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Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2008

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009 D Employer identification number C Name of organization NEIGHBORHOOD PROGRESS INC B Check if applicable Please use IRS 34-1611055 Address change label or Doing Business As E Telephone number Name change print or type. See (216) 830-2770 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite **G Gross receipts** \$ 4,997,075 Instruc-1956 WEST 25TH STREET No 200 Termination tions. City or town, state or country, and ZIP \pm 4 CLEVELAND, OH 44113 Amended return Application pending Name and address of Principal Officer **H(a)** Is this a group return for ERIC HODDERSEN affiliates? 1956 W 25TH STREET SUITE 200 CLEVELAND, OH 44113 H(b) Are all affiliates included? (If "No." attach a list See instructions) Group Exemption Number 🕨 Web site: ► WWW NEIGHBORHOODPROGRESS ORG L Year of Formation 1988 M State of legal domicile OH Briefly describe the organization's mission or most significant activities Activities & Governance See Additional Data Table Check this box ┌ if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) \cdot \cdot 18 18 Number of independent voting members of the governing body (Part VI, line 1b) $\,$. 20 Total number of employees (Part V, line 2a) . 0 Total number of volunteers (estimate if necessary) . Total gross unrelated business revenue from Part VIII, line 12, column (C) . 0 Net unrelated business taxable income from Form 990-T, line 34 . 0 7b b **Current Year Prior Year** 2,401,752 3,893,069 Contributions and grants (Part VIII, line 1h) . . 8 Program service revenue (Part VIII, line 2g) . . 9 143,200 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 461,442 126,431 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 493,157 428,805 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 3,499,551 4,448,305 4,996,265 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 4,125,004 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses 1,619,685 843,614 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 (Total fundraising expenses, Part IX, column (D), line 25 $\frac{42,562}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 814,900 1,411,712 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 6,559,589 7,251,591 18 Revenue less expenses Subtract line 18 from line 12 19 -3,060,038 -2,803,286 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 30,093,753 26,222,213 21 Total liabilities (Part X, line 26) 17,447,905 16,386,412 22 Net assets or fund balances Subtract line 21 from line 20 12,645,848 9,835,801 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 **Please** 2010-05-14 Sign Signature of officer Here ERIC HODDERSEN PRESIDENT Type or print name and title Date Check if Preparer's PTIN (See Gen Inst) Preparer's signature Paid empolyed 🕨 🦵 Preparer's Firm's name (or yours RSM McGladrey Inc if self-employed). **Use Only** address, and ZIP + 4 1001 Lakeside Ave Suite 1400 Phone no (216) 523-1900

Cleveland, OH 441141152 May the IRS discuss this return with the preparer shown above? (See instructions) .

Cat No 11282Y

Part III Statement of Program Service Accomplishments (See the instructions.)

| 4b 4c | AND TECHNICAL ASSISTANCE THROUNEW SYNERGIES AND NEW POSSIBIL | GH SEVERAL PROGRAMS PROTIES | Including grants of \$ | ORATION BY PROVIDING LOANS, GRAFEING SEPARATE AND UNRELATED ARE) (Revenue \$) (Revenue \$ | |
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| 4b | AND TECHNICAL ASSISTANCE THROU | GH SEVERAL PROGRAMS PRO | | | |
| | | enses \$ 89,510 |) including grants of \$ |) (Revenue \$ |) |
| 4a | CLEVELAND NEIGHBORHOOD PARTNE UNDERTAKE PHYSICAL DEVELOPMEN | r projects this includes re closely to clearly-def: | EN THE CAPACITY OF THE COMM TARGETING CERTAIN DISTRESSEI | 2,955,640) (Revenue \$ UNITY DEVELOPMENT CORPORATIONS D NEIGHBORHOODS FOR CONCENTRA DUCTION GOALS, AND PLACING MORE | TED ACTIVITY AND |
| 4 | Describe the exempt purpose a Section 501(c)(3) and (4) orga others, the total expenses, and | nızatıons and 4947(a)(1 |) trusts are required to repo | | |
| 3 | Did the organization cease conservices? | | nt changes in how it condu | | es 🔽 No |
| 2 | Did the organization undertake the prior Form 990 or 990-EZ? If "Yes," describe these new se | rvices on Schedule O | | | es 🔽 No |
| | THE MISSION OF NEIGHBORHOOD PROC PRIVATE INVESTMENT AND SUPPORT FO COMMUNITY DEVELOPMENT ORGANIZATION | GRESS, INC (NPI) IS TO REST OR COMMUNITY INITIATIVE O TIONS, THEIR PROJECTS AND | UR GOAL IS TO BE A CATALYST FO THEIR VISION FOR THE FUTURE | OR CHANGE TO THIS END, WE STRAT | HBORHOODS THROUGH EGICALLY INVEST IN |

| art IV | Checklist | of Red | nuired | Schedules |
|--------|-----------|--------|--------|-----------|
| | | | | |

| | | | Yes | No |
|-----|---|-----|-----|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? 🕏 | 2 | Yes | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | Νο |
| 4 | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 4 | Yes | |
| 5 | Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II | 7 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | No |
| 9 | Did the organization report an amount in Part X, line 21, 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 | | N o |
| 10 | Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | Νο |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable | 11 | Yes | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII . | 12 | Yes | |
| 13 | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the U S ? | 14a | | No |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I | 14b | | N o |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> | 15 | | N o |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III | 16 | | No |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I | 17 | - | N o |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | No |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | Νο |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | Νο |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | Yes | |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | No |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25 | 24a | | Νο |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| b | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I | 25b | | No |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | Νο |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | | No |

Part VI . . .

Part IV Checklist of Required Schedules (Continued)

| | | | res | NO |
|----|---|-----|-----|----|
| 8 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee | | | |
| а | Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV | 28a | Yes | |
| | | 20a | 162 | |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV | 28b | Yes | |
| c | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV . | 28c | Yes | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Yes | |
| 80 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | Νο |
| 1 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | Νo |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | Νο |
| 3 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | Yes | |
| 4 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | Yes | |
| 5 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35 | Yes | |
| 6 | 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | Yes | |
| 37 | Did the organization conduct more than 5 percent 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, | 37 | | Νo |
| | Part VI | | | |

