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Form **990**

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)

20**08**

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

Form 990 (2008)

		2008 cale		ear, or tax year beginning		7/1/200		, and er			30/200		pection	<u> </u>
	heck if ap		Please	C Name of organization					lullig			fication num	ber	
$\overline{}$		use IRS												
一	lame cha	•	label or print or	Number and street (or	D.O. how of modulo	net doluctored t	o stroot addra	cs) Po	om/suite					
=	nitial retu	_	type.	1	P O box ii maii is	not delivered t	o sucet addic	´ l		1		51		
=			See Specific	1020 SW Taylor St				[68	<u> </u>	503-226-3	001			
=	ermınatı		Instruc-	City or town, state or co	ountry, and ZIP +			07205		6 6 6 6 6 6	acumto ¢		4.00	05.054
=	mended	7	tions	Portland			R	97205_	_	G Gross re	ceipts \$			<u>35,854</u>
∟	pplicatio	n pending	FN	lame and address of prir	ncipal officer				H(a) is	this a group re	turn for a	affiliates?	Yes	<u> </u>
	Janet Byrd 1020 SW Taylor Suite 680, Portland, OR 97205 H(b) Are all affiliates included? Yes No										No			
1 T	ax-exer	npt status	X 50	01(c) (3) ◄ (inse	ert no)	4947(a)(1)	or 52	7		If "No," attact	nalist (s	ee instructio	ns)	
	J Website: ▶ neighborhoodpartnerships org H(c) Group exemption number ▶													
		ganization		orporation Trust	Association	Other ▶		L Yea	r or rorm	ation 199	7 M	State of lega	domicile	<u>OR</u>
Р	art l		nmary								_			
	1			the organization's mis						Partnership				
				ow-income people Th										
92		the resources for low-income people enabling them to build personal and financial assets and have safe and affordable												
Ē		housing		<u></u>										
9.6	2	Check th	nis box	▶ if the organiza	ation discontin	ued its oper	rations or d	li sposed_ (of more	<u>e than 25%</u>	of its a	ıssets		
Ŏ	3	Number	of voting	g members of the gov	erning body (l	Part VI, line	1a)	1 F	RFC	FIVER	3	<u> </u>		7
Se Se	4	Number	of indep	pendent voting membe	ers of the gove	erning body	(Part VI, III	rle_1p)		LIVLL	4			7
Activities & Governance	5			employees (Part V, III				4			986			9
Acti	6	Total nu	mber of	volunteers (estimate)	ıf necessary)			[<u>.</u>] F	FEB (9 2010	6			140
-	7a	Total gro	oss unre	elated business revent	ue from Part V	'III, line 12,	column (C)	Ψ			<i>t</i> ha			0
	b	Net unre	elated bu	usiness taxable incom	e from Form 9	90-T, line 3	34	00	200		54			0
							l		PUL	Prior Year		Cu	rrent Year	·
_	8	Contribu	itions an	nd grants (Part VIII, lin	ie 1h)					1,9	88,87 2	!	44	<u>47,744 </u>
ã	9	Program	service	e revenue (Part VIII, Iir	ne 2g)					6	26,279		1,16	60,433
Revenue	10	Investme	ent incoi	me (Part VIII, column	(A), lines 3, 4,	and 7d)					46,899	L	2	27,677
œ	11	Other re	venue (l	Part VIII, column (A),	lines 5, 6d, 8c	, 9c, 10c, a	nd 11e)				C)		0
	12	Total rev	venue-a	add lines 8 through 11	(must equal F	Part VIII, co	lumn (A), lii	ne 12)	<u> </u>	2,6	62,050		1,63	35,854
	13	Grants a	and simil	lar amounts paid (Par	t IX, column (A	A), lines 1–3	3)			1,6	31,529	<u> </u>	1,19	96,787
	14	Benefits	paid to	or for members (Part	IX, column (A), line 4)					C	<u> </u>		0
so.	15	Salaries	, other c	compensation, employ	ree benefits (P	art IX, colu	mn (A), line	es 5–10)	445,311 0				43	35,07 <u>5</u>
Expenses	16a	Professi	onal fun	ndraising fees (Part IX,	, column (A), I	ine 11e)								0
9	b	Total fur	ndraising	g expenses (Part IX c	olumn (D) line	e 25) 🕨 🚬		9,729						
ũ	17	Other ex	penses	(Part IX, column (A),	lines 11a-11d	l, 11f-24f)				810,640)	1,240,925	
	18	Total exp	penses	Add lines 13-17 (mus	st equal Part I	X, column ((A), line 25))		2,8	87,480		2,87	72,787
	19	Revenue	e less ex	xpenses Subtract line	18 from line	12				-225,430			-1,23	<u> 36,933</u>
re ses									В	eginning of Y			d of Year	
Assets d Balanc	20	Total ass	sets (Pa	art X, line 16)						6,8	36,438		4,51	14,024
t As	21			Part X, line 26)						4,9	05,057	<u> </u>	3,81	19,576
ž Ę	22	Net asse	ets or fur	nd balances Subtract	t line 21 from I	ine 20				1,9	31,381		69	94,448
Pa	rt II		nature											
				s of perjury, I declare that I h										
		and b	peliet 11 194	true, correct, and complete	Declaration of pre	parer (other th	an officer) is b	ased on all	informat	ion of which pr	eparer h	as any knowl	edge	
				/YMMOX N	Nans	\rightarrow	_			ı	2/	14/201	0	
Sig	n	 .	- 1		-10 '(100					01.	71001		
Her			Signature			7		_		Date	,	•		
Janet Byto Executive Director														
				nnt name and title			Data	- 1 -	t		D			
D- '		Prepa signa					Date		Check if Preparer's ic self-				mig numbe	31
Paid		1 *							nployed	▶∐	1,	,		
	parer's	Firm's	s name (or	r yours						EIN	<u> </u>		-	
Use	Only		employed							EIN		-		
			ess, and ZI							Phone no	<u> </u>			 _
May	the IF	RS discus	s this re	eturn with the preparer	r shown above	e? (see ınstı	ructions)						Yes	No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

