWORKS AMERICA, INC. 999 NORTH CAPITOL STREET, NE SUITE 900 WASHINGTON, DC 20002	501(C)(3)	CAPACITY BUILDING	280,200.
HOPE COMMUNITY, INC. 177 EAST 104TH STREET NEW YORK, NY 10029	501(C)(3)	CAPACITY BUILDING	250,000.
THE SAN FRANCISCO FOUNDATION ONE EMBARCADERO CENTER SUITE 1400 SAN FRANCISCO, CA 94111	501(C)(3)	CAPACITY BUILDING	250,000.
SUN VALLEY ECODISTRICT TRUST 1550 WEWATTA STREET DENVER, CO 80202	501(C)(3)	CAPACITY BUILDING	200,000.
PACIFIC COMMUNITY VENTURES, INC 51 FEDERAL STREET, SUITE 100 SAN FRANCISCO, CA 94107	501(C)(3)	CAPACITY BUILDING	180,000.
PROJECT COMMUNITY CONNECTIONS, INC. 321 WEST HILL STREET SUITE 3 DECATUR, GA 30030	501(C)(3)	CAPACITY BUILDING	155,861.

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
MIDTOWN DETROIT, INC. 3939 WOODWARD SUITE 100 DETROIT, MI 48201	501(C)(3)	CAPACITY BUILDING	147,132.
CLEVELAND HOUSING NETWORK, INC 2999 PAYNE AVENUE 3RD FLOOR CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	150,925.
JEFFERSON EAST, INC. 14628 E JEFFERSON AVENUE DETROIT, MI 48215	501(C)(3)	CAPACITY BUILDING	141,673.
MERCY HOUSING CALIFORNIA 1500 S. GRAND AVENUE SUITE 100 LOS ANGELES, CA 90015	501(C)(3)	CAPACITY BUILDING	132,998.
FIRST COMMUNITY HOUSING, INC. 75 EAST SANTA CLARA STREET SAN JOSE, CA 95113	501(C)(3)	CAPACITY BUILDING	130,000.
EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATION 1825 SAN PABLO AVENUE SUITE 200 OAKLAND, CA 94612-1517	501(C)(3)	CAPACITY BUILDING	123,679.
CAMBA, INC. 1720 CHURCH AVENUE BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	125,032.

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
FUND FOR PUBLIC HOUSING, INC 250 BROADWAY NEW YORK, NY 10007	501(C)(3)	CAPACITY BUILDING	119,999.
THUNDER VALLEY COMMUNITY DEVELOPMENT CORPORATION P.O. BOX 290 PORCUPINE, SD 57772	501(C)(3)	CAPACITY BUILDING	117,125.
CAPITOL HILL HOUSING FOUNDATION 1620 12TH AVENUE SUITE 205 SEATTLE, WA 98122	501(C)(3)	CAPACITY BUILDING	114,286.
TENDERLOIN NEIGHBORHOOD DEVELOP. CORP. 201 EDDY STREET SAN FRANCISCO, CA 94102	501(C)(3)	CAPACITY BUILDING	113,462.
A COMMUNITY OF FRIENDS 3701 WILSHIRE BOULEVARD SUITE 700 LOS ANGELES, CA 90010	501(C)(3)	CAPACITY BUILDING	102,871.
SATELLITE AFFORDABLE HOUSING ASSOCIATES 1835 ALCATRAZ AVE BERKELEY, CA 94703	501(C)(3)	CAPACITY BUILDING	100,000.
SEATTLE CHINATOWN-INTERNATIONAL DISTRICT PRESERVAT 409 MAYNARD AVENUE SOUTH SUITE 200 SEATTLE, WA 98114	501(C)(3)	CAPACITY BUILDING	100,000.
EAH, INC. DAVIES PACIFIC CENTER 841 BISHOP ST., #2208 HONOLULU, HI 96813	501(C)(3)	CAPACITY BUILDING	98,000.

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
SKID ROW HOUSING TRUST 1317 EAST SEVENTH STREET LOS ANGELES, CA 90021	501(C)(3)	CAPACITY BUILDING	97,164.
THE MAYOR'S FUND TO ADVANCE NEW YORK CITY 253 BROADWAY 8TH FLOOR NEW YORK, NY 10007	501(C)(3)	CAPACITY BUILDING	95,895.
LOTT COMMUNITY DEVELOPMENT CORPORATION 421 EAST 116TH STREET NEW YORK, NY 10029	501(C)(3)	CAPACITY BUILDING	95,729.
HEARTLAND HOUSING, INC. 208 S. LASALLE SUITE # 1300 CHICAGO, IL 60604	501(C)(3)	CAPACITY BUILDING	92,560.
ARTSPACE PROJECTS, INC. 250 THIRD AVENUE NORTH SUITE 400 MINNEAPOLIS, MN 55401	501(C)(3)	CAPACITY BUILDING	90,875.
CARRFOUR SUPPORTIVE HOUSING, INC. 1398 SOUTHWEST 1ST STREET 12TH FLOOR MIAMI, FL 33135	501(C)(3)	CAPACITY BUILDING	90,000.
EASTERN MARKET CORPORATION 2934 RUSSELL DETROIT, MI 48207	501(C)(3)	CAPACITY BUILDING	90,000.

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
HOME BY HAND 1324 RIVIERA AVENUE NEW ORLEANS, LA 70122	501(C)(3)	CAPACITY BUILDING	90,000.
REACH COMMUNITY DEVELOPMENT 4150 SW MOODY AVE. PORTLAND, OR 97239	501(C)(3)	CAPACITY BUILDING	90,000.
PARK HEIGHTS RENAISSANCE, INC. 3939 REISTERSTOWN ROAD SUITE 268 BALTIMORE, MD 21215	501(C)(3)	CAPACITY BUILDING	87,290.
GULF COAST HOUSING PARTNERSHIP, INC. 1610-A ORETHA CASTLE HALEY BOULEVARD NEW ORLEANS, LA 70113	501(C)(3)	CAPACITY BUILDING	85,934.
ATLANTA CLT COLLABORATIVE, INC. 3235 PEACHTREE ROAD SUITE 330 ATLANTA, GA 30305-3609	501(C)(3)	CAPACITY BUILDING	83,000.
CAPITOL HILL HOUSING IMPROVEMENT PROGRAM 1406 TENTH AVENUE SUITE 101 SEATTLE, WA 98122	501(C)(3)	CAPACITY BUILDING	82,172.
PROVIDENCE COMMUNITY HOUSING 1050 SOUTH JEFFERSON DAVIS PARKWAY #301 NEW ORLEANS, LA 70125	501(C)(3)	CAPACITY BUILDING	88,387.

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
FRIENDS OF JEWISH COMMUNITY HOUSING FOR THE ELDERL 30 WALLINGFORD ROAD BOSTON, MA 02135	501(C)(3)	CAPACITY BUILDING	80,528.
EAST LA COMMUNITY CORPORATION 2917 EAST 1ST STREET, SUITE 101 LOS ANGELES, CA 90033	501(C)(3)	CAPACITY BUILDING	80,000.
WBC COMMUNITY DEVELOPMENT CORPORATION 3809 FAIRVIEW AVENUE BALTIMORE, MD 21216	501(C)(3)	CAPACITY BUILDING	78,411.
PROJECT ACCESS NOW PO BOX 10953 PORTLAND, OR 97296	501(C)(3)	CAPACITY BUILDING	76,000.
CARE ALLIANCE HEALTH CENTER 1530 ST. CLAIR AVENUE CLEVELAND, OH 44114-2004	501(C)(3)	CAPACITY BUILDING	75,909.
COMMUNITY CORPORATION OF SANTA MONICA 1423 SECOND STREET SANTA MONICA, CA 90401	501(C)(3)	CAPACITY BUILDING	75,240.
DOWNTOWN EMERGENCY SERVICE CENTER 515 THIRD AVENUE SEATTLE, WA 98104-2304	501(C)(3)	CAPACITY BUILDING	75,200.
CUYAHOGA PFS, LLC 11000 BROKEN LAND PARKWAY COLUMBIA, MD 20144	501(C)(3)	CAPACITY BUILDING	75,000.