| | Pa | rt V Statements Regarding Other IRS Filings and Tax Compliance | e | | | | |
|--|-----|--|----------|---------------------------|-----|-----|-----|
| b Enter the number of Forms W-2G included in line 1a. Enter-0-d not applicable b Enter the number of Forms W-2G included in line 1a. Enter-0-d not applicable c Dut the organization comply with facture with backure with backure with a provided to the composition of Forms W-2G included in line 1a. Enter-0-d not applicable 2a. Enter the number of employees reported on Form W-3, Transmitted of Wage and Tax Statements file for the calendary averainding with or within the year covered by this distribution. The state of the calendary averainding with or within the year covered by the file file in the calendary year, did the organization file all required federal employment tax returns? Note of the organization have unloaded business grows income of \$1.000 or more dumple war covered by this distribution. b If The size the dia Form 998-T for this year? If No.* provide an explanation on Schedule 0. c If the size the dia Form 998-T for this year? If No.* provide an explanation on Schedule 0. c If The size the area of the foreign country (south) as a bank account, accounts as excountry or accountry or accountry. Sea the organization is party to a prohibited tax sheller transaction at any time during the tax year? 5a. Was the organization is party to a prohibited tax sheller transaction at any time during the tax year? 5b. If The size of a cost by did the organization file Form 8088-T, Deschause by Tax-Enempt Entity Regarding Prohibited tax sheller transaction at any time during the tax year? 5b. If The size of a cost of the organization is like the ware not tax deductable? 6c. In the organization is elect any contributions that were not tax deductable? 6c. In the organization provide goods or services in exchange for any quite production of \$73.00 more? 6c. If the organization is elect any contributions where excited a sheller transaction? 6c. In the organization of the major accounts with the disease of the goods or services provided? 6c. In the organization of the provided goods or services in exchange fo | | | | | | Yes | No |
| b Enter the number of Forms W-26 included in line 1a. Enter-6- find applicable c. Due the organization comply with backup withholding rules for reportable payments to evanders and reportable gamming (gambling) winnings to prize winners? 20 Enter the number of employees reported on Form W-2, Transmittel of Wage and Tax Steaments flied for the calendar year ending with or within the year covered by this return. 20 In the organization the calendar year ending with or within the year covered by this calendar year ending with or within the year covered by this calendar year ending with organization file all required federal employment tax returns? 20 In the organization have unrelated business greas income of \$1,000 or more sumpt the year covered by this calendar year, and the organization have unrelated business greas income of \$1,000 or more sumpt the year covered by this calendar year, and the organization have an infanced on a signal are or other authority account? 30 In the organization and the foreign country set the instructions for exceptions and filing requirements for Form TD F 90-221, Report of Foreign Bank and Financed Accounts. 31 If Yes, 'enter the name of the foreign country set the instructions for exceptions and filing requirements for Form TD F 90-221, Report of Foreign Bank and Financed Accounts. 32 If Yes, 'to 5 a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 33 If Yes, 'to 5 a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 34 If Yes, 'to 5 a or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 35 Was the organization profit the organization that it was or is a party to a prohibited tax shelter transaction? 36 If Yes, 'to 5 a or 55, did the organization that were not tax deductible? 37 Organizations for the party of the departs of the party of th | 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal | | | | | |
| b Enter the number of Forms W-2G included in line 1s. Enter-0- find applicable c Did the organization comely with backery withholding values for reportable payments to vendors and reportable gaming (graphing) mining set to prise without 2. 2 Enter the number of employees reported in 7 min W-3, 7 main/rited of Wage and Tax Statements lite for the calendar year ending with or within the year covered by this zalue 20 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization file all required federal employment tax returns? 3 bit 4 in sets one is reported in 2a, did the organization sets one of the country over, in familiar tax of th | | of U.S. Information Returns. Enter -0- if not applicable | | | | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) within packup with hackup with hackup with hackup with hackup with hackup with his packup with hackup with his packup with hi | | | 1a | 19 | | | |
| to be the organization comply with backup withholding rules for reportable payments to vendors and reportable payments (primiting) with improvements of price without a payment of the payments of the payment | b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | 1b | 0 | | | |
| spamming (gambling) winnings to prize winners? 2 | _ | Did the organization comply with backup withholding rules for reportable payments t | | dors and reportable | | | |
| Statements filed for the calendar year ending with or within the year covered by this return. 20 b If at least one is reported in 2a, did the organization file all required federal employment tax returns? 21 32 33 b Dut the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 22 b If "Yes," has it filed a form 90-T for this year? If "Wo," provide an explanation in Schedule 0. 33 b If "Yes," has it filed a form 90-T for this year? If "Wo," provide an explanation in Schedule 0. 34 b If "Yes," has it filed a form 90-T for this year? If "Wo," provide an explanation in Schedule 0. 35 b If "Yes," a filed a form 90-T for this year? If "Wo," provide an explanation in Schedule 0. 36 b If "Yes," a filed a form 90-T for this year? If "Wo," provide an explanation in Schedule 0. 36 b At any time during the calendar year, did the organization have an intenset in, or a signature or other authority over, a financial Accounts. 37 b If "Yes," a filed a form 90-T for this year? If "Wo," provide an explanation of Form 90-F0-P211, Report of Foreign Bank and Financial Accounts. 38 b Was the organization is party to a prohibited tax shelter transaction? 39 b If we should be party notify the organization that it was or is a party to a prohibited tax shelter transaction? 39 b If "Yes," to 5 aor 55, did the organization file form 885-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 30 b If "Yes," did the organization include with very solicitation an express statement that such contributions organizes were not tax deductible? 30 b If "Yes," did the organization include with very solicitation and express statement that such contributions or grain makes an express statement that such contributions of state or makes? 30 b If "Yes," did the organization on both the donor of the value of the goods or services provided? 31 b If "Yes," did the organization of the donor of the value of the goods or services provided? 32 b If "Yes," did the or | · | | | | 1c | Yes | |
| b If at least one is reported in 2a, did the organization file all recuired federal emboyment tax returns? Notestif the sum of lines 1a and 2a is greater than 250, yax may be required to e-file this return. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 5b If "Yes," has it filed a form 990-T for this year? If "No," provide an explanation in Schedule 0. 3b If "Yes," has it filed a form 990-T for this year? If "No," provide an explanation in Schedule 0. 3b If "Yes," has it filed a form 990-T for this year? If "No," provide an explanation in Schedule 0. 3c Count? 5c If "Yes," the trib in name of the foreign country user, a faminical secount in a foreign country (such as a bank account, securities account, or other financial accounts in foreign country user, a faminical secount in a foreign country. 5c Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5c Was the organization of the organization that it was or is a party to a prohibited tax shelter transaction? 5c Was the organization of the organization that it was or is a party to a prohibited tax shelter transaction? 5c Was the organization of the organization that it was or is a party to a prohibited tax shelter transaction? 5c Was the organization of the organization that it was or is a party to a prohibited fax shelter transaction? 5c Was the organization of the organization that it was or is a party to a prohibited tax shelter transaction? 5c Was the organization of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Was the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Organizations the may receive deductible contributions under section 170(c). 5c Unit the organization provide goods or services in exchange for any guide production of \$75 or more? 5c Unit the org | 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | | | |
| b Is least tone is reported in 2a, did the organization file all recurred federal employment but returns? Note: If the sum of lines Is and 24 sis greater than 250, you may be required for -file this return. Did the organization have unrelated bus mess gross income of \$1,000 or more during the year covered by this exist. If the sum of lines Is and 24 sis greater than 250, you may be required for -file this return. But the organization have unrelated bus mess gross income of \$1,000 or more during the year covered by this exist. If the sum of lines Is a did not receive the sum of the foreign country such as a bank account, a current second. If Yes, a there the name of the foreign country see the instructions for exceptions and filing requirements for Form TD F 90-221, Report of Foreign Bank and Financial Accounts. Sa Was the organization a party to a prohibited tax shelter transaction? If Yes, to Sa or Sb, did the organization the Form 8886-T, Disclosure by Tan-Exempt Entity Regarding Prohibited Financial Accounts. Sc If Yes, to Sa or Sb, did the organization the Form 8886-T, Disclosure by Tan-Exempt Entity Regarding Prohibited Tax Shelter Transaction? Cit Yes, to Sa or Sb, did the organization that it was one is a party to a prohibited tax shelter transaction? Did the organization solicit any contributions that were not tax deductible? Cit Yes, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? If Yes, did the organization notify the donor of the value of the goods or services provided? Organization sale, exchange, or otherwise dispose of trangible personal property for which it was required to the Form 80.822. If the organization during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contra | | | 22 | 20 | | | |
| Note: If the sum of lines I a and 2 as a greater than 250, yes may be required to e-fire this return. 30 Did the organization have unrelated business goes income of \$1,000 or more during the year covered by this return? 31 If "Yes," has if field a Form 990-T for this year? If "No." provide an explanation in Schedule 0. 32 Jiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii | h | | | | | | |
| b If Yes, has it field a Form 990. T for this year? If Wo. *provide an explanation in Schedule O. 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)? 4b If Yes, "enter the name of the foreign country (such as a bank account, securities account, or other financial account)? 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c If Yes, "to Sa or Sb, did the organization file Form 886-T, Disclosure by Tax-Exempt Entity Reparding Prohibited Tax Shelter Transaction? 6c Did the organization solicit any contributions that were not tax deductible? 6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6 Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 9 For all contributions of qualified intellectual property, did the organization file Form 8893 is required? 9 Section \$01(c)(3) and other sponsoring organizations maintaining donor advised funds and section \$09(a)(3) and other sponsoring organization, or a fund maintained by a sponsoring urganization, have excess business sholdings at any time during the year. 9 Section \$01(c)(3) and other sponsoring organizations maintaining dono | | | | | 2b | Yes | |
| b If "Yes," has it field a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 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 forsign country (such as a bank account, securities account, or other financial affection in a forsign country (such as a bank account, securities account, or other financial affection in a forsign country (such as a bank account, securities account, or other financial affection in a forsign country (such as a bank account, securities account, or other financial affection in a forsign country (such as a bank account, securities account, or other financial affection in a forsign country (such as a bank account, securities account, or other financial affection in a forsign country (such as a bank account, securities account, or other financial account in a forsign country (such as a bank account, securities account, or other financial account in a forsign country (such as a bank account, securities account, or other financial account in a forsign country (such as a bank account, securities account, or other financial account, or other financial account, and account a forsign and account, securities account, or other financial account, or other financial account, and account account and account, securities account, or other financial account, and account account acc | 3a | | g the | year covered by this | _ | | |
| 4a A lary 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, secunties account, or other financial account in a foreign country with a bank account, secunties account, or other financial accounts. b If "yes," reset instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a No b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6b Did the organization solicit any contributions that were not tax deductible? 6c Did the organization solicit any contributions that were not tax deductible? 6c Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6 Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6 Dif "Yes," indicate the number of forms \$28.2 filed during the year. 7b If "Yes," indicate the number of forms \$2.82 filed during the year. 6 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7c No Post the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7c No Post the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7d No Post the organization of quilified intellectual property, did the organization file Form \$8.99 as required? 8 Section \$501(c)(3) and other sponsoring organizations maintaining donor advised funds and section \$50(a)(3) and other sponsoring organizations make a distribution to a donor, donor advised funds. 9 Section \$501(c)(3) and other sponsoring organizations maintaining donor advised funds. 9 Did the organizatio | _ | | • • | | | | N o |
| b if "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts?) b if "Yes," enter the name of the foreign country see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at your time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6d Did the organization solicit any contributions that were not tax deductible? 6d Did the organization solicit any contributions under section 170(c). 7d Organizations that may receive deductible contributions under section 170(c). 8 Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 7 Did the organization notify the donor of the value of the goods or services provided? 6 Did the organization in exchange for any quid pro quo contribution of \$75 or more? 7 Did the organization will be contribution to the value of the goods or services provided? 6 Did the organization during the year, receive any finds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, receive any finds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization during the year, did the organization file a form 1098-C as required? 8 Section \$51(c)(2) and other sponsoring organizations maintaining doner advised funds. Did the organization make any taxable distributions under advised funds. Did the organization make any taxable distributions and and any seed funds. Did the organization make any taxable distri | | | | | 3Ь | | |
| b If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Rinancial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886-T, Disclosure by Two-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c If "Yes," do the organization solicit any contributions that were not tax deductible? 5c Did the organization solicit any contributions that were not tax deductible? 6c Did the organization solicit any contributions that were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization provide goods or services in exchange for any quid pro-quo contribution of \$75 or more? 7 Organizations that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Did the organization of the property of the goods or services provided? 8 If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided? 10 If "Yes," did the organization notify the donor of the value of the goods or services provided? 11 Organization quantity of the supporting the year of the goods or services provided? 12 Organization make a number of Forms 8282 filed during the year of the goods or services provided? 13 Organization during the year, raceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 14 No organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 15 Organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 16 Organization during the year, pay premiums, di | 4a | over, a financial account in a foreign country (such as a bank account, securities ac | | | 4a | | No |
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| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to 5a or 5b, did the organization file form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Did the organization solicit any contributions that were not tax deductible? 6a No b If "Yes," did the organization include with every solicitation an express statement that such contributions or gins were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? b If "Yes," did the organization in only the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 In No 9 For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 10 If the organization make any taxable distributions under section 4966? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 10 If the organization make any taxable distributions under section 4966? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 10 In the organization make any taxable distributions under section 4966? 9 Section 501(c)(12) organizations Enter 10 In the organization make any taxable distributions under sect | 5a | Was the organization a party to a prohibited tax shelter transaction at any time during | ng the | tax year? | 5a | | Νο |
| c If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | ь | | | · | 5h | | Νο |
| Tax Shelter Transaction? 6a Did the organization solicit any contributions that were not tax deductible? 6b If "ves," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that any receive deductible contributions under section 170(c). 8 Did the organization provide goods or services in exchange for any guid pro quo contribution of \$75 or more? 8 Dif "ves," did the organization notify the donor of the value of the goods or services provided? 9 Dif the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 9 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 17c No 9 For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 18 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 10 Did the organization make any taxable distributions under section 4966? 9a Did the organization make any taxable distributions under section 4966? 9b Did the organization make any taxable distributions under section 4966? 9c Did the organization make any taxable distribution to a donor, donor advisor, or related person? 9b Did the organization make any taxable distributions under section 4966? 9c Did the organization make any taxable distributions unde | _ | If "Yes " to 5a or 5h, did the organization file Form 8886-T. Disclosure by Tax-Exemp | t Entil | ty Regarding Prohibited | | | |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any guid pro quo contribution of \$75 or more? 5 Dif "Yes," did the organization notify the donor of the value of the goods or services provided? 6 Dif "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Dif the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, receive any funds, directly or indirectly, on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization of qualified intellectual property, did the organization file a Form 1098-C as required? 7 Did the organizations of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7 Did the organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organization make any time during the year? 9 Section 501(c)(7) organizations. Enter 1 Initiation fees and capital contributions included on Part VIII, line 12 10a 10b 10b 10b 10b 10b 10b 10b 10b 10b | _ | | • | · · · | 5c | | |
| were not tax deductible? | 6a | Did the organization solicit any contributions that were not tax deductible? | | | 6a | | Νο |
| a Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? b If Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$2.82? d If "Yes," indicate the number of Forms \$2.82 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization of qualified intellectual property, did the organization file Form 8.999 as required? f Por all contributions of qualified intellectual property, did the organization file a Form 10.98-C as required? f Por contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 10.98-C as required? Section \$01(c)(3) and other sponsoring organizations maintaining donor advised funds and section \$509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4.966? 9a Did the organization make any taxable distributions under section 4.966? 9a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make a distribution to a donor, donor advised funds. a Did the organization make and capital contributions included on | b | | nat su | ch contributions or gifts | 6b | | |
| more? | 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | а | | trıbut | ion of \$75 or | 7a | | No |
| file Form 8282? | b | If "Yes," did the organization notify the donor of the value of the goods or services \boldsymbol{p} | rovide | :d? | 7b | | |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | c | | • | | _ | | |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | | | /c | | N O |
| benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 76 No g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 79 Proposition of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 70 Propositions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 70 Propositions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 71 Propositions organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a Propositions or section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 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) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b 13c 14c 15c 15c 16c 17c 17c 17d 17d 17d 17d 17d 17 | a | if Yes, indicate the number of Forms 8282 filed during the year | /a | | | | |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | e | | prem | niums on a personal | 7e | | Nο |
| p For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | f | | onalb | enefit contract? | | | |
| h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | | | | | | | |
| section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? | h | | | | - 9 | | |
| supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | | | | 7h | | |
| year? | 8 | supporting organizations. Did the supporting organization, or a fund maintained by a s | | | | | |
| b Did the organization make any taxable distributions under section 4966? | | year? | | | 0 | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | 9 | Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds. | | | | | |
| Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders | а | Did the organization make any taxable distributions under section 4966? | • | | 9a | | |
| 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 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders | Ь | Did the organization make a distribution to a donor, donor advisor, or related person | ?. | | 9b | | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders | 10 | Section 501(c)(7) organizations. Enter | 1 | 1 | | | |
| facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders | | | | | | | |
| a Gross income from members or shareholders | Ь | | 10b | | | | |
| a Gross income from members or shareholders | 11 | Section 501(c)(12) organizations Enter | | | | | |
| against amounts due or received from them) | а | Gross income from members or shareholders | 11a | | | | |
| b If "Yes," enter the amount of tax-exempt interest received or accrued during the | b | · · · · · · · · · · · · · · · · · · · | 11b | | | | |
| 126 | 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in | ı lıeu d | of Form 1041? | 12a | | |
| | b | | 12b | | | | |