INIET FEB 2 2 ZUIU

(HTA)

Form	990 (2008) Neighborhood Partnerships, Inc 91-	1943624	Page 2
Pa	rt III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission		
	Neighborhood Partnerships' mission is to create		
	opportunity for low-income people. This work is accomplished through various programs where we strive to m		
	the resources for low-income people enabling them to build personal and financial assets and have safe and	эпогааріе	
2	housing Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		<u> </u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exempt purpose achievements for each of the organization's three largest program services by exempt purpose achievements for each of the organization or the organization of the organization of the organization of the organization of the organization or the organization of the organization or the organization of the organization of the organization or the organization of the organization or the organization of the org		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	of grants and	d
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
_	(O.). (C.). (C		
4 a	(Code) (Expenses \$ 220,611 including grants of \$ 170,950) (Revenue \$		
	The Community Development Collaboratives administered by NP pool resources to provide operating support to Oregon community development corporations. This funding		
	supported 25 organizations in Oregon. This collaborative structure assisted these		
	organizations in developing benchmarks for success, monitoring progress, and		
	addressing organizational challenges		
	•		
	•••••••••••••••••••••••••••••••••••••••		
4b	(Code) (Expenses \$ 1,786,157 including grants of \$ 892,032) (Revenue \$	751,	979)
	Bridges to Housing Program - NP coordinates and administers an innovative four county, two state effort		
	to alleviate family homelessness. The program significantly impacts the lives of the homeless families		
	it serves in the Portland-metropolitan region. Families improve their stability and make progress towards		
	and employment and children's well-being Bridges to Housing served 200 families in the four-county		
	Portland metropolitan area in the year 2008-2009		
			
4c	(Code) (Expenses \$ 196,028 including grants of \$ 108,805) (Revenue \$	45,	829)
	The Resident Services Program makes resources and technical assistance available to organizations		
	providing housing plus services and seeks to measure individual outcomes (better grades in school,		
	financial literacy) and system-related outcomes (lower involuntary turnover, lower maintenance costs) A total of \$108,805 in grants was provided to three organizations		
	A total of \$108,805 in grants was provided to three organizations		

	(Code	/ (Expenses w	SO, OZO moladnig g	iants σι ψ του,ους / (,0,020,
	The Resident Services	Program makes resource	es and technical as	ssistance available to organiza	ations	
	providing housing plus	services and seeks to m	easure individual o	utcomes (better grades in sch	ool	-
				turnover, lower maintenance	cosis)	
	A total of \$108,805 in o	grants was provided to the	rree organizations			
					· · · · · · · · · · · · · · · · · · ·	
4d	Other program service	s (Describe in Schedule	0)			
	(Expenses \$	547,846 including gr	ants of \$	25.000) (Revenue \$	367,217)	
4-						
<u>4e</u>	Total program servic	e expenses - 3	2,750,642	(Must equal Part IX, Line	25, COIUMIN (B))	
						Form 990 (2008)

Checklist of Required Schedules Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?