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
NEWSED COMMUNITY DEVELOPMENT CORPORATION 901 W. 10TH AVENUE 2A DENVER, CO 80204	501(C)(3)	CAPACITY BUILDING	75,000.
PATH VENTURES 340 NORTH MADISON AVENUE SUITE 100 LOS ANGELES, CA 90004	501(C)(3)	CAPACITY BUILDING	75,000.
PLYMOUTH HOUSING GROUP 2113 3RD AVENUE SEATTLE, WA 98121-1614	501(C)(3)	CAPACITY BUILDING	75,000.
COMMUNITY HOUSING PARTNERSHIP 20 JONES STREET SUITE 200 SAN FRANCISCO, CA 94102	501(C)(3)	CAPACITY BUILDING	74,055.
FAMICOS FOUNDATION, INC. 1325 ANSEL ROAD CLEVELAND, OH 44106	501(C)(3)	CAPACITY BUILDING	84,991.
COLORADO COALITION FOR THE HOMELESS 2111 CHAMPA STREET DENVER, CO 80205	501(C)(3)	CAPACITY BUILDING	70,912.
PROJECT HOMECOMING, INC 2221 FILMORE AVE NEW ORLEANS, LA 70122	501(C)(3)	CAPACITY BUILDING	70,811.
IFF ONE NORTH LASALLE SUITE 700 CHICAGO, IL 60602	501(C)(3)	CAPACITY BUILDING	68,681.

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
SOUTHWEST HOUSING SOLUTIONS 1920 25TH STREET DETROIT, MI 48216	501(C)(3)	CAPACITY BUILDING	68,000.
LINC HOUSING CORPORATION 555 E . OCEAN BOULEVARD SUITE 900 LONG BEACH, CA 90802-5056	501(C)(3)	CAPACITY BUILDING	67,000.
WOMEN ORGANIZING RESOURCES KNOWLEDGE AND SERVICES 795 N AVENUE 50 LOS ANGELES, CA 90042	501(C)(3)	CAPACITY BUILDING	66,263.
MENTAL HEALTH CENTER OF DENVER 4141 EAST DICKENSON PLACE DENVER, CO 80222	501(C)(3)	CAPACITY BUILDING	65,169.
MERCY HOUSING NORTHWEST 2505 THIRD AVENUE SUITE 204 SEATTLE, WA 98121	501(C)(3)	CAPACITY BUILDING	64,584.
NORTHEAST DENVER HOUSING CENTER 1735 GAYLORD STREET DENVER, CO 80206	501(C)(3)	CAPACITY BUILDING	60,000.
TREMONT WEST DEVELOPMENT CORPORATION 2406 PROFESSOR STREET CLEVELAND, OH 44113	501(C)(3)	CAPACITY BUILDING	61,500.
TRANSITIONAL HOUSING CORPORATION 5101 16TH STREET N.W. WASHINGTON, DC 20011	501(C)(3)	CAPACITY BUIDLING	58,750.

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
PRESIDENT & FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVENUE 2ND FLOOR CAMBRIDGE, MA 02138	501(C)(3)	CAPACITY BUIDLING	56,667.
SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVENUE #4 SLAYTON, MN 56172	501(C)(3)	CAPACITY BUIDLING	56,574.
MUTUAL HOUSING CALIFORNIA 8001 FRUITRIDGE RD SACRAMENTO, CA 95820	501(C)(3)	CAPACITY BUIDLING	55,518.
DETROIT CATHOLIC PASTORAL ALLIANCE 9200 GRATIOT DETROIT, MI 48213	501(C)(3)	CAPACITY BUIDLING	55,000.
LOCAL INITIATIVES SUPPORT CORPORATION 501 SEVENTH AVENUE 7TH FLOOR NEW YORK, NY 10018	501(C)(3)	CAPACITY BUIDLING	55,000.
SOUTH MISSISSIPPI HOUSING AND DEVELOPMENT CORPORAT P.O. BOX 2099 GULFPORT, MS 39505	501(C)(3)	CAPACITY BUILDING	53,036.
NEW YORK CITY HOUSING AUTHORITY 90 CHURCH STREET 6TH FLOOR NEW YORK, NY 10007	501(C)(3)	CAPACITY BUIDLING	50,116.

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSING 4318 CARLIN SPRINGS ROAD ARLINGTON, VA 22203	501(C)(3)	CAPACITY BUIDLING	52,500.
BHP COMMUNITY LAND TRUST, INC. 300 SW 2ND STREET SUITE 8 FORT LAUDERDALE, FL 33304	501(C)(3)	CAPACITY BUIDLING	50,000.
CASA OF OREGON COMMUNITY & SHELTER ASSISTANCE CORP 20508 SW ROY ROGERS ROAD SUITE 155 SHERWOOD, OR 97140	501(C)(3)	CAPACITY BUILDING	50,000.
CENTRAL CITY CONCERN 232 NORTHWEST SIXTH AVENUE PORTLAND, OR 97209	501(C)(3)	CAPACITY BUIDLING	50,000.
CHARLOTTE MECKLENBURG HOUSING PARTNERSHIP, INC. 4601 CHARLOTTE PARK DRIVE SUITE 350 CHARLOTTE, NC 28217	501(C)(3)	CAPACITY BUILDING	50,000.
FOND DU LAC BAND OF LAKE SUPERIOR CHIPPEWA 1720 BIG LAKE ROAD CLOQUET, MN 55720	501(C)(3)	CAPACITY BUILDING	50,000.
FORDHAM BEDFORD HOUSING CORPORATION 2751 GRAND CONCOURSE BRONX, NY 10468	501(C)(3)	CAPACITY BUILDING	65,000.
HABITAT FOR HUMANITY DETROIT 14325 JANE STREET DETROIT, MI 48205	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
INTERIM COMMUNITY DEVELOPMENT ASSOC. 310 MAYNARD AVENUE SOUTH SEATTLE, WA 98104	501(C)(3)	CAPACITY BUILDING	50,000.
INTERNATIONAL SONORAN DESERT ALLIANCE P.O. BOX 687 AJO, AZ 85321	501(C)(3)	CAPACITY BUILDING	50,000.
ISRAEL MANOR 1251 SARATOGA AVE WASHINGTON, DC 20018	501(C)(3)	CAPACITY BUILDING	50,000.
MAZASKA OWECASO OTIPI FINANCIAL, INC. PO BOX 1996 PINE RIDGE, SD 57770	501(C)(3)	CAPACITY BUILDING	50,000.
MERCY HOUSING, INC. SOUTHEAST 260 PEACHTREE STREET SUITE 1800 ATLANTA, GA 30303	501(C)(3)	CAPACITY BUILDING	50,000.
NORTHWEST HOUSING ALTERNATIVES, INC. 2316 SE WILLARD STREET MILWAUKIE, OR 97222	501(C)(3)	CAPACITY BUIDLING	50,000.
PATHSTONE CORPORATION 400 EAST AVENUE ROCHESTER, NY 14607	501(C)(3)	CAPACITY BUILDING	50,000.
ROBISON JEWISH HOME 6125 SW BOUNDARY STREET PORTLAND, OR 97221-1019	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
THE FORTUNE SOCIETY 2976 NORTHERN BOULEVARD LIC, NY 11101	501(C)(3)	CAPACITY BUILDING	51,000.
THE HUMANITIES FOUNDATION, INC. 476 WANDO PARK BOULEVARD SUITE 102 CHARLESTON, SC 29464	501(C)(3)	CAPACITY BUILDING	50,000.
UMPQUA COMMUNITY DEVELOPMENT CORPORATION 605 SE KANE STREET ROSEBURG, OR 97470	501(C)(3)	CAPACITY BUILDING	50,000.
OPPORTUNITY LINK, INC. 2229 5TH AVENUE SUITE 218-224 HAVRE, MT 59501	501(C)(3)	CAPACITY BUIDLING	49,993.
UTE MOUNTAIN UTE HOUSING AUTHORITY P.O. BOX EE TOWAOL, CO 81334	501(C)(3)	CAPACITY BUILDING	49,969.
IMPACT SEVEN, INC 147 LAKE ALMENA DR ALMENA, WI 54805	501(C)(3)	CAPACITY BUILDING	49,863.
LITTLE TOKYO SERVICE CENTER CDC 231 EAST THIRD STREET G106 LOS ANGELES, CA 90013	501(C)(3)	CAPACITY BUILDING	49,717.
CENTER CITY HOUSING CORPORATION 105 1/2 W. SUPERIOR STREET DULUTH, MN 55802	501(C)(3)	CAPACITY BUILDING	49,242.