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

| <u>Section</u> | <u>A.</u> | Governing | Body | and | Management | |
|----------------|-----------|-----------|------|-----|------------|--|
| | | | | | | |

| | | | | _ | | Yes | No |
|----|---|-------|-----------------|------------|----|-----|----|
| | For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, processes, or changes in Schedule O. See instructions. | desc. | ribe the circui | mstances, | | | |
| 1a | Enter the number of voting members of the governing body | 1a | | 18 | | | |
| Ь | Enter the number of voting members that are independent | 1b | | 18 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a busi other officer, director, trustee, or key employee? | | • | with any | 2 | Yes | |
| 3 | Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management com- | | | | 3 | | Νο |
| 4 | Did the organization make any significant changes to its organizational documents sifiled? $\ \ .$ | nce t | he prior Forn | 1 990 was | 4 | | Νο |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | | | | | | Νo |
| 6 | Does the organization have members or stockholders? | | | | | | |
| 7a | Does the organization have members, stockholders, or other persons who may elect of governing body? | | | ers of the | 7a | Yes | |
| Ь | Are any decisions of the governing body subject to approval by members, stockholde | rs, o | r other perso | ns? | 7b | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written actio year by the following | ns ur | ndertaken du | ring the | | | |
| а | the governing body? | | | | 8a | Yes | |
| Ь | each committee with authority to act on behalf of the governing body? | | | | 8b | Yes | |
| 9a | Does the organization have local chapters, branches, or affiliates? | | | | 9a | | Νο |
| b | If "Yes," does the organization have written policies and procedures governing the aca affiliates, and branches to ensure their operations are consistent with those of the organization. | | | | 9b | | |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it we must describe in Schedule O the process, if any, the organization uses to review the I | | _ | | 10 | | Νο |
| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A the organization's mailing address? If "Yes," provide the names and addresses in Sch | | | | 11 | | Νο |
| | | | | | | | |

Section B. Policies

| | | Yes | No |
|--|--|---|--|
| Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot . | 12a | Yes | |
| Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | 12c | Yes | |
| Does the organization have a written whistleblower policy? | 13 | Yes | |
| Does the organization have a written document retention and destruction policy? | 14 | Yes | |
| Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision | | | |
| The organization's CEO, Executive Director, or top management official? | 15a | Yes | |
| Other officers or key employees of the organization? | 15b | Yes | |
| Describe the process in Schedule O | | | |
| 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 | Yes | |
| If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | Yes | |
| | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | Does the organization have a written conflict of interest policy? If "No", go to line 13. Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? |

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed OH
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

own website another's website upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

J Brian Gehman

1956 WEST 25TH STREETSUITE 200

CLEVELAND, OH 44113

(216) 830-2770

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

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

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

| The check this box in the organization and i | · | Posit | (C |) chec | :k al | | | | (E) | (F) |
|--|--|-----------------------------------|-----------------------|-----------|--------------|---|---|--|--|-----|
| (A) Name and Title | (B) Average hours per week | Individual Trustee or Chrector | Institutional Trustee | Officei | Key employee | (D) Reportable compensation from the organization (W- 2/1099MISC) (E) Reportable compensation from related organizations (W- 2/1099- MISC) | | Reportable compensation from related organizations (W- 2/1099- | Estimated amount of other compensation from the organization and related organizations | |
| | | | | | | | | | | |
| | | | | | | | - | | | |
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Part VII Continued

| | | | tion that a | | | all | | | (F) | (F) |
|--|---|-----------------------------------|-----------------------|-----|--------------|------------------------------|----------------|---|--|--|
| (A) Name and Title | (B) A verage hours per week | Individual Trustee or Director | Institutional Trustee | | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations |
| | | | <u> </u> | | | | | | | |
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| | | | | | _ | | Ш | | | |
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| | | | | | | | | | | |
| | | | | | | | $\vdash\vdash$ | | | |
| 1b Total | | | | | | | | 431,468 | B C | 70,396 |
| 2 Total number of individuals (including | those in 1 | a) who r | ecei | ved | mo | re thar | n \$1 | 00,000 ın reportabl | e | 1 |

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►3

| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 | | No |
|---|---|---|-----|----|
| 4 | For any individual listed online 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 | Yes | |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person | 5 | | Νο |

| Section | В. | Inde | pendent | Contractors |
|---------|----|------|---------|--------------------|
|---------|----|------|---------|--------------------|

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|-----------------------------|----------------------------|
| AETNA HEALTH INC 151 FARMINGTON AVENUE HARTFORD, CT 06156 | MEDICAL INSURANCE | 100,980 |
| | | |
| | | |
| | | |
| | | |
| 2 Total number of independent contractors (including those in 1) who received more than \$ | 100,000 in compensation | _ |

Yes No

Part Statement of Revenue VIII

| | | | | | (A) Total Revenue | (B) Related or Exempt Function Revenue | (C) Unrelated Business Revenue | (D) Revenue Excluded from Tax under IRC 512, 513, or 514 |
|--|--------|--------------------------------------|---|------------------------------|-----------------------------|--|---|--|
| 22 | 1a | Federated camp | aigns 1a | | | | | 314 |
| 通道 | ь | Membership due | es 1b | | | | | |
| ge E | c | Fundraising eve | nts 1c | | | | | |
| £ E | d | Related organiz | ations 1d | | | | | |
| %,E | e | Government grants | (contributions) 1e | | | | | |
| ≘ਲ | f | All other contributio | ns, gifts, grants, and 1f | 3,893,069 | | | | |
| 돌 | _ | similar amounts no | | | | | | |
| | g | | outions included in | | | | | |
| Contributions, gifts, grants and other similar amounts | h | | s 1a-1f) | 🕨 | 3,893,069 | | | |
| | | | | Business Code | | | | |
| Ĭ | 2a | | | | | | | |
| 93. 34. | ь | | | | | | | |
| 90 | С | | | | | | | |
| ž ž | d | | | | | | | |
| ð ⊊ | e | | | | | | | |
| Program Serwce Revenue | f | All other progra | m service revenue | | | | | |
| <u>*</u> | g | Total. Add lines | 2a-2f | \$ | | | | |
| | 3 | Investment inco | ome (including dividend | ds, interest | | | | |
| | | | nounts) | | 80,822 | | | 80,822 |
| | 4 | | ment of tax-exempt bond p | | | | | |
| | 5 | Royalties | () | | | | | |
| | 6a | Gross Rents | (ı) Real 177,623 | (II) Personal | | | | |
| | b | Less rental | | | | | | |
| | | expenses Rental income | 177,623 | | | | | |
| | C | or (loss) | | | 477.622 | 477 622 | | |
| | d | Net rental incor | ne or (loss) | | 177,623 | 177,623 | | |
| | 7a | Gross amount | (ı) Securities | (II) O ther 594,379 | | | | |
| | " | from sales of assets other | | , | | | | |
| | | than inventory | | F40.770 | | | | |
| | b | Less cost or other basis and | | 548,770 | | | | |
| | l c | sales expenses Gain or (loss) | | 45,609 | | | | |
| | d | Net gain or (los: | s) | | 45,609 | 45,609 | | |
| Other Revenue | 8a | See Part IV, line Attach Schedule | uding reported on line 1c) | | | | | |
| Œ | ь | | penses b | | | | | |
| the | С | | loss) from fundraising e | events 🕨 | | | | |
| • | 9a | See part IV, line | om gaming activities e 19 ile G if total exceeds a | | | | | |
| | b c | | penses b loss) from gaming activ | /ities | | | | |
| | | Gross sales of i | nventory, less | | | | | |
| | ь | Less cost of go | | entory • | | | | |
| | | Miscellaneous | | Business Code | | | | |
| | 11a | VILLAGE CAPI | | 531,390 | 331,758 | | | 331,758 |
| | ь | SUBSIDIARY R | | 531,390 | -80,576 | -80,576 | | |
| | С | | | | | | | |
| | d | All other revenu | ie | | | | | |
| | e | Total. Add lines | ı | | | | | |
| | 12 | Total Revenue. | Add lines 1h, 2g, 3, 4, e | \$ 251,182 5, 6d, 7d, 8c, | 4,448,305 | 142,656 | 0 | 412,580 |

Part IX Statement of Functional Expenses

| A | Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). | | | | | | | | | |
|------|--|-----------------------|--|--|---------------------------------------|--|--|--|--|--|
| Do ı | 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 governments and organizations in the U.S. See Part IV, line 21 | 4,996,265 | 4,996,265 | | | | | | | |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | | | | | | |
| 3 | Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | | | | | | |
| 4 | Benefits paid to or for members | | | | | | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 843,614 | 477,877 | 331,706 | 34,031 | | | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | | | | | | | | | |
| 7 | Other salaries and wages | | | | | | | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | | | | | | |
| 9 | Other employee benefits | | | | | | | | | |
| 10 | Payroll taxes | | | | | | | | | |
| 11 | Fees for services (non-employees) | | | | | | | | | |
| а | Management | | | | | | | | | |
| b | Legal | | | | | | | | | |
| c | Accounting | | | | | | | | | |
| d | Lobbying | | | | | | | | | |
| e | Professional fundraising See Part IV, line 17 | | | | | | | | | |
| f | Investment management fees | | | | | | | | | |
| g | Other | | | | | | | | | |
| 12 | Advertising and promotion | 30,145 | 17,076 | 11,853 | 1,216 | | | | | |
| 13 | Office expenses | 32,299 | 19,499 | 11,609 | 1,191 | | | | | |
| 14 | Information technology | | | | | | | | | |
| 15 | Royalties | | | | | | | | | |
| 16 | Occupancy | 159,068 | 132,682 | 23,931 | 2,455 | | | | | |
| 17 | Travel | 19,618 | 18,623 | 902 | 93 | | | | | |
| 18 | Payments of travel or entertainment expenses for any Federal, state or local public officials | | | | | | | | | |
| 19 | Conferences, conventions and meetings | | | | | | | | | |
| 20 | Interest | 623,098 | 613,126 | 9,972 | | | | | | |
| 21 | Payments to affiliates | | | | | | | | | |
| 22 | Depreciation, depletion, and amortization | 6,673 | 3,780 | 2,624 | 269 | | | | | |
| 23 | Insurance | 5,482 | 3,105 | 2,156 | 221 | | | | | |
| 24 | Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) | | | | | | | | | |
| а | TECHNICAL SERVICES PROG | 187,865 | 187,865 | | | | | | | |
| b | PROFESSIONAL FEES | 115,728 | 89,180 | 24,078 | 2,470 | | | | | |
| c | VACANT PROPERTY REFORM | 109,762 | 109,762 | | | | | | | |
| d | ORGANIZATIONAL DEVELOPM | 89,510 | 89,510 | | | | | | | |
| е | DUES AND SUBSCRIPTIONS | 14,376 | 10,841 | 3,206 | 329 | | | | | |
| f | All other expenses | 18,088 | 15,004 | 2,797 | 287 | | | | | |
| 25 | Total functional expenses. Add lines 1 through 24f | 7,251,591 | 6,784,195 | 424,834 | 42,562 | | | | | |
| 26 | Joint Costs. Check fiffollowing SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | 5.6 | | | | | | |