- 3 Did the organization required to complete scriedule b, scriedule of contributors?
 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*
- 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 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
- 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
- 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
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 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
- 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 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, IX, or X as applicable
- 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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the U S?
 - **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
- 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? If "Yes," complete Schedule F, Part II
- 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? If "Yes," complete Schedule F, Part III
- 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H
- 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
- 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
- 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J
- 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
 - b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
 - 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?
 - d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?
- 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
 - **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*
- 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
- 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

		Yes	No
	1	X	
ļ	2	X	
	3		Х
		.,	
	4	Х	
	5		
	6		х
	7		X
	8		х
Ì			
		İ	
	9		X
	10		X
	11	х	
		х	
	12	Х	
	13		X
	14a		X
	14b		x
	15		X
	16		×
	17		X
11	18		X X X X
	19		X
	20		Х
	21	Х	
	22		Х
	23		x
	24a		х
	24b	ļ	
	24c		
	24d		
	25a		х
	25b		X
	26	_	x
	i	I	ļ .

Part IV Checklist of Required Schedules (continued)

- 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee
- a 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
- b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV
- 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
- Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M
- 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M
- 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,
- 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II
- 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I
- 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1
- 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2
- 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2
- 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

	Yes	No
	± 1	1
28a		_X_
28b		х
28c		X
29	<u> </u>	<u> </u>
30		Х
31		х
32		x
33		х
34		х
35		х
36		х
37	<u> </u>	<u> X</u>
Form	990	(2008)

Page 4

Par	V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U S Information Returns Enter -0- if not applicable 1a 28			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١
	account)?	4a		X
þ	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			l ,
٥-	Regarding Prohibited Tax Shelter Transaction?	5c 6a		X
6a	Did the organization solicit any contributions that were not tax deductible?	oa_	<u> </u>	 ^
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	90		
7	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
а	\$75?	7a - 7		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	l	 ^`
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		İ	,
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Х	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h	X	
8	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?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
10	Section 501(c)(7) organizations. Enter			
а	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			1
40-	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	-	
<u>b</u> _	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	l	L	i

Form 990 (2008) Neighborhood Partnerships, Inc. 91-1943624 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions 1a Enter the number of voting members of the governing body Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a Χ Each committee with authority to act on behalf of the governing body? 8b 9a 9a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 11 Section B. Policies Yes No 12a Does the organization have a written conflict of interest policy? If "No." go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b

С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Χ	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	er one		l
а	The organization's CEO, Executive Director, or top management official?	15a	Х	
b	Other officers or key employees of the organization?	15b	Х	<u> </u>
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," 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		
500	tion C. Disalogues			

<u>Sec</u>	tion C. Disclosure
17	List the states with which a copy of this Form 990 is required to be filed ▶ OR
18	Section 6104 requires an organization to make its Forms 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
	X Own website
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
20	State the name, physical address, and telephone number of the person who possesses the books and records of the

Michael Fuss (506) 226-3001

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
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)							(D)	(E)	(F)
Name and Title	Average	Position (check all that apply				Reportable	Reportable	Estimated		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JEAN TATE MEMBER	1	х						0	0	0
MIKE BARR MEMBER	1	х						0	0	0
BRUCE DOBBS MEMBER	1	х						0	0	0
BRIAN STEWART MEMBER	1	х						0	0	0
BERNIE KRONBERGER TREAS	1			X				0	0	0
DANIEL ROBERTSON CHAIR	1			X				0	0	0
LYNN SCHOESSLER SEC	1			х				0	0	0
JANET BYRD EXEC DIR	40			х				77,219	0	18,209
MICHAEL FUSS FINANCE DIR	23			Х				45,403	0	16,762
	0							0	0	0
	0							0	0	0
	0							0	. 0	0
	0			į				0	0	0
	0							0	0	0
	0							0	0	0
	0							0	0	0
	0							0	0	0

Part VII Section A. Officers, Directors, Tru	ıstees, Key Em	ploy	ees,	and	Hig	hest	Cor	npensated Em	ployees (continu	
(A)	(B)	l l							(E)	(F)
Name and title	Average hours per week	or director		(chec Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	0							0	0	0
	0							0	0	0
	0							0	0	0
	0							0	0	0
	0							0	0	0
	0							.0	0	0
	0							0	0	0
	0							0	0	0
	0							0	0	0
	0							0	0	. 0
	0							0	0	0
	0							0	0	0
	0							0	0	0
1b Total							•	122,622	0	34,971
2 Total number of individuals (including those organization ► 0	ın 1a) who rece	ived	more	e tha	n \$1	00,0	00 ın	reportable com	pensation from	the Yes No.