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
A BETTER CITY 33 BROAD STREET, 3RD FLOOR BOSTON, MA 02109	501(C)(3)	CAPACITY BUILDING	49,077.
DHIC, INC. 113 SOUTH WILMINGTON STREET RALEIGH, NC 27601	501(C)(3)	CAPACITY BUILDING	48,000.
LITTLE TRAVERSE BAY BANDS OF ODAWA INDIANS 7500 ODAWA CIRCLE HARBOR SPRINGS, MI 49740	501(C)(3)	CAPACITY BUILDING	47,363.
HACIENDA CDC 5136 NE 42ND AVENUE PORTLAND, OR 97218	501(C)(3)	CAPACITY BUILDING	45,000.
ST. FRANCIS CENTER 2323 CURTIS STREET DENVER, CO 80205	501(C)(3)	CAPACITY BUILDING	45,000.
HABITAT FOR HUMANITY/METRO JACKSON, INC. P.O. BOX 55634 JACKSON, MS 39296	501(C)(3)	CAPACITY BUILDING	42,984.
SELFHELP COMMUNITY SERVICES, INC. 520 EIGHTH AVENUE NEW YORK, NY 10018	501(C)(3)	CAPACITY BUILDING	42,960.
BURTEN, BELL, CARR DEVELOPMENT, INC. 7201 KINSMAN ROAD SUITE 104 CLEVELAND, OH 44104	501(C)(3)	CAPACITY BUILDING	42,461.

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 1501 LEE HIGHWAY SUITE 303 ARLINGTON, VA 22209	501(C)(3)	CAPACITY BUILDING	42,386.
NORTH RIVER COMMISSION 3403 W LAWRENCE AVE CHICAGO, IL 60625	501(C)(3)	CAPACITY BUILDING	42,384.
SETTLEMENT HOUSING FUND, INC 247 W. 37TH STREET 4TH FLOOR NEW YORK, NY 10018	501(C)(3)	CAPACITY BUILDING	42,355.
ST. NICKS ALLIANCE 2 KINGLAND AVENUE BROOKLYN, NY 11211	501(C)(3)	CAPACITY BUILDING	42,190.
THE DELORES PROJECT P.O. BOX 1406 DENVER, CO 80207	501(C)(3)	CAPACITY BUILDING	42,008.
URBAN RESTORATION ENHANCEMENT CORPORATION PO BOX 73032 BATON ROUGE, LA 70874	501(C)(3)	CAPACITY BUILDING	41,577.
DEL NORTE NEIGHBORHOOD DEVELOPMENT CORPORATION 3275 W 14TH AVENUE #202 DENVER, CO 80204	501(C)(3)	CAPACITY BUILDING	40,420.
COLUMBIA CASCADE HOUSING CORPORATION 312 COURT STREET SUITE 419 THE DALLES, OR 97058	501(C)(3)	CAPACITY BUILDING	40,000.

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
DETROIT SHOREWAY COMMUNITY DEV. ORG. 6516 DETROIT AVENUE SUITE 1 CLEVELAND, OH 44102	501(C)(3)	CAPACITY BUILDING	43,250.
GLOBAL GREEN 1617 BROADWAY, 2ND FLOOR SANTA MONICA, CA 90404	501(C)(3)	CAPACITY BUILDING	40,000.
MHANY MANAGEMENT, INC. 1 METRO TECH CENTER NORTH 11TH FLOOR BROOKLYN, NY 11201	501(C)(3)	CAPACITY BUILDING	40,000.
MISSION ECONOMIC DEVELOPMENT AGENCY 2301 MISSION STREET SUITE 301 SAN FRANCISCO, CA 94110	501(C)(3)	CAPACITY BUILDING	40,000.
NEIGHBORHOOD NONPROFIT HOUS CORP 195 GOLF COURSE ROAD SUITE 1 LOGAN, UT 84321	501(C)(3)	CAPACITY BUILDING	40,000.
PROJECT INTERCONNECTIONS, INC. 2198 DRESDEN DRIVE CHAMBLEE, GA 30341	501(C)(3)	CAPACITY BUILDING	40,000.
SRO HOUSING CORPORATION 1055 W. 7TH STREET, SUITE 3250 LOS ANGELES, CA 90017	501(C)(3)	CAPACITY BUILDING	40,000.

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
HUDSON RIVER HOUSING, INC. 313 MILL STREET POUGHKEEPSIE, NY 12601	501(C)(3)	CAPACITY BUILDING	39,978.
HANCOCK RESOURCE CENTER 308 HIGHWAY 90 SUITE D WAVELAND, MS 39576	501(C)(3)	CAPACITY BUILDING	39,907.
CLIFFORD BEERS HOUSING, INC. 1200 WILSHIRE BOULEVARD SUITE 520 LOS ANGELES, CA 90017	501(C)(3)	CAPACITY BUILDING	39,500.
SINGLE ROOM OCCUPANCY HOUSING CORPORATION 1055 W. 7TH STREET SUITE 3250 LOS ANGELES, CA 90017	501(C)(3)	CAPACITY BUILDING	39,500.
MONTGOMERY HOUSING PARTNERSHIP, INC. 12200 TECH ROAD SUITE 250 SILVER SPRING, MD 20904	501(C)(3)	CAPACITY BUILDING	38,699.
CLARETIAN ASSOCIATES, INC. 9108 SOUTH BRANDON AVENUE CHICAGO, IL 60617	501(C)(3)	CAPACITY BUILDING	38,620.
COMMONBOND COMMUNITIES 1080 MONTREAL AVE ST. PAUL, MN 55116	501(C)(3)	CAPACITY BUILDING	38,038.

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
DENVER HOUSING AUTHORITY 777 GRANT STREET 6TH FLOOR DENVER, CO 80203	501(C)(3)	CAPACITY BUILDING	37,500.
RURAL HOUSING DEVELOPMENT CORPORATION 63 N 400 WEST PROVO, UT 84601	501(C)(3)	CAPACITY BUILDING	37,500.
THE RESURECTION PROJECT 1818 S. PAULINA CHICAGO, IL 60608	501(C)(3)	CAPACITY BUILDING	36,850.
SALISH & KOOTENAI HOUSING AUTHORITY PO BOX 38 PABLO, MT 59855	501(C)(3)	CAPACITY BUILDING	36,349.
ABILITY HOUSING OF NORTHEAST FLORIDA, INC. 76 S LAURA STREET SUITE 303 JACKSONVILLE, FL 32202-3436	501(C)(3)	CAPACITY BUILDING	36,142.
DORCHESTER BAY ECONOMIC DEVELOPMENT CORPORATION 594 COLUMBIA ROAD SUITE 301 DORCHESTER, MA 02125	501(C)(3)	CAPACITY BUILDING	36,000.
OAK PARK RESIDENCE CORPORATION 21 SOUTH BOULEVARD OAK PARK, IL 60302	501(C)(3)	CAPACITY BUILDING	36,000.
THE THRESHOLDS 4101 N RAVENSWOOD CHICAGO, IL 60613	501(C)(3)	CAPACITY BUILDING	36,000.