| Part X | Balance | Shoot |
|--------|---------|-------|
| | Balance | Sneer |

| | | | | | (A) Beginning of year | | (B | |
|----------------|-------------|--|----------------|-----------|--------------------------|----------|---------|-----------|
| | 1 | Cash—non-interest-bearing | | | 2,969,795 | 1 | End of | 3,695,083 |
| | 2 | Savings and temporary cash investments | | | 212,828 | 2 | | 226,611 |
| | 3 | Pledges and grants receivable, net | | | 3.961.749 | | | 2,038,310 |
| | 4 | Accounts receivable, net | | 855,724 | 4 | | 961.791 | |
| | 5 | Receivables from current and former officers, directors, trustees | | 000,724 | -+ | | 001,701 | |
| | | other related parties Complete Part II of Schedule L | | | 5 | | | |
| | 6 | Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of | | | | 6 | | |
| | 7 | Notes and loans receivable, net | | • | 14,235,000 | 7 | 1 | 3,535,000 |
| | 8 | Inventories for sale or use | | • | | 8 | | |
| ÷ | 9 | Prepaid expenses and deferred charges | | | 27,033 | 9 | | 10,654 |
| Assets | 10a | Land, buildings, and equipment cost basis | _{10a} | 4,950,798 | | | | |
| ** | ь | Less accumulated depreciation <i>Complete Part VI of</i> Schedule D | 10b | 1,504,554 | | 10c | | 3,446,244 |
| | 11 | Investments—publicly traded securities | | | | 11 | | |
| | 12 | Investments—other securities See Part IV, line 11 Complete Poschedule D | | | 2,202,957 | 12 | | 2,020,865 |
| | 13 | Investments—program-related See Part IV, line 11 Complete F | Part VIII | | | | | |
| | 14 | of Schedule D . Intangible assets | | | | 13 14 | | |
| | 15 | Other assets See Part IV, line 11 Complete Part IX of Schedule | | | 1,574,351 | 15 | | 287,655 |
| | 16 | D | | | 30,093,753 | 16 | | 6,222,213 |
| | 17 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 679,478 | 17 | | 714,923 |
| | 18 | Accounts payable and accrued expenses . Grants payable | | | 073,470 | 18 | | 714,323 |
| | 19 | Deferred revenue | | | | 19 | | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | | |
| S. | 21 | · | | | | 21 | | |
| Liabilities | 22 | Escrow account liability Complete Part IV of Schedule D Payable to current and former officers, directors, trustees, key | | | | 21 | | |
| jak. | | employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> | | | | 22 | | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | 16,518,427 | 23 | 1 | 5,382,100 |
| | 24 | Unsecured notes and loans payable | • • | | 250,000 | 24 | | 282,628 |
| | 25 | Other liabilities Complete Part X of Schedule D | | | 0 | 25 | | 6,761 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 17,447,905 | 26 | 1 | 6,386,412 |
| | | Organizations that follow SFAS 117, check here ▶ ✓ and comp | lete lines 27 | | ,,350 | | | , , |
| У ФО | | through 29, and lines 33 and 34. | | | | | | |
| Balance | 27 | Unrestricted net assets | | | 5,395,849 | 27 | | 4,964,810 |
| <u>න</u> | 28 | Temporarily restricted net assets | | | 7,249,999 | 28 | | 4,870,991 |
| 귤 | 29 | Permanently restricted net assets | | | | 29 | | |
| Fund | | Organizations that do not follow SFAS 117, check here ► and | d complete | | | | | |
| ō | 30 | lines 30 through 34. | | | | 30 | | |
| ets | | Capital stock or trust principal, or current funds | | | | - | | |
| Assets or | 31 32 | Paid-in or capital surplus, or land, building or equipment fund | | • | | 31 | | |
| | | Retained earnings, endowment, accumulated income, or other fu Total net assets or fund balances | iiius | | 12,645,848 | 33 | | 9,835,801 |
| Net | 33 34 | Total liabilities and net assets/fund balances | | | 30,093,753 | 34 | | 6,222,213 |
| | J- - | Total navinties and net assets/juild palatices | | | 50,095,755 | J4 | | |
| Pa | rt XI | Financial Statements and Reporting | | | | | | |
| | | _ | | | | | Yes | No |

| Dart VI | Financial Statements and Reporting |
|-------------|------------------------------------|
| P. 1 4 D. 1 | Financial Statements and Reporting |

| 1 | Accounting method used to prepare the Form 990 | | | |
|----|---|----|-----|----|
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | Νο |
| ь | Were the organization's financial statements audited by an independent accountant? | 2b | Yes | |
| С | If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | Yes | |
| 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 | | No |
| ь | If "Yes," did the organization undergo the required audit or audits? | 3b | | |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134028200

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

| NEIGHE | окно | OD PROGRESS | INC | | | | | 34. | -161105 | 5 | | |
|----------|----------|--------------|---|---|------------------|-------------------|-------------|-------------|--------------|----------------------|------------|---------|
| Par | tΙ | Reason | for Public C | harity Status (to be co | mpleted | by all or | ganizatio | | | | | |
| | | | | ation because it is (Please | | | | | | , | | |
| 1 | Γ | A church, c | onvention of ch | urches, or association of ch | urches de | scribed in | Section 1 | L70(b)(1)(| (A)(i). | | | |
| 2 | Γ | A school de | escribed in Sect | ion 170(b)(1)(A)(ii). (Attac | ch Schedu | ıle E) | | | | | | |
| 3 | \sqcap | A hospital | or a cooperative | e hospital service organizati | on describ | bed in Sec | tion 170(E | o)(1)(A)(i | ii). (Attac | h Schedul | le H) | |
| 4 | Γ | A medical i | research organı | zation operated in conjuncti | on with a l | hospital de | escribed ii | n Section : | 170(b)(1) | (A)(iii). E | nter the | |
| | | hospital's r | name, city, and | state | | | | | | | | |
| 5 | Γ | An organiza | atıon operated f | or the benefit of a college or | universit | y owned o | r operated | by a gove | ernmental | unıt desc | rıbed ın | |
| | | Section 170 | Section 170(b)(1)(A)(iv). (Complete Part II) | | | | | | | | | |
| 6 | \sqcap | A federal, s | tate, or local go | overnment or governmental | unıt descr | ıbed ın Se | ct ion 170(| (b)(1)(A) | (v). | | | |
| 7 | 굣 | An organiza | ation that norma | ally receives a substantial p | art of its s | support fro | m a govei | rnmental u | ınıt or fron | n the gene | ral public | |
| | | described i | n Section 170(b |))(1)(A)(vi) (Complete Par | tII) | | | | | | | |
| 8 | Γ | A communi | ty trust describ | ed in Section 170(b)(1)(A) | (vi) (Com | plete Par | tII) | | | | | |
| 9 | Γ | An organiza | ation that norma | ally receives (1) more than | 331/3% o | fits supp | ort from co | ontribution | ıs, membe | rship fees | , and gro | 5 S |
| | | receipts fro | m activities rel | ated to its exempt functions | —s ubject | to certair | n exceptio | ns, and (2 |) no more | than 331/ | '3% of | |
| | | ıts support | from gross inve | estment income and unrelate | ed busines | ss taxable | ıncome (l | ess sectio | on 511 tax | k) from bu | sınesses | |
| | _ | | - | on after June 30, 1975 See | | | • | | • | | | |
| 10 | <u></u> | = | _ | and operated exclusively to | - | | • | - | | | - | |
| 11 | ı | - | - | and operated exclusively fo | | , , | | | , | • | | |
| | | | | orted organizations describe type of supporting organiza | | | | | | Section 5 | 09(a)(3). | Спеск |
| | | _ | ype I b | | | | nally Integ | _ | ď | Гтуре | III - Oth | ier |
| e | Γ | By checkin | g this box, I ce | rtıfy that the organizatıon is | not contro | olled direc | tly or ındı | rectly by o | ne or mor | e dısqualı | fied perso | ns |
| | | | | agers and other than one or | more publ | icly suppo | orted orga | nızatıons (| described | ın sectior | 1509(a)(i | L) or |
| f | | section 50 | | d a written determination fro | m the IDS | that it ic | a Type I | Type II o | r Type III | supportir | na orazniz | ation |
| • | | check this | | d a written determination no | in the 1Kc | , that it is | a Type I, | Type II O | i Type III | supportin | ig organiz | |
| g | | _ | | as the organization accepted | d any gift | or contrib | utıon from | any of the | ! | | | |
| | | following pe | | | | | | | | | - | |
| | | | • | r indirectly controls, either a | | _ | in persons | describe | a in (ii) | 11 | Yes | No |
| | | | · - | ng body of the the supported | - | tion | | | | 11g | | |
| | | | | erson described in (i) above | | haua? | | | | 11g(| | |
| L | | | | ty of a person described in (nation about the organizatio | | | cupports | | | 11g(| ···/ | |
| h | | riovide tile | e lonowing intori | nation about the organizatio | iis the org | janization | supports | | | | | |
| | (i) Na | ame of | (ii) EIN | (iii) Type of organization | (iv) ī | s the | (v) Did v | ou notify | (vi) I | s the | (vii) Am | ount of |
| | • • | orted | (, == | (described on lines 1-9 | | ation in | | nızatıon | | ation in | supp | |
| | | ıızatıon | | above or IRC section | col (i) | | |) of your | | rganızed | | |
| | | | | (See Instructions)) | your go docur | _ | supp | ort? | ın the | US? | | |
| | | | | | Yes | No | Yes | No | Yes | No | 1 | |
| | | | | | 162 | 140 | 162 | 140 | 162 | 140 | | |
| | | | | | | | | | | | + | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

Total

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

| | (Complete only if you chec | keu uie box o | II IIIIe 5, 7, or | o oi Part I.) | | | | |
|---------|--|--|---|--------------------------------------|---|---------|--------------|-----------------|
| | ublic Support | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , , | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | endar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) | 2008 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | 4,355,549 | 7,968,155 | 11,123,728 | 2,544,952 | | 3,893,069 | 29,885,453 |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on | | | | | | | |
| _ | its behalf The value of services or facilities | | | | | | | |
| 3 | furnished by a governmental unit to the organization without charge | | | | | | | |
| 4 | Total. Add line 1-3 | 4,355,549 | 7,968,155 | 11,123,728 | 2,544,952 | | 3,893,069 | 29,885,453 |
| 5 | The portion of total contribution by each | | | | | | | |
| | person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column | | | | | | | 8,459,392 |
| 6 | (f) Public Support subtract line 5 from line 4 | | | | | | | 21,426,061 |
| т. | otal Support | | | | | | | |
| | endar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (a) | 2008 | (f) Total |
| 7 | Amounts from line 4 | 4,355,549 | 361,004 | 11,123,728 | 2,544,952 | (0) | 3,893,069 | 29,885,453 |
| 8 | Gross income from interest, dividends, | .,===,== | , | | _,, | | -,, | |
| 0 | payments received on securities loans, rents, royalties and income from similar sources | 351,769 | 361,004 | 384,251 | 729,335 | 590,203 | | 2,416,562 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | 839,794 | 45,582 | | -80,576 | 804,800 |
| 11 | Total Support (Add lines 7 through 10) | | | | | | | 33,106,815 |
| 12 | Gross receipts from related activities, etc | (See instruction | ıs) | | | 12 | | 225,291 |
| 13 C | First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc | | rst, second, thire | d, fourth, or fifth | tax year as a 5 | 01(c)(| | ▶ □ |
| 14 | Public Support Percentage for 2008 (line 6 | column (f) dıvıd | ed by line 11 co | lumn (f)) | | 14 | | 64.720 % |
| 15 | Public Support Percentage for 2007 Sched | ule A , Part IV - A | , line 26f | | | 15 | | 66.480 % |
| | 33 1/3% Test - 2008. If the organization did and stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization di | a publicly supp | orted organizati | on | | | | |
| 17a | box and stop here. The organization qualifie 10% Facts and Circumstances Test - 2008. more, and if the organization meets the "fac | If the organizations to the community of | on did not check ances" test, che | a box on line 1: eck this box and | stop here. Exp | laın ın | Part IV ho | w the |
| b | organization meets the "facts and circumst 10% Facts and Circumstances Test - 2007. more, and if the organization meets the "fac | If the organization | on did not check | a box on line 1 | 3, 16a, 16b, or | 17a ar | nd line 15 i | |
| 18 | the organization meets the "facts and circu Private Foundation. If the organization did | | | | | | | ►□ |