3	employee on line 1a? If "Yes," complete Schedule J for such individual	3	~ ~~ ~~	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		X
				1

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

Section	R	In	de	pender	nt Cont	tractors

compensation from the organization

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

Na	(A) me and business address	(B) Description of services	(C) Compensation
Portland Impact	PO Box 33530 Portland OR 97292	Social Services	309,882
Portland State University	PO Box 751 Portland OR 97201	Program Evaluation	220,109
Human Solutions	12350 SE Powell Portland OR 97236	Social Services	206,784
Central City Concern	232 NW 6th Portland OR 97209	Social Services	133,471
=			0
Total number of independent	contractors (including those in 1) who received i	more than \$100,000 in	

Part	: VIII	Statement of Revenue					\perp			
						(A) Total revenue		(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>8</u> 8	1a	Federated campaigns		1a	0	 	十	revenue		312, 310, 01 314
ant	b.a	Membership dues	ŀ	1b	0		-			
g QL		•	ŀ	1c	0					
fts	0	Fundraising events	ŀ							1
, gi	d	Related organizations		1d	0					
Sir	e	Government grants (contributions)		1e	0					
utic	T	All other contributions, gifts, grants,			= =					
e ii		similar amounts not included above		1f	447,744					,
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in li	nes 1a-	1f \$	0					.l."
	_ h	Total. Add lines 1a-1f				447,74	44	, , ,		
Program Service Revenue	_				Business Code				<u> </u>	-
9.6	2a	Training and other fees			611710	2,9		2,971		
ě	b	Government contracts and fees			813000	827,9		827,979		<u> </u>
Š	С	State IDA program fees			813000	329,48	\neg	329,483		
Sei	d						이			<u> </u>
щe.	е						이			
.go	f	All other program service revenue					0			
	g	Total. Add lines 2a–2f			<u> </u>	1,160,4	33	,		, , ,
	3	Investment income (including divide	ends, inte	erest, ar	nd	•				
		other similar amounts)			>	27,6	77	27,677		
	4	Income from investment of tax-exer	npt bond	d procee	eds >		0	_		
	5	Royalties			•		0			
			(1)	Real	(II) Personal	* * *	٠	43 13 4 4 2		
	6a	Gross Rents				30 ,				
	b	Less rental expenses	·					7 () 12		
	С	Rental income or (loss)		(0 0					
	d	Net rental income or (loss)			>		0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	7a		(ı) Se	cunties	(II) Other	× ,	1	3 , 2		
		assets other than inventory		() <u> </u>	5	1		* * * * *	7.7.
	b	Less cost or other basis						ř		
		and sales expenses		(ol d			. *		
	С	Gain or (loss)		(*		
	d	Net gain or (loss)			•		o	w u - u - u		
	8a	Gross income from fundraising					,			2.
enne		events (not including \$	0					•		1
/er		of contributions reported on line 1c)				İ				,
Se,		See Part IV, line 18		а		ol .				
<u>-</u>	ь	Less direct expenses		b		5				
Other Rev		Net income or (loss) from fundraisin	na event		•		اة			
J		Gross income from gaming activities	-	-			Ť			
		See Part IV, line 19		а					:	a
	ь	Less direct expenses		b		5				6
		Net income or (loss) from gaming a	ctivities	_	•		0			†
		Gross sales of inventory, less					Ť			
		returns and allowances		а						
	b	Less cost of goods sold		b		5				
		Net income or (loss) from sales of ir	nventory	,			ō		m - 19 northannath 19 n	
		Miscellaneous Revenue			Business Code		十			,
	11a						ō			
	b						0			
	С						0			
	d	All other revenue					0			
	е	Total. Add lines 11a-11d			•		0			
	12	Total Revenue. Add lines 1h, 2g, 3	, 4, 5, 6	d, 7d, 8d	; ,		T			
		9c, 10c, and 11e			▶	1,635,8	54	1,188,110		0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column	(A) but are not requ	uired to complete o	columns (B), (C), and	I (D).
	not include amounts reported on lines 6b, 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	1,196,787	1,196,787		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments,		ŀ		ŧ
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16	<u> </u>			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	127,914	88,061	36,755	3,098
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0	105.101	22.222	0.405
7	Other salaries and wages	199,535	165,481	30,929	3,125
8.	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	23,284	18,354	4,640	290
9	Other employee benefits	58,197	45,328	11,901	968
10	Payroll taxes	26,145	20,199	5,463	483
11	Fees for services (non-employees)	ا			
а	Management	0			
b	Legal	0	0.744	2.050	200
C	Accounting	13,130	9,714	3,056	360
d	Lobbying	28,400	28,400		0
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0	4 004 500	2440	440
g	Other	1,067,829	1,064,563	3,118	148
12	Advertising and promotion	0 7700	0.000	4.000	
13	Office expenses	3,723	2,339	1,330	54
14	Information technology	17,636	16,259	1,260	117
15	Royalties	0		0.000	
16	Occupancy	29,644	22,395	6,622	627
17	Travel	7,010	6,668	334	8
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	0	24 005	4 275	
19	Conferences, conventions, and meetings	23,360	21,985	1,375	0
20	Interest Payments to affiliate a	0	0	0	0
21	Payments to affiliates	`			
22	Depreciation, depletion, and amortization	16,139 3,866	15,047 2,923	989 856	103 87
23 24	Insurance Other expenses Itemize expenses not	3,000	2,923	000	0/
24	, , , , , , , , , , , , , , , , , , ,				ě.
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
_	Talanhara	5,201	4,103	1,006	92
a	Telephone	5,201	4,103	252	60
þ	Printing	10,764	9,874	847	43
۲ 2	Printing Facility rental - trainings	4,901	4,901	0	43
d e	Pacility rental - trainings Other	4,901	2,325	1,683	66
f	All other expenses	4,074	2,323	1,005	
-	Total functional expenses. Add lines 1 through 24f	2,872,787	2,750,642	112,416	9,729
25		2,012,101	2,730,042	112,410	3,123
26	Joint Costs. Check here ► if following	1			
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined			j	
	educational campaign and fundraising				
	solicitation				Form 990 (2008)