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
METROPOLITAN AFFORDABLE HOUSING CORPORATION P.O. BOX 11923 EUGENE, OR 97440	501(C)(3)	CAPACITY BUILDING	35,372.
SOUTHEAST COMMUNITY DEVELOPMENT CORPORATION 3323 EASTERN AVENUE SUITE 200 BALTIMORE, MD 21224	501(C)(3)	CAPACITY BUILDING	35,086.
CENTURY VILLAGES AT CABRILLO 1000 CORPORATE POINTE CULVER CITY, CA 90230	501(C)(3)	CAPACITY BUILDING	35,000.
CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORPORATION 587 WASHINGTON STREET DORCHESTER, MA 02124	501(C)(3)	CAPACITY BUILDING	35,000.
INDIANTOWN NON PROFIT HOUSING, INC. P.O. BOX 456 INDIANTOWN, FL 34956	501(C)(3)	CAPACITY BUILDING	35,000.
JEWISH ASSOCIATION FOR SERVICES FOR THE AGED 247 WEST 37TH STREET 9TH FLOOR NEW YORK, NY 10018	501(C)(3)	CAPACITY BUILDING	35,000.
NORTHERN PUEBLOS HOUSING AUTHORITY 5 WEST GUTIERREZ SUITE 10 SANTA FE, NM 87506	501(C)(3)	CAPACTIY BUILDING	35,000.
THE PRATT AREA COMMUNITY COUNCIL, INC. 201 DEKALB AVENUE BROOKLYN, NY 11205	501(C)(3)	CAPACITY BUILDING	35,000.

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
URBAN EDGE HOUSING CORPORATION 1542 COLUMBUS AVENUE SUITE 2 ROXBURY, MA 02119	501(C)(3)	CAPACITY BUILDING	35,000.
CHINATOWN COMMUNITY DEVELOPMENT CENTER 1525 GRANT AVENUE SAN FRANCISCO, CA 94133	501(C)(3)	CAPACITY BUILDING	34,721.
UNIVERSITY NEIGHBORHOOD HOUSING PROGRAM 2751 GRAND CONCOURSE BRONX, NY 10468-3001	501(C)(3)	CAPACITY BUILDING	37,122.
SAN FRANCISCO COMMUNITY LAND TRUST 21 COLUMBUS AVENUE # 231 SAN FRANCISCO, CA 94111	501(C)(3)	CAPACITY BUILDING	34,554.
NEIGHBORHOOD HOUSING SERVICES OF THE INLAND EMPIRE 1390 NORTH D STREET SAN BERNARDINO, CA 92405	501(C)(3)	CAPACITY BUILDING	34,500.
CHICAGO NEIGHBORHOOD INITIATIVES, INC. 1000 E 111TH STREET CHICAGO, IL 60628	501(C)(3)	CAPACITY BUILDING	33,950.
OFFICE OF RURAL & FARMWORKER HOUSING 1400 SUMMITVIEW AVE. #203 YAKIMA, WA 98902	501(C)(3)	CAPACITY BUILDING	33,854.
RENAISSANCE HOUSING DEVELOPMENT CORPORATION 2111 CHAMPA STREET DENVER, CO 80205	501(C)(3)	CAPACITY BUILDING	33,338.

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
FIFTH AVENUE COMMITTEE, INC. 621 DEGRAW STREET BROOKLYN, NY 11217	501(C)(3)	CAPACITY BUILDING	33,333.
RESOURCES FOR COMMUNITY DEVELOPMENT 2220 OXFORD STREET BERKELEY, CA 94704	501(C)(3)	CAPACITY BUILDING	33,000.
CENTER FOR NEIGHBORHOOD TECHNOLOGY 2125 W. NORTH AVENUE CHICAGO, IL 60647	501(C)(3)	CAPACITY BUILDING	32,875.
TULE RIVER INDIAN HOUSING AUTHORITY 342 N RESERVATION ROAD PORTERVILLE, CA 93257	501(C)(3)	CAPACITY BUILDING	32,814.
GREENWOOD LEFLORE CARROLL ECONOMIC DEVELOPMENT FOU 402 HIGHWAY 82 BYPASS GREENWOOD, MS 38935-0026	501(C)(3)	CAPACITY BUILDING	32,591.
BICKERDIKE REDEVELOPMENT CORPORATION 2550 WEST NORTH AVENUE CHICAGO, IL 60647-5216	501(C)(3)	CAPACITY BUILDING	32,420.
HARMONY NEIGHBORHOOD DEVELOPMENT 3301 LASALLE STREET NEW ORLEANS, LA 70115	501(C)(3)	CAPACITY BUILDING	32,000.
NEIGHBORHOOD HOUSING SERVICES OF SOUTH FLORIDA 300 NW 12 AVENUE MIAMI, FL 33128	501(C)(3)	CAPACITY BUILDING	32,000.

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
CATHOLIC CHARITIES HOUSING SERVICES 5301 TIETON DRIVE SUITE G YAKIMA, WA 98908	501(C)(3)	CAPACITY BUILDING	31,455.
MIDPEN HOUSING CORPORATION 303 VINTAGE PARK DRIVE SUITE 250 FOSTER CITY, CA 94404	501(C)(3)	CAPACITY BUILDING	30,953.
OPAL COMMUNITY LAND TRUST 286 ENCHANTED FOREST ROAD P.O. BOX 1133 EASTSOUND, WA 98245	501(C)(3)	CAPACITY BUILDING	30,658.
QUEST 35, INC. 878 ROCK STREET, NW ATLANTA, GA 30314-0208	501(C)(3)	CAPACITY BUILDING	30,572.
COMMUNITY HOUSING DEVELOPMENT CORPORATION OF NORTH 1535 A FRED JACKSON WAY RICHMOND, CA 94801	501(C)(3)	CAPACITY BUILDING	30,307.
COMPREHENSIVE HOUSING ASSISTANCE, INC. 5809 PARK HEIGHTS AVENUE BALTIMORE, MD 21215	501(C)(3)	CAPACITY BUILDING	30,187.
BASTION COMMUNITY OF RESILIENCE 7506 ZIMPEL STREET NEW ORLEANS, LA 70118	501(C)(3)	CAPACITY BUILDING	30,000.
HANAC, INC. 49 WEST 45TH STREET 4TH FLOOR NEW YORK, NY 10036	501(C)(3)	CAPACITY BUILDING	30,000.

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
JAMAICA PLAIN NEIGHBORHOOD DEVELOPMENT CORPORATION 31 GERMANIA STREET JAMAICA PLAIN, MA 02130	501(C)(3)	CAPACITY BUILDING	30,000.
NEIGHBORHOOD OF AFFORDABLE HOUSING, INC 143 BORDER STREET EAST BOSTON, MA 02127	501(C)(3)	CAPACITY BUILDNIG	30,000.
NORTH SHORE COMMUNITY DEVELOPMENT COALITION 102 LAFAYETTE STREET SALEM, MA 01970	501(C)(3)	CAPACITY BUILDING	29,408.
HOUSING SOLUTIONS FOR THE SOUTHWEST 295 GIRARD STREET DURANGO, CO 81303	501(C)(3)	CAPACITY BUILDING	29,271.
SOUTHSIDE UNITED HDFC 434 SOUTH 5TH STREET BROOKLYN, NY 11211	501(C)(3)	CAPACITY BUILDING	29,266.
HOUSING INITIATIVE PARTNERSHIP 6525 BELCREST ROAD SUITE 555 HYATTSVILLE, MD 20782	501(C)(3)	CAPACITY BUILDING	28,284.
MANNA, INC. 828 EVARTS STREET, NE WASHINGTON, DC 20018	501(C)(3)	CAPACITY BUILDING	28,284.
CITY FIRST HOMES, INC. 1436 U STREET, NW SUITE 404 WASHINGTON, DC 20009	501(C)(3)	CAPACITY BUILDING	28,283.