| Pa | Support Schedule for On (Complete only if you ched | | | | (2) | | |
|------|--|--------------------|-------------------|---------------------|------------------|-----------------|------------|
| | ction A. Public Support | | _ | , | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received (Do not | | | | | | |
| 2 | include any "unusual grants ") Gross receipts from admissions, | | | | | | |
| 2 | 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 1-5 | | | | | | |
| 7a | A mounts included on lines 1, 2, and 3 | | | | | | |
| | received from disqualified persons Amounts included on lines 2 and 3 | | | | | | |
| D | received from other than disqualified | | | | | | |
| | persons that exceed the greater of 1% of | | | | | | |
| | the total of lines 9, 10c, 11, and 12 for | | | | | | |
| | the year or \$5,000 | | | | | | |
| С | Total of lines 7a and 7b | | | | | | |
| 8 | Public Support (Substract line 7c from | | | | | | |
| _ | line 6) | | | | | | |
| То | tal Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 9 | A mounts 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 30 June, 1975 | | + | | | | |
| С | 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 IV) | | | | | | |
| 13 | Total Support (Add lines 9, 10c, 11 and | | | | | | |
| | 12) | | | | | | |
| 14 | First Five Years If the Form 990 is for the | organızatıon's fı | rst, second, thir | d, fourth, or fifth | ntax year as a 5 | 01(c)(3) organı | zation, |
| | check this box and stop here | | | | | | ▶ □ |
| | manufaction of Dublic Compact Days | | | | | | |
| 15 | mputation of Public Support Perc Public Support Percentage for 2008 (line | | dod by line 12 o | olumn (fl) | | T 4= T | |
| | | | • | .orumin (1)) | | 15 | |
| 16 | Public Support Percentage for 2007 Sche | dule A , Part IV - | A, line 27g | | | 16 | |
| | | D | | | | | |
| Co | mputation of Investment Income Investment Income Percentage for 2008 (| | | ne 13 column /f | <u> </u> | 17 | |
| | - | | | - | " | 17 | |
| ΤQ | Investment Income Percentage from 2007 | ocnequie A , Pa | TLIV-A, IINE 2/ | H | | 18 | |

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

| Part IV | Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions) | | | | | | | | |
|---------|---|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
| | Facts and Circumstances Test | | | | | | | | |
| | | | | | | | | | |

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 34-1611055

Name: NEIGHBORHOOD PROGRESS INC

Form 990, Part VII - Section Aaa

| | | (C) Position (check all that apply) | | | | | | | (E) | (F) | |
|--|--|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|--|--|
| (A) Name and Title | (B) Average hours per week | Individual Trustee or Director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations | |
| ANTHONY BRANCATELLI , TRUSTEE | 1 00 | X | | | | | | 0 | 0 | 0 | |
| LEE CHILCOTE , TRUSTEE | 1 00 | X | | | | | | 0 | 0 | 0 | |
| THOMAS J COYNE , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| PEGGY ZONE FISHER , SECRETARY | 1 00 | X | | | | | | 0 | 0 | 0 | |
| DAVID GOLDBERG , CO-CHAIRMAN | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| DAVID JANUS , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| ERIC JOHNSON , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| JOHN A SHIELDS , TREASURER | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| MARK NASCA , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| JOSEPH D ROMAN , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| DARYL RUSH ESQ , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| MICHAEL SCHOOP PHD , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| ROBERT KAYE , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| BETH E MOONEY , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| COLLEEN GILSON , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| MICHAEL TAYLOR , VICE CHAIRMAN | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| MARK MCDERMOTT , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| CHARLES JOHN KOCH , HONORARY MEMBER | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| TIMOTHY Y TRAMBLE , TRUSTEE | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| ERIC HODDERSEN , PRESIDENT | 50 00 | | | Χ | | Х | | 191,701 | 0 | 30,325 | |
| BRIAN GEHMAN , CFO | 40 00 | | | Х | | Х | | 103,844 | 0 | 29,251 | |
| LINDA WARREN , SENIOR VP | 50 00 | | | Х | | Х | | 135,923 | 0 | 10,820 | |

Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

NEIGHBORHOOD PROGRESS, INC. (NPI) SUPPORTED THE WORK OF 14 COMMUNITY DEVELOPMENT CORPORATIONS THROUGH THE STRATEGIC INVESTMENT INITIATIVE AND THE CLEVELAND NEIGHBORHOOD PARNERSHIP PROGRAM. THEY AND THEIR PARTNERS REHABILITATED 269 HOMES, BUILT 101 UNITS OF NEW AFFORDABLE HOUSING, AND DEVELOPED 20,000+ SF OF RETAIL AND COMMERCIAL SPACE. COMPREHENSIVE PLANNING AND PARTNERSHIP WITH INSTITUTIONS PRODUCED 5 NEW PARKS, 2 NEW SCHOOLS, A LIBRARY, AND NEW SOCIAL SERVICES CENTER. NPI WORKED TO REMOVE BARRIERS TO NEIGHBORHOOD RECOVERY THROUGH RESEARCH, POLICY AND THE DEVELOPMENT OF INNOVATIVE PROGRAMMING THAT ADDRESSES CITYWIDE FORECLOSURES AND VACANCY. NPI PARTNERED WITH THE CLEVELAND HOUSING NETWORK, THE CITY OF CLEVELAND AND OTHERS TO TARGET STABILIZATION WORK IN 6 AREAS OF THE CITY WHICH INCLUDED DEMO, FORECLOSURE PREVENTION, REHAB VACANT REO PROPERTIES AND GREENING PROJECTS ON VACANT LAND.

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

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

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

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

- ◆ 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

| | e organization answered "Ye ection 501(c)(4), (5), or (6) organi | s," to Form 990, Part IV, Line 5 (F zations_complete Part III | Proxy Tax) | | |
|-----|---|---|---|---|---|
| N a | nme of the organization IGHBORHOOD PROGRESS INC | | tification number | | |
| Par | | y all organizations exempted the instructions for Schedule | | 34-1611055 n 501(c) and section | 527 |
| 1 | Provide a description of the or | ganızatıon's dırect and ındırect polı | tıcal campaıgn act | ivities in Part IV | |
| 2 | Political expenditures | | | | \$ |
| 3 | Volunteer hours | | | | |
| Pai | To be completed b for Schedule C for de | oy all organizations exemptetails.) | t under section | 501(c)(3). (See the | instructions |
| 1 | Enter the amount of any excise | e tax incurred by the organization u | nder section 4955 | | \$ |
| 2 | Enter the amount of any excise | e tax incurred by organization mana | gers under section | n 4955 | \$ |
| 3 | If the organization incurred in a | a section 4955 tax, did it file Form | 4720 for this year | ? | ┌ Yes ┌ No |
| 4a | Was a correction made? | | | | ┌ Yes ┌ No |
| ь | If "Yes," describe in Part IV | | | | |
| Par | | y all organizations exempt for Schedule C for details.) | t under section | 1 501(c), except sect | ion 501(c)(3). |
| 1 | Enter the amount directly expe | ended by the filing organization for s | section 527 exemp | ot function activities | \$ |
| 2 | Enter the amount of the filing o 527 exempt funtion activities | rganızatıon's ınternal funds contrıb | uted to other orga | nizations for section | \$ |
| 3 | Total of direct and indirect exe 1120-POL, line 17b | mpt function expenditures Add lin | es 1 and 2 and ent | er here and on Form | \$ |
| 4 | Did the filing organization file F | Form 1120-POL for this year? | | | ┌ Yes |
| 5 | were made Enter the amount p political contributions received | nd Employer Identification Number paid and indicate if the amount was d and promptly and directly deliverence action committee (PAC) If addition | paid from the filinged to a separate po | ı organization's own interna olitical organization, such a | l funds or were s a separate |
| | (a) Name | (b) Address | (c) EIN | (d) A mount paid from filing organization's internal funds If none, enter - 0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | see the instructions for Form 000 | Cat No E | | Form 900 or 900 E7) 2009 |

section 4911 tax for this year?

┌ Yes ┌ No

| P | | organizations exempt under section 501(c)(tion 501(h)). (See the instructions for Schedule C | | 68 |
|------------|---|--|---|--|
| | <u> </u> | belongs to an affiliated group | | |
| В | Check If the filing organization | checked box A and "limited control" provisions apply | | |
| | | obying Expenditures— s" means amounts paid or incurred.) | (a) Filing Organization's Totals | (b) Affiliated Group Totals |
| 1 a | Total lobbying expenditures to influe | nce public opinion (grass roots lobbying) | | |
| b | Total lobbying expenditures to influe | nce a legislative body (direct lobbying) | 10,000 | |
| c | Total lobbying expenditures (add line | s 1a and 1b) | 10,000 | |
| d | Other exempt purpose expenditures | | 7,159,001 | |
| е | Total exempt purpose expenditures (| add lines 1c and 1d) | 7,169,001 | |
| f | Lobbying nontaxable amount Entert columns— | 508,450 | | |
| | If the amount on line 1e, column (a) or (b) is: Not over \$500,000 | The lobbying nontaxable amount is: 20% of the amount on line 1e | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | |
| | Over \$17,000,000 | \$1,000,000 | | |
| | | | | |
| g | Grassroots nontaxable amount (ente | r 25% of line 1f) | 127,113 | |
| h | Subtract line 1g from line 1a Enter - | 0- if line g is more than line a | 0 | |
| i | Subtract line 1f from line 1c Enter - 0 |)- If line f is more than line c | 0 | |

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

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

| | Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|-------|---|----------|-----------------|-----------------|-----------------|------------------|
| | Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total |
| 2a | Lobbying non-taxable amount | | | 470,849 | 508,450 | 979,299 |
| b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 1,468,949 |
| _с | Total lobbying expenditures | 0 | 0 | 15,000 | 10,000 | 25,000 |
| d | Grassroots non-taxable amount | | | 117,712 | 127,113 | 244,825 |
| е | Grassroots ceiling amount (150% of line d, column (e)) | | | | | 367,238 |
| f | Grassroots lobbying expenditures | 0 | 0 | 0 | 0 | |

| | 5768 (election under section 501(h)). (See the instructions for Schedule C for d | | | | | |
|----------|---|----------|-----------|-------|-------|----------|
| | | (a | 1) | | (b) | |
| | · | Yes | No | A | moun | nt |
| 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 | | | | | |
| а | referendum, through the use of Volunteers? | | | | | |
| ь | | | | 1 | | |
| c | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| e | Publications, or published or broadcast statements? | | | | | |
| f | | | | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? | | | | | |
| i | Other activities If "Yes," describe in Part IV | | | | | |
| j | Total lines 1c through | | | | | |
| - | 1) Did the patientias in line 1 agree the arrangements in the net decombed in section FO1/a)/2)2 | | Ī | 1 | | |
| | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes" enter the amount of any tax incurred under section 4912 | | | + | | |
| | If "Yes" enter the amount of any tax incurred by organization managers under section 4912 | | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| | t III-A To be completed by all organizations exempt under section 501(c)(4), sec | tion | 5016 | |) or | |
| G. | section 501(c)(6). (See the instructions for Schedule C for details.) | | 301(| | ,, 0. | |
| | | | _ | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | L | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | L | 2 | | <u> </u> |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 3 | | |
| Par | t III-B To be completed by all organizations exempt under section 501(c)(4), sec | | | | | |
| | section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" (question 3 is answered "Yes." (See the instructions for Schedule C for details.) | OK II | Part | III-A | ٠, | |
| 1 | Dues, assessments and similar amounts from members | T | 1 \$ | | | |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political | F | ' | | | |
| | expenses for which the section 527(f) tax was paid). | | | | | |
| | Current Year | | 2a \$ | | | |
| b | Carryover from last year | | 2b\$ | | | |
| c | Total | <u> </u> | 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 (line 2c total minus 3 and 4) | | 5 \$ | | | |
| Pā | Supplemental Information | • | | | | |
| | mplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and F so, complete this part for any additional information | Part II | l-B, line | e 1ı | | |
| | Identifier Return Reference Explanation | on | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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| Part IV Supplemental Information | | | | | |
|----------------------------------|------------------|-------------|--|--|--|
| Ident if ier | Return Reference | Explanation | | | |
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Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