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
OHKAY OWINGEH HOUSING AUTHORITY P.O. BOX 1059 OHKAY OWINGEH, NM 87566	501(C)(3)	CAPACITY BUILDING	26,920.
ASIAN AMERICANS FOR EQUALITY 2 ALLEN STREET, 7TH FLOOR NEW YORK, NY 10002	501(C)(3)	CAPACITY BUILDING	30,300.
ATHENS LAND TRUST, INC. 685 N. POPE STREET ATHENS, GA 30601	501(C)(3)	CAPACITY BUILDING	26,232.
NEIGHBORHOOD HOUSING SERVICES OF CHICAGO, INC. 1279 N. MILWAUKEE AVENUE FL. 5 CHICAGO, IL 60622	501(C)(3)	CAPACITY BUILDING	26,000.
INSTITUTO PARA EL DESARROLLO SOCIOECONOMICO Y DE V P.O. BOX 7154 MAYAGUEZ, PR 00680	501(C)(3)	CAPACITY BUILDING	25,475.
SANTO DOMINGO TRIBAL HOUSING AUTHORITY P.O. BOX 10 SANTO DOMINGO PUEBLO, NM 87052	501(C)(3)	CAPACITY BUILDING	25,291.
HOUSING VISIONS UNLIMITED, INC. 1201 E. FAYETTE STREET SUITE 26 SYRACUSE, NY 13210	501(C)(3)	CAPACITY BUILDING	25,285.
CITY OF LAKES COMMUNITY TRUST 1930 GLENWOOD AVENUE MINNEAPOLIS, MN 55405	501(C)(3)	CAPACITY BUILDING	25,247.

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
SANTA FE COMMUNITY HOUSING TRUST P.O. BOX 713 SANTA FE, NM 87504	501(C)(3)	CAPACITY BUILDING	25,010.
COMMUNITY DEVELOPMENT COLLABORATIVE OF GREATER COL 175 SOUTH THIRD STREET SUITE 1060 COLUMBUS, OH 43215	501(C)(3)	CAPACITY BUILDING	25,000.
ENLACE CHICAGO 2756 S. HARDING STREET CHICAGO, IL 60623	501(C)(3)	CAPACITY BUILDING	25,000.
MID CITY REDEVELOPMENT ALLIANCE, INC 419 N 19TH STREET BATON ROUGE, LA 70802	501(C)(3)	CAPACITY BUILDING	25,000.
OLD BROOKLYN COMMUNITY DEVELOPMENT CORP 2339 BROADVIEW RD CLEVELAND, OH 44109	501(C)(3)	CAPACITY BUILDING	25,000.
ST. JOHN COMMUNITY DEVELOPMENT CORPORATION 1324 NW 3RD AVENUE MIAMI, FL 33136	501(C)(3)	CAPACITY BUILDING	25,000.
TENEMOS QUE RECLAMAR Y UNIDOS SALVAR LA TIERRA-SOU 4331 SOUTH MAIN STREET LOS ANGELES, CA 90037	501(C)(3)	CAPACITY BUILDING	25,500.
ATLANTA NEIGHBORHOOD DEVELOPMENT PARTNERSHP, INC. 229 PEACHTREE STREET, NE SUITE 705 ATLANTA, GA 30303-1605	501(C)(3)	CAPACITY BUILDING	24,893.

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
PROJECT BUILD A FUTURE 2306 THIRD STREET LAKE CHARLES, LA 70601	501(C)(3)	CAPACITY BUILDING	24,273.
ROC USA LLC 7 WALL STREET CONCORD, NH 03301	501(C)(3)	CAPACITY BUILDING	23,700.
GOOD SHEPHERD HOUSING & FAMILY SERVICES, INC. 8305 RICHMOND HIGHWAY SUITE # 17B ALEXANDRIA, VA 22309	501(C)(3)	CAPACITY BUILDING	23,375.
COMMUNITY AREA RESOURCE ENTERPRISE, INC. P.O. BOX 4298 GALLUP, NM 87305	501(C)(3)	CAPACITY BUILDING	22,781.
CAMBA HOUSING VENTURES, INC. 1720 CHURCH AVENUE BROOKLYN, NY 11226	501(C)(3)	CAPACITY BUILDING	21,000.
THE AFFORDABLE HOUSING GROUP OF NORTH CAROLINA, IN 4600 PARK ROAD SUITE 390 CHARLOTTE, NC 28209	501(C)(3)	CAPACITY BUILDING	20,762.
5225 MARLBORO VENTURES, LLC 2308 19TH STREET, NW WASHINGTON, DC 20009	501(C)(3)	CAPACITY BUILDING	20,301.
WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORPORATION 50 EAST 168TH STREET BRONX, NY 10452	501(C)(3)	CAPACITY BUILDING	20,120.

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
ALL HANDS VOLUNTEERS 6 COUNTY ROAD, SUITE 6 MATTAPOISETT, MA 02739	501(C)(3)	CAPACITY BUILDING	20,000.
GREATER NEW ORLEANS HOUSING ALLIANCE 1050 S. JEFFERSON DAVIS PARKWAY SUITE 301 NEW ORLEANS, LA 70125	501(C)(3)	CAPACITY BUILDING	20,000.
H STREET COMMUNITY DEVELOPMENT CORPORATION 916 PENNSYLVANIA AVE, SE WASHINGTON, DC 20003-2140	501(C)(3)	CAPACITY BUILDING	20,000.
HABITAT FOR HUMANITY OF GREATER BATON ROUGE 6554 FLORIDA BLVD, SUITE 200 BATON ROUGE, LA 70806	501(C)(3)	CAPACITY BUILDING	20,000.
HOMEOWNER'S REHAB., INC. 280 FRANKLIN STREET CAMBRIDGE, MA 02139	501(C)(3)	CAPACITY BUILDING	20,000.
HOPEWORKS SOCIAL ENTERPRISES 5830 EVERGREEN WAY EVERETT, WA 98203	501(C)(3)	CAPACITY BUILDING	20,000.
REBUILDING TOGETHER BATON ROUGE PO BOX 1109 BATON ROUGE, LA 70821-1109	501(C)(3)	CAPACITY BUILDING	20,000.
SPRINGBOARD TO OPPORTUNITIES 3000 OLD CANTON ROAD SUITE 470 JACKSON, MS 39216	501(C)(3)	CAPACITY BUILDING	20,000.

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
THE ARC BATON ROUGE 8326 KELWOOD AVE BATON ROUGE, LA 70806	501(C)(3)	CAPACITY BUILDING	20,000.
THE CORNERSTONE GROUP 7661 BUSH LAKE DRIVE BLOOMINGTON, MN 55438	501(C)(3)	CAPACITY BUILDING	20,000.
WEST ANGELES COMMUNITY DEVELOPMENT CORPORATION 6028 CRENSHAW BOULEVARD LOS ANGELES, CA 90043	501(C)(3)	CAPACITY BUILDING	19,720.
EMPIRE HOMES OF MARYLAND, INC. 1800 N. CHARLES STREET SUITE 700 BALTIMORE, MD 21201	501(C)(3)	CAPACITY BUILDING	19,652.
MIAMI HOMES FOR ALL, INC 140 WEST FLAGLER STREET, SUITE 105 MIAMI, FL 33130	501(C)(3)	CAPACITY BUILDING	19,575.
MERCY HOUSING LAKEFRONT 120 SOUTH LASALLE STREET SUITE 1850 CHICAGO, IL 60603	501(C)(3)	CAPACITY BUILDING	19,500.
HISPANIC HOUSING DEVELOPMENT CORPORATION 325 N. WELLS 8TH FLOOR CHICAGO, IL 60654	501(C)(3)	CAPACITY BUILDING	19,118.
JANE PLACE NEIGHBORHOOD SUSTAINABILITY INITIATIVE, P.O. BOX 53011	NONE	CAPACITY BUILDING	18,778.

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NEW ORLEANS, LA 70153	501(C)(3)		
NORTHWEST SIDE COMMUNITY DEVELOPMENT CORPORATION 4201 NORTH 27TH STREET 7TH FLOOR MILWAUKEE, WI 53216	501(C)(3)	CAPACITY BUILDING	18,341.
LUCHA CONTRA EL SIDA, INC. PO BOX 8479 SAN JUAN, PR 00910-0479	501(C)(3)	CAPACITY BUILDING	17,451.
SEA MAR COMMUNITY HEALTH CENTERS 1040 S HENDERSON STREET SEATTLE, WA 98108	501(C)(3)	CAPACITY BUILDING	15,779.
GILMAN HOUSING TRUST, INC. P.O. BOX 259 LYNDONVILLE, VT 05851	501(C)(3)	CAPACITY BUILDING	15,470.
MULTISERVICE CENTER 1200 SOUTH 336TH STREET FEDERAL WAY, WA 98003	501(C)(3)	CAPACITY BUILDING	15,429.
CASA DE MARYLAND, INC. 8151 15TH AVENUE HYATTSVILLE, MD 20783	501(C)(3)	CAPACITY BUILDING	16,302.
MIAMI BEACH COMMUNITY DEVELOPMENT CORP 945 PENNSYLVANIA AVE THE SEYMOUR, 2ND FLOOR MIAMI BEACH, FL 33139	501(C)(3)	CAPACITY BUILDING	15,275.

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
COLORADO CENTER ON LAW AND POLICY 789 SHERMAN STREET, SUITE 300 DENVER, CO 80203	501(C)(3)	CAPACITY BUILDING	15,000.
HEALTHY NEIGHBORHOODS, INC. 2 E. READ STREET BALTIMORE, MD 21202	501(C)(3)	CAPACITY BUILDING	15,000.
MENTAL HEALTH SERVICES FOR HOMELESS PERSONS, INC. 1744 PAYNE AVENUE CLEVELAND, OH 44114	501(C)(3)	CAPACITY BUILDING	16,500.
NUESTRA COMUNIDAD DEVELOPMENT CORPORATION 56 WARREN STREET SUITE 200 ROXBURY, MA 02119	501(C)(3)	CAPACITY BUILDING	15,000.
PATHSTONE ALLIANCE FOR BETTER HOUSING 648 BUENA VISTA DRIVE KENNETT SQUARE, PA 19348	501(C)(3)	CAPACITY BUILDING	15,000.
PHI ONE TRINITY DRIVE EAST SUITE 201 DILLSBURG, PA 17019-8522	501(C)(3)	CAPACITY BUILDING	14,583.
FRONTIER HOUSING, INC. 5445 FLEMINGSBURG ROAD MOREHEAD, KY 40351	501(C)(3)	CAPACITY BUILDING	14,371.
MARY HOUSE, INC 4303 13TH ST NE WASHINGTON, DC 20017	501(C)(3)	CAPACITY BUILDING	14,073.

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
LITTLE HAITI HOUSING ASSOCIATION, INC. 181 NORTHEAST 82ND STREET MIAMI, FL 33138	501(C)(3)	CAPACITY BUILDING	13,569.
JUBILEE HOUSING, INC. 1640 COLUMBIA ROAD, NW WASHINGTON, DC 20009	501(C)(3)	CAPACITY BUILDING	13,509.
HABITAT FOR HUMANITY OF THE CHESAPEAKE, INC. 3741 COMMERCE DRIVE SUITE 309 BALTIMORE, MD 21227-1664	501(C)(3)	CAPACITY BUILDING	12,901.
RENAISSANCE NEIGHBORHOOD DEVELOPMENT CORPORATION 4162 CANAL STREET NEW ORLEANS, LA 70119	501(C)(3)	CAPACITY BUILDING	12,547.
CHHAYA COMMUNITY DEVELOPMENT 37-43 77TH STREET 2ND FLOOR JACKSON HEIGHTS, NY 11372	501(C)(3)	CAPACITY BUILDING	12,500.
ROCKY MOUNTAIN MUTUAL HOUSING ASSOCIATION, INC. 225 E 16TH AVENUE SUITE 1060 DENVER, CO 80203	501(C)(3)	CAPACITY BUILDING	12,001.
FOCUS: HOPE 1355 OAKMAN BOULEVARD DETROIT, MI 48238	501(C)(3)	CAPACITY BUILDING	11,936.
MOUNTAIN HOUSING OPPORTUNITIES 64 CLINGMAN AVENUE SUITE 101 ASHEVILLE, NC 28801	501(C)(3)	CAPACITY BUILDING	11,875.

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
NEIGHBORHOOD HOUSING SERVICES OF RICHLAND COUNTY 125 E. SEMINARY STREET RICHLAND CENTER, WI 53581	501(C)(3)	CAPACITY BUILDING	11,677.
GREATER ROCHESTER HOUSING PARTNERSHIP 16 E. MAIN STREET SUITE 610 ROCHESTER, NY 14614	501(C)(3)	CAPACITY BUILDING	11,135.
ST. AMBROSE HOUSING AID CENTER 321 E 25TH ST BALTIMORE, MD 21218	NONE 501(C)(3)	CAPACITY BUILDING	11,000.
COMMUNITY RESOURCES & HOUSING DEVELOPMENT CORPORAT 7305 LOWELL BOULEVARD SUITE 200 WESTMINSTER, CO 80030	501(C)(3)	CAPACITY BUILDING	10,485.
HOUSING COUNSELING SERVICES 2410 17TH STREET, NW WASHINGTON, DC 20009	501(C)(3)	CAPACITY BUILDING	10,442.
NEIGHBORHOOD DEVELOPMENT ALLIANCE 481 WABASHA STREET S ST. PAUL, MN 55107	501(C)(3)	CAPACITY BUILDING	10,010.
ACTION MINISTRIES, INC 17 EXECUTIVE PARK DRIVE ATLANTA, GA 30329	501(C)(3)	CAPACITY BUILDING	10,000.
BALTIMORE COMMUNITY FOUNDATION 2 EAST READ STREET BALTIMORE, MD 21202	501(C)(3)	CAPACITY BUILDING	10,000.