Schedule D (Form 990) 2008

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Employer identification number Name of the organization NEIGHBORHOOD PROGRESS INC

| | | | 34-1611055 | |
|------|--|--|---|----------------------------|
| Par | Organizations Maintaining Donor Acordanization answered "Yes" to Form 99 | | Funds or Account | :s. Complete if the |
| | | (a) Donor advised funds | (b) Funds and | other accounts |
| 1 | Total number at end of year | | | |
| 2 / | Aggregate Contributions to (during year) | | | |
| 3 / | Aggregate Grants from (during year) | | | |
| 4 | Aggregate value at end of year | | | |
| | Did the organization inform all donors and donor advi funds are the organization's property, subject to the | | onor advised | ┌ Yes ┌ No |
| | Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit? | | | ┌ Yes |
| Part | II Conservation Easements. Complete | ıf the organızatıon answered "Yes" | ' to Form 990, Part i | IV, line 7. |
| | Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual | on or pleasure) Preservation of Preservation of | an historically importa certified historic struc rm of a conservation e | ture |
| | on the last day of the tax year | | | t the End of the Year |
| а | Total number of conservation easements | | 2a | t the that of the real |
| b | | | 2b | |
| c | Total acreage restricted by conservation easement | | | |
| | Number of conservation easements on a certified hi | | 2c | |
| d | Number of conservation easements included in (c) a | • | 2d | |
| | Number of conservation easements modified, transfe | erred, released, extinguished, or termina | ited by the organizatio | n during |
| | the taxable year ► | | | |
| 4 | Number of states where property subject to conserva | ation easement is located ► | | |
| | Does the organization have a written policy regarding enforcement of the conservation easements it holds? | | olations, and | ┌ Yes |
| 6 | Staff or volunteer hours devoted to monitoring, inspe | cting and enforcing easements during t | he year ► | |
| 7 | A mount of expenses incurred in monitoring, inspecti | ng, and enforcing easements during the | year ► \$ | |
| | Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | 2(d) above satisfy the requirements of s | ection | ┌ Yes |
| | In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer | the footnote to the organization's financ nents | ial statements that de | scribes |
| Part | Organizations Maintaining Collection Complete if the organization answered | | s, or Other Simila | Assets. |
| | If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir | for public exhibition, education or resear | arch in furtherance of p | |
| _ | If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items | public exhibition, education, or research | | • |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | ► \$ | |
| | (ii) Assets included in Form 990, Part X | | ► \$ | |
| | If the organization received or held works of art, hist following amounts required to be reported under SFA | | for financial gain, prov | ride the |
| а | Revenues included in Form 990, Part VIII, line 1 | | ► \$ | |
| b | Assets included in Form 990, Part X | | ► \$ | |

Cat No 52283D

| Part | | Organizations Maintaining Coll | lections of Art, I | Hist | <u>tori</u> | <u>cal Treası</u> | ires, or C |)the | r Simila | r Asse | ts (co | ntınued) |
|---------|--------------|---|------------------------|-------|-------------|----------------------------|---------------|-------|---------------|-----------------|----------------|------------|
| 3 | | g the organization's accession and other is (check all that apply) | records, check any c | ofthe | e foll | owing that ai | re a signific | ant ı | use of its co | ollection | | |
| а | Γ | Public exhibition | | d | Γ | Loan or exc | hange prog | rams | 5 | | | |
| b | F : | Scholarly research | | e | Γ | Other | | | | | | |
| С | Γ | Preservation for future generations | | | | | | | | | | |
| 4 | Prov Part | ide a description of the organization's col XIV | lections and explain | how | they | further the | organızatıoı | n's e | xempt purp | ose in | | |
| 5 | | ng the year, did the organization solicit or ts to be sold to raise funds rather than to | | | | | | | nılar | Γ, | Yes | ┌ No |
| Par | t IV | Trust, Escrow and Custodial A Part IV, line 9, or reported an amo | | | | | anızatıon a | answ | vered "Yes | s" to Fo | rm 99 | 90, ——— |
| 1a | | e organization an agent, trustee, custodia ded on Form 990, Part X? | an or other intermedi | ary | for c | ontributions | or other ass | sets | not | Γ, | Yes | ┌ No |
| b | If"Y | es," explain why in Part XIV and complet | e the following table | | | | - | | | | | |
| | | | | | | | - | | | A mou | nt | |
| С | Begi | nning balance | | | | | | 1c | | | | |
| d | Add | itions during the year | | | | | | 1d | | | | |
| е | Dıst | ributions during the year | | | | | | 1e | | | | |
| f | Endi | ng balance | | | | | | 1f | | | | |
| 2a | Dıd t | he organization include an amount on For | m 990, Part X, line 2 | 217 | | | | | | Γ, | Yes | ┌ No |
| b | If "Y | es," explain the arrangement in Part XIV | | | | | | | | | | |
| Pa | rt V | Endowment Funds. Complete If | | | | | | | | | | |
| 1a | Pogu | nning of year balance | (a)Current Year | (b) | Prior Y | ear (c)Iv | vo Years Back | (a) | Three Years | Back (e) | Four Ye | ears Back |
| та b | | tributions | | | | | | | | | | |
| c | | stment earnings or losses | | | | | | | | | | |
| d | | nts or scholarships | | | | | | | | | | |
| e | | er expenditures for facilities | | | | | | | | | | |
| | | programs | | | | | | | | | | |
| f | Adm | iinistrative expenses | | | | | | | | | | |
| g | End | of year balance | | | | | | | | | | |
| 2 | Prov | ide the estimated percentage of the year | end balance held as | | | | | | | | | |
| а | Boar | d designated or quasi-endowment 🕨 | | | | | | | | | | |
| b | Perm | nanent endowment 🕨 | | | | | | | | | | |
| c | Term | n endowment 🕨 | | | | | | | | | | |
| 3a | | there endowment funds not in the possess | sion of the organizati | on t | hat a | re held and a | admınıstere | d for | the | | | |
| | _ | nization by | | | | | | | | 22/1) | Yes | No |
| | | nrelated organizations | | • | • | | | • | | 3a(i) 3a(ii) | | |
| ь | | elated organizations | | | ched | ule R? | · · · · | ٠. | | 3b | I | |
| 4 | | cribe in Part XIV the intended uses of the | • | | | | • | - | - • | | | |
| Par | t VI | Investments—Land, Buildings, | and Equipment | t. Se | ee F | orm 990, P | art X, line | 10. | | | | |
| | | Description of investment | | | | Cost or other (investment) | | | (c) Deprec | ation | (d) Boo | ok value |
| 1a | and | | | | | | | | | | | |
| b I | Buildii | ngs | | | | 4,950,79 | 8 | | 1,5 | 04,554 | | 3,446,244 |
| c I | ease | hold improvements | | | | | | | | | | |
| d I | Equipi | ment | | | | | | | | | | |
| e | Other | | | | | | | | | | | |

| Part VII Investments—Other Securities. See | Form 990, Part X, line 1 | 2. | |
|---|--------------------------|-----------|---------------------------------------|
| (a) Description of security or cateory (including name of security) | (b)Book value | | d of valuation · year market value |
| Financial derivatives and other financial products | | | |
| Closely-held equity interests | | | |
| Other INVEST IN FRIES & SCHULE, LTD PTSHP | 2,020,865 | | C |
| | | | |
| | | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 12) | 2,020,865 | | |
| Part VIII Investments—Program Related. Se | | 12 | |
| (a) Description of investment type | (b) Book value | (c) Metho | d of valuation · year market value |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, I | | | |
| (a) Descri | | | (b) Book value |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line | 15.) | | |
| Part X Other Liabilities. See Form 990, Part | 1 | | |
| (a) Description of Liability Federal Income Taxes | (b) A mount | | |
| MINORITY INTEREST IN PARTNERSHIPS | 6,761 | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 25) | 6.764 | | |
| | 6,761 | | |

| Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 4,448,305 |
|---|--|--|
| Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 7,251,591 |
| Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | -2,803,286 |
| | 4 | |
| | 5 | |
| Investment expenses | 6 | |
| · | 7 | |
| Other (Describe in Part XIV) | 8 | -6,761 |
| | 9 | -6,761 |
| | 10 | -2,810,047 |
| | er Re | <u> </u> |
| Total revenue, gains, and other support per audited financial statements | 1 | 4,827,297 |
| A mounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| Net unrealized gains on investments | | |
| Donated services and use of facilities | | |
| Recoveries of prior year grants | | |
| Other (Describe in Part XIV) | | |
| Add lines 2a through 2d | 2e | 378,992 |
| Subtract line 2e from line 1 | 3 | 4,448,305 |
| A mounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| Investment expenses not included on Form 990, Part VIII, line 7b . 4a | | |
| Other (Describe in Part XIV) | | |
| Add lines 4a and 4b | 4c | 0 |
| Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 4,448,305 |
| <u> </u> | | |
| | 1 | 7,630,583 |
| | | |
| | - | |
| | | |
| | - | |
| | , | 378,992 |
| • | | 7,251,591 |
| | - | 7,251,591 |
| 1 1 | | |
| · · · · · · · · · · · · · · · · · · · | 1 | |
| | 40 | 0 |
| | | 7,251,591 |
| XIV Supplemental Information | | ,,231,331 |
| | Total revenue, gains, and other support per audited financial statements A mounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments | Excess or (deficit) for the year Subtract line 2 from line 1 |

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

| Ident if ier | Return Reference | Explanation |
|--------------|------------------|---|
| | | PART XI, LINE 8,OTHER ADJUSTMENTS ARE ATTRIBUTED TO MINORITY INTEREST IN PARTNERSHIPS |
| | | PART XII, LINE 2D, OTHER IS IMPUTED INTEREST |
| | | PART XIII, LINE 2D, OTHER IS IMPUTED INTEREST |
| | | |
| | | |
| | | |
| | | |

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Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

OMB No 1545-0047

2008

DLN: 93493134028200

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

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

Open to Public Inspect ion

Employer identification number

| NEIGHBORHOOD PROGRESS | INC | | | | | | |
|--|---|---|------------------------------|---|---|--|---------------------------------------|
| | | | | | | 34-1611055 | |
| Part I General Infor | mation on Grai | nts and Assistance | 2 | | | | |
| Does the organization mathe selection criteria use Describe in Part IV the organization. | ed to award the gran | nts or assistance? | | | | | ▼ Yes |
| Part IV and Sch | IV, line 21 for ar edule I-1 if addi | ny recipient that rece tional space is | eived more than \$5,0 | 00. Check this box | tes. Complete if the o | eived more than \$5, | |
| 1(a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| See Additional Data Table | | | | | | | |
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| | | | | | | | |
| 2 Enter total number of seconganizations | | | | | • | | 18 |
| 3 Enter total number of oth | er organizations . | | <u>.</u> | | <u> </u> | <u> </u> <u>.</u> . | • |
| For Paperwork Reduction Act Not | tice, see the Instruct | tions for Form 990. | <u> </u> | Cat No 500551 | p | Sc | hedule I (Form 990) 2008 |

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

| (a)Type of grant or assistance | (b) Number of recipients | (c)A mount of cash grant | (d)A mount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|----------------------------------|-----------------------------|--------------------------------------|---|---------------------------------------|
| | | | | | |
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. See Additional Data Table

 Identifier
 Return Reference
 Explanation

 Procedure for Monitoring Grants in the U S
 Part I, Line 2
 Schedule I, Part I, Line 2 A CONTRACT IS EXECUTED BETWEEN NPI AND EACH OF THE CDCs CONTAINING STIPULATIONS AND CONDITIONS THE CDC MUST MEET NPI STAFF MEET PERIODICALLY WITH CDC STAFF, TYPICALLY QUARTERLY TWO TIMES A YEAR, WRITTEN REPORTS ARE REQUIRED FROM THE CDCs