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
CARINGWORKS, INC. 2785 LAWRENCEVILLE HIGHWAY DECATUR, GA 30033	501(C)(3)	CAPACITY BUILDING	10,000.
CHICAGO AREA FAIR HOUSING ALLIANCE 100 N LASALLE STREET SUITE 600 CHICAGO, IL 60602	501(C)(3)	CAPACITY BUILDING	10,000.
CONSTRUCTION EDUCATION FOUNDATION OF GEORGIA P.O. BOX 92121 ATLANTA, GA 30314	501(C)(3)	CAPACITY BUILDING	10,000.
GEORGIA ADVANCING COMMUNITIES TOGETHER, INC. 250 GEORGIA AVE, SE, SUITE 350 ATLANTA, GA 30312	501(C)(3)	CAPACITY BUILDING	10,000.
GRANT HOUSING ECONOMIC DEVELOPMENT CORPORATION INC 10435 S CENTRAL AVE LOS ANGELES, CA 90002	501(C)(3)	CAPACITY BUILDING	10,000.
GREYSTON FOUNDATION 21 PARK AVE. YONKERS, NY 10703	501(C)(3)	CAPACITY BUILDING	10,000.
LABC INSTITUTE 2029 CENTURY PARK EAST, SUITE 1240 LOS ANGELES, CA 90067	501(C)(3)	CAPACITY BUILDING	10,000.
LATIN UNITED COMMUNITY HOUSING ASSOCIATION 3541 W. NORTH AVENUE CHICAGO, IL 60647	501(C)(3)	CAPACITY BUILDING	10,000.

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
MARIN REHAB CORP 98 CUTTER MILL ROAD, SUITE 342 S GREAT NECK, NY 11021	501(C)(3)	CAPACITY BUILDING	10,000.
SUPPORTIVE HOUSING NETWORK OF NEW YORK 247 WEST 37TH STREET 18TH FLOOR NEW YORK, NY 10018	501(C)(3)	CAPACITY BUILDING	21,450.
WEST HOLLYWOOD COMMUNITY HOUSING CORPORATION 7530 SANTA MONICA BOULEVARD SUITE 1 WEST HOLLYWOOD, CA 90046	501(C)(3)	CAPACITY BUILDING	10,000.
HOMES FOR AMERICA, INC. 318 SIXTH STREET ANNAPOLIS, MD 21403	501(C)(3)	CAPACITY BUILDING	9,812.
LEECH LAKE BAND OF OJIBWE HOUSING AUTHORITY 611 ELM AVENUE CASS LAKE, MN 56633	501(C)(3)	CAPACITY BUILDING	9,399.
VIETNAMESE INITIATIVES IN ECONOMIC TRAINING (VIET) 13435 GRANVILLE STREET NEW ORLEANS, LA 70129	501(C)(3)	CAPACITY BUILDING	9,137.
CASCADIA BEHAVIORAL HEALTHCARE, INC. P.O. BOX 8459 PORTLAND, OR 97207	501(C)(3)	CAPACITY BUILDING	8,817.
GEORGIA LAW CENTER ON HOMELESSNESS & POVERTY INC 100 EDGEWOOD STREET SUITE 1625 ALTANTA, GA 30303	501(C)(3)	CAPACITY BUILDING	8,000.

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOUSING DEVELOPMENT CONSORTIUM OF SEATTLE-KING COU 1402 THIRD AVENUE SEATTLE, WA 98101	501(C)(3)	CAPACITY BUILDING	8,000.
COMMUNITY DEVELOPMENT FOR ALL PEOPLE 946 PARSONS AVENUE P.O. BOX 06063 COLUMBUS, OH 43206	501(C)(3)	CAPACITY BUILDING	7,492.
JUBILEE BALTIMORE, INC. 25 EAST 20TH STREET BALTIMORE, MD 21218	501(C)(3)	CAPACITY BUILDING	7,271.
MI CASA, INC. 6230 3RD STREET, NW SUITE 2 WASHINGTON, DC 20011	501(C)(3)	CAPACITY BUILDING	7,141.
HOUSING OPPORTUNITY DEVELOPMENT CORPORATION 2001 WAUKEGAN ROAD P.O. BOX 480 TECHNY, IL 60082	501(C)(3)	CAPACITY BUILDING	6,520.
WONDERROOT 982 MEMORIAL DRIVE SE ATLANTA, GA 30316	501(C)(3)	CAPACITY BUILDING	6,000.
PARTNERSHIP FOR SOUTHERN EQUITY 100 PEACHTREE STREET NW SUITE 1960 ATLANTA, GA 30303	501(C)(3)	CAPACITY BUILDING	5,500.

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
SOUTHFACE ENERGY INSTITUTE 241 PINE STREET ATLANTA, GA 30308	501(C)(3)	CAPACITY BUILDING	5,500.
HABITAT FOR HUMANITY BAY-WAVELAND AREA, INC. 414 HWY 90 BAY ST. LOUIS, MS 39520	501(C)(3)	CAPACITY BUILDING	5,096.
COMMUNITY DEVELOPMENT NETWORK OF MARYLAND, INC. P.O. BOX 22426 BALTIMORE, MD 21203	501(C)(3)	CAPACITY BUILDING	5,000.
ENVISION DA BERRY 1505 S HOPKINS ST NEW IBERIA, LA 70560	501(C)(3)	CAPACITY BUILDING	5,000.
FUND FOR THE CITY OF NEW YORK, INC. 121 AVENUE OF THE AMERICAS 6TH FLOOR NEW YORK, NY 10013	501(C)(3)	CAPACITY BUILDING	5,000.
KOUNKUEY DESIGN INITIATIVE 309 EAST 8TH STREET, #205 LOS ANGELES, CA 90014	501(C)(3)	CAPACITY BUILDING	5,000.
LAWRENCE COMMUNITYWORKS, INC. 168 NEWBURY STREET LAWRENCE, MA 01841	501(C)(3)	CAPACITY BUILDING	5,000.
MUST MINISTRIES, INC 1407 COBB PARKWAY NW MARIETTA, GA 30061	501(C)(3)	CAPACITY BUILDING	5,000.

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
ONE SQUARE WORLD 71 PETER PARLEY ROAD BOSTON, MA 02130	501(C)(3)	CAPACITY BUILDING	5,000.
PEOPLE ACTING FOR COMMUNITY TOGETHER, INC 9401 BISCAYNE BLVD SUITE 215 MIAMI, FL 33138	501(C)(3)	CAPACITY BUILDING	5,000.
SOUTH FLORIDA COMMUNITY DEVELOPMENT COALITION, INC 300 NW 12TH AVE MIAMI, FL 33128	501(C)(3)	CAPACITY BUILDING	5,000.
SUN VALLEY YOUTH CENTER 1230 DECATUR ST DENVER, CO 80204	501(C)(3)	CAPACITY BUILDING	5,000.
THOMAS JEFFERSON PLANNING DISTRICT PO BOX 1505 CHARLOTTESVILLE, VA 22902	501(C)(3)	CAPACITY BUILDING	5,000.
URBAN JUNCTURE FOUNDATION 300 EAST 51ST ST CHICAGO, IL 60615	501(C)(3)	CAPACITY BUILDING	5,000.
VIRGINIANS ORGANIZED FOR INTERFAITH COMMUNITY ENGA 4444 ARLINGTON BLVD ARLINGTON, VA 22204	501(C)(3)	CAPACITY BUILDING	5,000.
YWCA OF NORTHWEST GEORGIA, INC 48 HENDERSON STREET MARIETTA, GA 30064	501(C)(3)	CAPACITY BUILDING	5,000.

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
COALFIELD DEVELOPMENT CORPORATION P.O. BOX 1133 WAYNE, WV 25570	501(C)(3)	CAPACITY BUILDING	4,405.
MOUNT BAKER HOUSING ASSOCIATION 1423 31ST AVE SOUTH SEATTLE, WA 98144	501(C)(3)	CAPACITY BUILDING	4,056.
LAMB, INC. 1263 EAST NORTH AVENUE BALTIMORE, MD 21202	501(C)(3)	CAPACITY BUILDING	3,000.
LUTHERAN SOCIAL SERVICES HOUSING, INC. 1325 11TH STREET S FARGO, ND 58103	501(C)(3)	CAPACITY BUILDING	2,508.
OREGON OPPORTUNITY NETWORK 847 NE 19TH AVENUE PORTLAND, OR 97232	501(C)(3)	CAPACITY BUILDING	2,000.
URBAN LAND INSTITUTE ATLANTA 225 PEACHTREE STREET NE SUITE 1450 ATLANTA, GA 30303	501(C)(3)	CAPACITY BUILDING	1,500.
PATHSTONE CORPORATION 400 EAST AVENUE ROCHESTER, NY 14607	501(C)(3)	CAPACITY BUILDING	
PATHSTONE CORPORATION 6 PRINCE ST. ROCHESTER, NY 14607	501(C)(3)	CAPACITY BUILDING	

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
WASHINGTON REGIONAL ASSOCIATION OF GRANTMAKERS 1400 16TH STREET,NW WASHINGTON, DC 20036	501(C)(3)	CAPACITY BUILDING	80,000.
WBC COMMUNITY DEVELOPMNET CORPORATION 3809 FAIRVIEW AVENUE BALTIMORE, MD 21216	501(C)(3)	CAPACITY BUILDING	8,411.
YWCA OF NORTHWEST GEORGIA,INC 48 HENDERSON STREET MARIETTA, GA 30064	501(C)(3)	CAPACITY BUILDING	5,000.
IMPACTUS MARKETPLACE LLC 1875 CONNECTICUT AVENUE NW WASHINGTON, DC 20009	501	CAPACITY BUILDING	1,150,000.
CLEVELAND FOOD BANK 15500 S. WATERLOO ROAD CLEVELAND, OH 44110	501(C)(3)	CAPACITY BUILDING	10,000.
COSMIC BOBBINS 13226 SHAKER SQUARE CLEVELAND, OH 44120	501(C)(3)	CAPACITY BUILDING	10,000.
HOMEPORT OHIO 3443 AGLER ROAD CLEVELAND, OH 43219	501(C)(3)	CAPACITY BUILDING	5,000.
ECODISTRICTS 1223 SW WASHINGTON STREET PORTLAND, OR 97205	501(C)(3)	CAPACITY BUILDING	10,000.

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
NYS ASSOCIATION FOR AFFORDABLE HOUSING 242 W. 36TH STREET NEW YORK, NY 10018	501(C)(3)	CAPACITY BUILDING	5,875.
		TOTAL CONTRIBUTIONS PAID	15,774,763.

ATTACHMENT 3

COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME	TITLE	COMPENSATION
JEFFREY SCHAFFER	VICE PRESIDENT	38,599.
TERRI L. LUDWIG	TRUSTEE, PRESIDENT & CEO	660,298.
RICHARD D. GROSS	VICE PRESIDENT	280,136.
MARK MCDERMOTT	VICE PRESIDENT	250,105.
LORI MICHELLE CHATMAN	SENIOR VICE PRESIDENT	337,088.
MICHAEL MCNEELY	SVP, TREASURER, & CFO	359,039.
ALAN SCOTT ANDERSON	OFFICER	237,340.
ALAZNE M. SOLIS	SENIOR VICE PRESIDENT	373,904.
FAITH E. THOMAS	SVP &GENERAL COUNSEL/SECRETARY	324,168.
MATTHEW D. HOFFMAN	TRUSTEE	258,588.
MEAGHAN E. VLKOVIC	VICE PRESIDENT	222,022.
AMALIA M. KASTBERG	TRUSTEE	407,790.
MICHELLE WHETTEN	TRUSTEE	233,533.
DAVID CHARLES BOWERS	TRUSTEE	235,612.
EDWARD DAVID MANEKIN	SENIOR VICE PRESIDENT	216,584.
KEITH E. FAIREY	VICE PRESIDENT	283,751.
ALEX S. AVITABILE	VICE PRESIDENT	27,970.
PETRA D. MONTAGUE	VICE PRESIDENT	197,388.
KAREN M. LADO	TRUSTEE	174,758.
KATHERINE W. SWENSON	TRUSTEE	211,705.
ANTHONY JOSEPH DISPIGNO	VICE PRESIDENT	362,059.
ANDREW EDWARD GEER	VICE PRESIDENT	217,243
MELINDA J. POLLACK	SENIOR VICE PRESIDENT	236,843.
JACQUELINE WAGGONER	TRUSTEE	225,405.
JON SEARLES	TRUSTEE	221,797.
MARY JO BARRANCO	TRUSTEE	255,978.
TIFFANY MANUEL	TRUSTEE	222,765.
BENJAMIN NICHOLS	VICE PRESIDENT	200,165.
THOMAS OSDOBA	VICE PRESIDENT	180,791.
DIANE YENTEL	TRUSTEE	58,667.
ANDREW JAKABOVICS	VICE PRESIDENT	211,398.
ANGELA BOYD	TRUSTEE	200,785.
LAUREL BLATCHFORD	VICE PRESIDENT	387,974.
ANDREW JOHNSTON	VICE PRESIDENT	327,122.
CRAIG MELLENDICK	TRUSTEE	504,578.

ATTACHMENT 3

ATTACHMENT 3 (CONT'D)

COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

JUDITH KENDE	VICE PRESIDENT	299,584.
BRYAN PITTINGER	VICE PRESIDENT	217,845.
EUN SHIN	VICE PRESIDENT	240,043.
MARY ANN LEONARD	TRUSTEE	226,389.
ALLISON KNAPP	TRUSTEE	153,656.
PAUL BERNARD	TRUSTEE	231,008.
MARION MCFADDEN	TRUSTEE	78,309.
TOTAL COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES		10,590,782.

ATTACHMENT 4

PART II - OTHER EXPENSES

EMPLOYEE BENEFITS	3,421,092.
LEGAL EXPENSES	145,704.
ACCOUNTING EXPENSE	165,400.
LOBBYING	259,000.
PROFESSIONAL EXPENSE	51,329.
ADVERTISING	380,734.
OFFICE EXPENSES	532,671.
INFO. TECHNOLOGY	3,207,664.
TRAVEL EXPENSES	1,537,726.
CONFERENCES	961,020.
AFFILIATE PAYMENTS	2,918,950.
INSURANCE	85,448.
PROFESSIONAL AND CONTRACT SERV	10,269,586.
BAD DEBT	125,578.
BANK FEES	134,206.
MISC.	234,566.
TOTAL OTHER EXPENSES	24,430,674.

ATTACHMENT 5

CA 199, SCHEDULE L - OTHER NOTES AND LOANS RECEIVABLE

BORROWER: NOTES RECEIVABLE

BEGINNING BALANCE DUE	22,877,235.
ENDING BALANCE DUE	25,049,736.

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE	36,082,090.
TOTAL ENDING OTHER NOTES AND LOANS RECEIVABLES	41,825,484.

ATTACHMENT 6

SCHEDULE L - INVESTMENTS IN STOCK

DESCRIPTION	BEG. OF YEAR	END OF YEAR
EQUITY FUNDS	15,309,750.	15,344,091.
BOND FUNDS	9,306,757.	9,690,201.
ENTERPRISE COMMUNITY INVEST.	138,548,202.	144,844,808.
OTHER EQUITY INVESTMENTS	6,009,605.	2,818,825.
ENTERPRISE COMMUNITY LOAN FUND	45,613,986.	50,883,188.
IMPACTUS MARKETPLACE,LLC	1,992,394.	-490,420.
TOTAL INVESTMENTS IN STOCK	218,773,088.	223,090,693.

ATTACHMENT 7

SCHEDULE L - OTHER ASSETS

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DUE FROM AFFILIATE	1,564,999.	6,840,429.
OTHER		586,308.
PREPAID EXPENSES	276,567.	
TOTAL OTHER ASSETS	1,841,566.	7,426,737.

ATTACHMENT 8

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

EQUITY IN AFFILIATES	-10,994,025.
TOTAL INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED	-10,994,025.