 Image: Control of the Contro

Software ID: Software Version:

EIN: 34-1611055

Name: NEIGHBORHOOD PROGRESS INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

| i di ili 990,3cheddle 1, Fa | it II, Grants t | ind Other Assistant | ce to dovernment. | and Organizatio | iis iii tiic oiiitea st | u (C 3 | 1 |
|--|-----------------|------------------------------------|--------------------------------------|---|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| NEW VILLAGE CORPORATION1956 W 25TH ST SUITE 200 CLEVELAND,OH 44113 | 34-1653986 | 501(C)(3) | 1,069,658 | | | | OPERATING AND PROGRAM SUPPORT |
| DETROIT SHOREWAY COMMUNITY DEVELOPMENT6516 DETROIT AVENUE CLEVELAND,OH 44102 | 23-7376130 | 501(C)(3) | 263,600 | | | | OPERATING AND PROGRAM SUPPORT |
| TREMONT WEST DEVELOPMENT CORP2406 PROFESSOR STREET CLEVELAND,OH 44113 | 23-7029247 | 501(C)(3) | 280,379 | | | | OPERATING AND PROGRAM SUPPORT |
| BELLAIRE-PURITAS DEVELOPMENT14703 PURITAS AVENUE CLEVELAND,OH 44135 | 34-1685259 | 501(C)(3) | 90,000 | | | | OPERATING AND PROGRAM SUPPORT |
| SLAVIC VILLAGE DEVELOPMENT5620 BROADWAY CLEVELAND,OH 44127 | 34-1344279 | 501(C)(3) | 297,917 | | | | OPERATING AND PROGRAM SUPPORT |
| MOUNT PLEASANT NOW 13815 KINSMAN rOAD CLEVELAND,OH 44120 | 34-1599720 | 501(C)(3) | 60,000 | | | | OPERATING AND PROGRAM SUPPORT |
| OHIO CITY NEAR WEST DEVELOPMENT2525 MARKET AVE SUITE A CLEVELAND,OH 44113 | 34-1372076 | 501(C)(3) | 91,000 | | | | OPERATING AND PROGRAM SUPPORT |
| UNION MILES DEVELOPMENT CORP9250 MILES PARK AVENUE CLEVELAND, OH 441055151 | 34-1336972 | 501(C)(3) | 70,150 | | | | OPERATING AND PROGRAM SUPPORT |
| CLEVELAND HOUSING NETWORK2999 PAYNE AVENUE SUITE 306 CLEVELAND,OH 44114 | 34-1346763 | 501(C)(3) | 610,622 | | | | OPERATING AND PROGRAM SUPPORT |
| BUCKEYE AREA DEVELOPMENT CORP 11802 BUCKEYE ROAD CLEVELAND, OH 441202621 | 34-1097181 | 501(C)(3) | 409,800 | | | | OPERATING AND PROGRAM SUPPORT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (d) A mount of cash (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code (f) Method of (a) Description of (h) Purpose of grant organization section grant cash valuation (book, non-cash assistance orassistance FMV, appraisal, or government ıf applicable assistance other) FAMICOS FOUNDATION 34-1053534 501(C)(3) 303,265 OPERATING AND 1325 ANSEL ROAD **PROGRAM** CLEVELAND, OH 44106 SUPPORT 34-1184478 501(C)(3) 273,453 OPERATING AND SHAKER SQUARE AREA DEVELOPMENT CORP PROGRAM SUPPORT 11811 SHAKER **BOULEVARD SUITE 206** CLEVELAND.OH 441201927 264,000 FAIRFAX RENAISSANCE 34-1706856 501(C)(3) OPERATING AND DEVELOPMENT CORP **PROGRAM** 8111 OUINCY AVENUE SUPPORT SUITE 100 CLEVELAND, OH 44104 501(C)(3) 135,000 **ENTERPRISE** 52-1231931 OPERATING AND FOUNDATION3500 **PROGRAM** SUPPORT LORAIN AVE SUITE 300 CLEVELAND, OH 44113 NORTHEAST SHORES 34-1361219 501(C)(3) 124,156 OPERATING AND DEVELOPMENT **PROGRAM** CORPORATION317 E SUPPORT 156TH ST CLEVELAND, OH 44110 OPERATING AND BURTON BELL CARR 34-1657533 501(C)(3) 128,497 DEVELOPMENT **PROGRAM** CORPORATION3226 E SUPPORT 93RD ST CLEVELAND.OH 44104 ST CLAIR SUPERIOR OPERATING AND 34-1238020 501(C)(3) 101,920 DEVELOPMENT4205 ST **PROGRAM** CLAIR AVENUE SUPPORT CLEVELAND, OH 44103 CLEVELAND PUBLIC ART 34-1616070 501(C)(3) 48,500 **OPERATING AND** 1951 W 26TH ST SUITE **PROGRAM** SUPPORT 101 CLEVELAND, OH 44113 374,348 MISC SMALL DOLLAR OPERATING AND GRANTS **PROGRAM** SUPPORT

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As Filed Data -

DLN: 93493134028200

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

| Name of | the o | rganiz | at ion |
|----------|-------|--------|---------|
| NEIGHBOR | HOOD | PROGRI | ESS INC |

Employer identification number

34-1611055

| | Questions Regarding Compensation | on the state of th | | | |
|----|--|--|----|-----|----|
| | | | | Yes | Νo |
| 1a | | ovided any of the following to or for a person listed in Form I 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 idemnification and gross-up payments | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "l | | 1b | | |
| 2 | Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv | | 2 | | |
| 3 | Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t | hat apply | | | |
| | ✓ 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 in Form 990, | Part VII, Section A, line 1a | | | |
| а | Receive a severance payment or change of control | payment? | 4a | | Νo |
| b | Participate in, or receive payment from, a suppleme | ental nonqualified retirement plan? | 4b | | Νo |
| c | Participate in, or receive payment from, an equity-b | pased compensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and p | rovide the applicable amounts for each item in Part III | | | |
| | 501(c)(3) and 501(c)(4) organizations only must co | omplete lines 5-8. | | | |
| 5 | For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of | , line 1a, did the organization pay or accrue any | | | |
| а | The organization? | | 5a | | Νo |
| Ь | Any related organization? | | 5b | | Νo |
| | If "Yes," to line 5a or 5b, describe in Part III | | | | |
| 6 | For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of | , line 1a, did the organization pay or accrue any | | | |
| а | The organization? | | 6a | | Νo |
| b | Any related organization? | | 6b | | Νo |
| | If "Yes," to line 6a or 6b, describe in Part III | | | | |
| 7 | For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," | | 7 | | Νo |
| 8 | Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III | paid or accured pursuant to a contract that was n Regs section 53 4958-4(a)(3)? If "Yes," describe | | | |

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

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| | T | | | T | 1 | | |
|-------------------|--------------------------|---|-----------------------------|--------------|----------|----------------------|--|
| (A) Name | (B) Breakdown of | W-2 and/or 1099-MI | SC compensation | | | (E) Total of columns | (F) Compensation reported in prior Form |
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | compensation | benefits | (B)(ı)-(D) | 990 or Form 990-EZ |
| ERIC HODDERSEN (I | 191,701 | | | | 30,325 | 222,026 | |
| (ii | | | | | | | |
| (i) | | | | | | | |
| (ii |) | | | | | | |
| (i) | | | | | | | |
| (ii | | | | | | | |
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| (ii | | | | | | | |
| (i) | | | | | | | |
| (ii | | | | | | | |

Part III Supplemental Information

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

| Ident if ier | Return Reference | Explanation |
|--------------|---------------------|-------------|
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Transactions with Interested Persons

or Form 990-EZ, Part V lines 38b or 40b.

DLN: 93493134028200

OMB No 1545-0047

Schedule L

Internal Revenue Service

(Form 990 or 990-EZ)

► Attach to Form 990 or Form 990-EZ. ▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, Department of the Treasury

Open to Public Inspection

Employer identification number Name of the organization NEIGHBORHOOD PROGRESS INC 34-1611055 Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under **3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . Part II Loans to and/or From Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (b) Loan to or (e) In Approved (q)Written from the (c)O riginal principal (a) Name of interested person and by board or default? agreement? (d)Balance due organization? purpose amount committee? Τо From Yes Yes Yes No Part III Grants or Assistance Benefitting Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (b)Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization Part IV Business Transactions Involving Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship organization's between interested (c) A mount of (a) Name of interested person (d) Description of transaction transaction person and the revenues? organization Yes No DAVID GOLDBERG CHAIRMAN OF AMTRUST BANK WAS A CO-Νo AMTRUST BANK LENDER TO NPI'S AFFILIATE VCCVICE CHAIR OF KEY BETH MOONEY NPI AND ITS AFFILIATED lN٥ BANK ORGANIZATIONS HAVE DEPOSIT ACCOUNTS AND LOANS FROM KEY BANK THEY ALSO REGULARLY DO BUSINESS WITH KEY BANK AND ITS AFFILIATED ORGANIZATIONS MARK MCDERMOTT EMPLOYEE AND ECP GRANTS AND LOANS Νo lofficer of FUNDS TO NPI AND ITS ENTERPRISE AFFILIATE VCC IN ADDITION, NPI GRANTS COMMUNITY **FUNDS TO ECP** PARTNERS (ECP) MICHAEL TAYLOR EMPLOYEE AND NPI'S AFFILIATED BANKING OFFICER ORGANIZATIONS HAVE OF PNC BANK DEPOSIT ACCOUNTS AND AND/OR ITS LOANS FROM AND REGULARLY

AFFILIATES

EMPLOYEE OF NPI,

MARRIED TO MARK MCDERMOTT

BROTHER OF TERRY

COYNE, UNPAID TRUSTEE OF NPI'S AFFILIATE VCC

ROBERTA REICHTELL

See Additional Data Table

THOMAS COYNE

DO BUSINESS WITH PNC

BANK PNC BANK IS A 99% EQUITY PARTNER IN NPI'S FEILIATED ARBOR PARK PLACE LLC PROJECT IN ADDITION, PNC BANK PROVIDES GRANTS TO NPI

Νo

Νo

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Non-Cash Contributions

Name of the organization

Employer identification number

| NEIG | HBORHOOD PROGRESS INC | | | | | | | |
|------|---|----------------------------------|--------------------------------|--|-----------------------------------|-------------|------|----------------|
| Pa | rt I Types of Property | | | | 34-1611055 | | | |
| | Types of Freperty | (a) Check If applicable | (b) Number of Contributions | (c) Revenues reported on Form 990, Part VIII, line 1g | (d Method of d reven | - etermı | nıng | |
| 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 . | | | | | | | |
| | Securities—Closely held stock | | | | | | | |
| 11 | Securities—Partnership, LLC, or trust interests | Х | 1 | 319,479 | | | | |
| | 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 IMPUTED INTEREST ON BELOW- MARKET- RATE | | | | | | | |
| 25 | Other (describe <u>LOANS</u>) | X | 2 | 343,550 | | | | |
| | Other (describe) | | | | | | | |
| 27 | Other (describe) | | | | | | | |
| 28 | Other (describe) | | | | | | | |
| 29 | Number of Forms 8283 received which the organization complete Acknowledgement | d Form 828 | 33, Part IV, Donee | ar for contributions for | 29 | | | |
| 30a | During the year, did the organization | | | | | \square | Yes | No |
| | least three years from the date of | | | not required to be used for | exempt purposes | | | |
| | for the entire holding period? . | | | | | 30a | | No |
| b | If "Yes", describe the arrangem | ent in Part 1 | II | | | | | |
| 31 | Does the organization have a gif | | | | | 31 | | No |
| 32a | Does the organization hire or us contributions? | e third part • • • | | to solicit, process, or sell | non-cash | 32a | | No |
| | If "Yes", describe in Part II If the organization did not report checked, describe in Part II | revenues i | ın Column (c) for a type of p | property for which Column (a | a) ıs | | | _ _ |

| Part II Supplemental Infor 32b, and 33. Also com | Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. | | | | | |
|--|--|-------------|--|--|--|--|
| Identifier | ReturnReference | Explanation | | | | |
| 240111111 | Notal III Colored | Explanation | | | | |
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OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Supplemental Information to Form 990

Name of the organization NEIGHBORHOOD PROGRESS INC **Employer identification number**

34-1611055

| ldentifier | Return Reference | Explanation |
|--------------------------------------|------------------|---|
| Form 990, Part VI, Section A, line 2 | | SEE SCHEDULE L, PART IV FOR DESCRIPTION OF FAMILY RELATIONSHIPS |

| ldentifier | Return Reference | Explanation |
|--------------------------------------|------------------|---|
| Form 990, Part VI, Section A, line 6 | | THE ORGANIZATION HAS 18 BOARD MEMBERS OR TRUSTEES |

| ldentifier | Return Reference | Explanation |
|--|---------------------|---|
| Form 990, Part VI, Section A, line 7a | | THE VOTING MEMBERS ELECT ALL OF THE MEMBERS OF THE GOVERNING BODY THE VOTING MEMBERS ARE THE MEMBERS OF THE GOVERNING BODY THEN SERVING |

| ldentifier | Return Reference | Explanation |
|--|---------------------|---|
| Form 990, Part VI, Section A, line 7b | | THE VOTING MEMBERS ELECT ALL OF THE MEMBERS OF THE GOVERNING BODY THE VOTING MEMBERS ARE THE MEMBERS OF THE GOVERNING BODY THEN SERVING |

| ldentifier | Return Reference | Explanation |
|--|---------------------|---|
| Form 990, Part VI, Section A, line 10 | | FORM 990 IS PREPARED BY A PROFESSIONAL TAX FIRM, IS REVIEWED BY THE CHIEF FINANCIAL OFFICER AND REVIEWED AND SIGNED BY THE PRESIDENT OF NPI A DRAFT OF FORM 990 IS DISTRIBUTED TO THE NPI AUDIT COMMITTEE PRIOR TO FILING |

| ldentifier | Return Reference | Explanation |
|---|---------------------|---|
| Form 990, Part VI, Section B, line 12c | | ANNUALLY EACH DIRECTOR OF THE BOARD AS WELL AS SENIOR STAFF MEMBERS MUST COMPLETE AND SIGN A CONFLICT OF INTEREST QUESTIONNAIRE DISCLOSING IN WRITING ANY POTENTIAL CONFLICTS OF INTEREST |

| ldentifier | Return Reference | Explanation |
|--|---------------------|--|
| Form 990, Part VI, Section B, line 15 | | THE SALARIES FOR THE OFFICERS AND ALL FULL-TIME EMPLOYEES ARE REVIEWED AND DETERMINED ANNUALLY BY THE COMPENSATION COMMITTEE OF NEIGHBORHOOD PROGRESS, INC THE COMPENSATION COMMITTEE IS APPOINTED ANNUALLY BY THE CHAIR OF NEIGHBORHOOD PROGRESS, INC |

| ldentifier | Return Reference | Explanation |
|--|---------------------|---|
| Form 990, Part VI, Section C, line 19 | | THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST |

| ldentifier | Return Reference | Explanation |
|----------------------------------|---------------------|---|
| FORM 990, PART XI, LINE 2C | AUDIT OVERSIGHT | NPI'S AUDIT COMMITTEE ASSUMES OVERSIGHT OF THE AUDIT AND RECOMMENDS TO THE FULL NPI BOARD APPROVAL OF THE SELECTION OF THE INDEPENDENT ACCOUNTANT AND ALSO RECOMMENDS TO THE FULL NPI BOARD APPROVAL OF THE FINAL AUDIT REPORTS THIS PROCESS DID NOT CHANGE FROM PRIOR YEAR |

| ldentifier | Return Reference | Explanation |
|------------|------------------|--|
| | | THE ORGANIZATION HAS TRUSTEES LISTED AT PART VII |

| ldentifier | Return Reference | Explanation |
|--|--|---|
| FORM 990, PART VI, SECTION B, LINE 16A | ORANIZATION INVESTED IN PARTNERSHIPS | THE ORGANIZATION INVESTED IN SEVERAL PARTNERSHIPS THE ORGANIZATION ALSO CONTRIBUTED FUNDING TO STL HOUSING LLC, A PARTNERSHIP BETWEEN AFFILIATE NEW VILLAGE CORPORATION AND BUCKEYE AREA DEVELOPMENT CORPORATION (BOTH TAXEXEMPT, 501(C)(3) ORGANIZATIONS) IN ORDER TO FURTHER THE ORGANIZATION'S MISSION |

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

Cat No 51056K

Sc hedule O (Form 990) 2008

DLN: 93493134028200

2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Name of the organization NEIGHBORHOOD PROGRESS INC **Employer identification number**

34-1611055

| Part I Identification of Disregarded Entities | | | | | |
|--|---|---|----------------------------|----------------------------------|--------------------------------------|
| (A) Name, address, and EIN of disregarded entity | (B) Primary activity | (C) Legal domicile (state or foreign country) | (D) Total income | (E) End-of-year assets | (F) Direct controlling entity |
| NPIFS LLC 1956 W 25TH ST SUITE 200 CLEVELAND, OH 44113 27-1243843 | REAL ESTATE RENTAL & SALES TO COMBAT BLIGHT | ОН | 287,487 | 4,010,104 | NEIGHBORHOOD PROGRESS INC |
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Part II Identification of Related Tax-Exempt Organizations

| (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 |
|---|---|---|----------------------------|--|--|
| NEW VILLAGE CORPORATION 1956 W 25TH ST SUITE 200 CLEVELAND, OH44113 34-1653986 | REAL ESTATE DEVELOPMENT TO COMBAT BLIGHT | ОН | 501(C)(3) | | NEIGHBORHOOD PROGRESS INC |
| CLEVELAND HOUSING RENEWAL PROJECT 1956 W 25TH ST SUITE 200 CLEVELAND, OH44113 99-9999999 | REAL ESTATE ACTIVITIES TO COMBAT BLIGHT | ОН | 501(C)(3) | NOT ADDITED FOR | LAND ASSEMBLY FOR NEIGHBORHOOD DEVELOPMENT LTD |
| VILLAGE CAPITAL CORPORATION 1956 W 25TH ST SUITE 200 CLEVELAND, OH44113 34-1704488 | LENDING FOR COMMUNITY DEVELOPMENT | ОН | 501(C)(3) | | NEIGHBORHOOD PROGRESS INC |
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| Part IIII Identifica | tion of Related | Organizations | Taxable as | a Partnership |
|----------------------|-----------------|---------------|------------|---------------|
|----------------------|-----------------|---------------|------------|---------------|

| (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, investment, unrelated) | (F) Share of total income | (G) Share of end-of-year assets | (H Disprop allocat | rtionate | (I) Code V—UBI amount on Box 20 of K-1 | Gene mar | (J) eral or naging tner? |
|---|--|---|--|--|-------------------------------------|--|--------------------------|----------|---|-------------|---|
| | | | | | | | Yes | No | | Yes | No |
| 1956 W 25TH ST SUITE 200 | RESIDENTIAL REAL ESTATE TO COMBAT BLIGHT | | NEIGHBORHOOD PROGRESS | EXCLUDED | -7,774 | 2,856,131 | | No | | Yes | |
| | RETAIL REAL ESTATE TO COMBAT BLIGHT | | NEW VILLAGE CORPORATION | N/A | | | | No | | | No |
| 1956 W 25TH ST SUITE 200 | RESIDENTIAL REAL ESTATE TO COMBAT BLIGHT | | NEW VILLAGE CORPORATION | N/A | | | | No | | | No |
| OHIO CITY DEVELOPMENT LTD 1956 W 25TH ST SUITE 200 CLEVELAND, OH44113 34-1798895 | RETAIL REAL ESTATE TO COMBAT BLIGHT | | NEW VILLAGE CORPORATION | N/A | | | | No | | | No |
| 2000 DAVNE AVE | RESIDENTIAL REAL ESTATE TO COMBAT BLIGHT | | NEW VILLAGE CORPORATION | EXCLUDED | | | | No | | | No |
| | | | | | | | | | | | |
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| Part IV | Identification of Related Organizations Taxable as a Corporation or Trust |
|---------|---|
|---------|---|

| (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 |
|---|-------------------------|--|---|---|--|--|---------------------------------------|
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| Part V Transactions with Related Organiza |
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| Part V | Transactions with Related Organizations | | | |
|-----------------|---|-----|-----|----|
| Note | e. Complete line 1 if any entity is listed in Parts II, III or IV | Y | Yes | No |
| 1 During | the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | |
| a Rec | eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity | Y | Yes | |
| b Gift | t, grant, or capital contribution to other organization(s) |) | Yes | |
| c Gift, | , grant, or capital contribution from other organization(s) | | | No |
| d Loa | ns or loan guarantees to or for other organization(s) | ľ | Yes | |
| e Loa | ns or loan guarantees by other organization(s) | | | No |
| | | | | |
| f Sale | e of assets to other organization(s) | | | No |
| g Pur | chase of assets from other organization(s) | | | No |
| h Exc | thange of assets | 1 | | No |
| i Leas | se of facilities, equipment, or other assets to other organization(s) | | | No |
| | | | | |
| j Leas | se of facilities, equipment, or other assets from other organization(s) | - | | No |
| k Per | formance of services or membership or fundraising solicitations for other organization(s) | : Y | Yes | |
| I Perf | ormance of services or membership or fundraising solicitations by other organization(s) | | | No |
| m Sha | ring of facilities, equipment, mailing lists, or other assets | n Y | Yes | |
| n Sha | ring of paid employees | 1 | Yes | |
| _ | | | | |
| | mbursement paid to other organization for expenses | _ | | No |
| p Reir | mbursement paid by other organization for expenses | + | | No |
| a Oth | ner transfer of cash or property to other organization(s) 1q | | | No |
| - | er transfer of cash or property from other organization(s) | + | Yes | |

| Z | If the answer to any of the above is les, | see the histractions for information on who i | must complete this line, including cove | ered relationships and transaction thresholds |
|---|---|---|---|---|
| | | | (B) | |

| | (A) Name of other organization(s) | (B) Transaction type(a-r) | (C) Amount Involved |
|-----|-----------------------------------|---------------------------------|------------------------|
| (1) | FRIES & SCHUELE LTD | А | 15,000 |
| (2) | STL HOUSING LLC | В | 300,000 |
| (3) | OPPORTUNITY HOUSING CLEVELAND LLC | В | 625,000 |
| (4) | FRIES & SCHUELE LTD | D | 250,000 |
| (5) | FRIES & SCHUELE LTD | R | 143,200 |
| (6) | OHIO CITY DEVELOPMENT | R | 319,480 |

Part VI Unrelated Organizations Taxable as a Partnership

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) Are all partners section 501(c)(3) organizations? | | s? | (E) Share of end-of-year assets (F) Disproprtionate allocations? | | | (G) Code V—UBI amount on Box 20 of K-1 | (H) General or managing partner? | | |
|--|--|--|-----|---|--|-----|--|---|----------|----|
| | | | Yes | No | | Yes | No | | Yes | No |
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Form 990, Schedule R, Part V - Transactions with Related Organizations

| | (A) Name of other organization | (B) Transaction type(a-r) | (C) A mount Involved (\$) |
|-----|-----------------------------------|--|--|
| (1) | FRIES & SCHUELE LTD | А | 15,000 |
| (2) | STL HOUSING LLC | В | 300,000 |
| (3) | OPPORTUNITY HOUSING CLEVELAND LLC | В | 625,000 |
| (4) | FRIES & SCHUELE LTD | D | 250,000 |
| (5) | FRIES & SCHUELE LTD | R | 143,200 |
| (6) | OHIO CITY DEVELOPMENT | R | 319,480 |