Pa	art X	Balance Sheet							
					(A) Beginning of year			(B) of year	
	1	Cash-non-interest-bearing		·	30,041	1			1,279
	2	Savings and temporary cash investments			5,780,318	2			8,376
	3	Pledges and grants receivable, net		<u> </u>	921,205				8,474
	4	Accounts receivable, net		-	921,203				0,265
			d	ara truataga kay	U	-			0,203
	5	Receivables from current and former officers,				_			•
	_	employees, or other related parties Complete			0	5			0
	6	Receivables from other disqualified persons (
		4958(f)(1)) and persons described in section 4	4958(C	:)(3)(B) Complete					
		Part II of Schedule L		-	<u> </u>	6			0
ets	7	Notes and loans receivable, net			0	7			0
SS	8	Inventories for sale or use				8			
⋖	9	Prepaid expenses and deferred charges			55,233	9		16	0,942
	10a	Land, buildings, and equipment cost basis	10a	133,421					
	b	Less accumulated depreciation Complete]					
		Part VI of Schedule D	10b	98,733	49,641	10c		3	34,688
	11	Investments-publicly traded securities			0	11			0
Net Assets or Fund Balances Liabilities Assets	12	Investments-other securities See Part IV, line	e 11		0	12			0
	13	Investments-program-related See Part IV, Irr	0	_			0		
	14	Intangible assets		14					
	15	Other assets See Part IV, line 11		ļ-	0	15			0
	16	Total assets. Add lines 1 through 15 (must e	سا اجتنت	ne 34\	6,836,438	16		1 51	14,024
	17		quai iii	16 34)	71,451	_			0,093
	1	Accounts payable and accrued expenses		-					
	18	Grants payable		 -	4,800,370				10,262
	19	Deferred revenue		-	14,059		-	17	71,409
	20	Tax-exempt bond liabilities			0	20	ļ		0
iabilities	21	Escrow account liability Complete Part IV of Schedule D				21			
	22	Payables to current and former officers, directors, trustees, key				>			
		employees, highest compensated employees, and disqualified							
_		persons Complete Part II of Schedule L		<u> </u>	0	22			0
	23	Secured mortgages and notes payable to unr	elated	third parties	0	23			0
	24	Unsecured notes and loans payable			0	24			0
	25	Other liabilities Complete Part X of Schedule	D		19,177	25		1	17,812
	26	Total liabilities. Add lines 17 through 25			4,905,057	26		3,81	19,576
		Organizations that follow SFAS 117, check	here	▶ X and					
es		complete lines 27 through 29, and lines 33							
nc			u	-	204 220	27	·		
	27	Unrestricted net assets		 	201,238				12,774
<u> </u>	28	Temporarily restricted net assets		F	1,730,143			46	31,674
Ę	29	Permanently restricted net assets				29			
Ę		Organizations that do not follow SFAS 117	, chec	k here ▶					
ō		and complete lines 30 through 34.		_			ŀ		
ets	30	Capital stock or trust principal, or current fund	s	1		30			
88	31	Paid-in or capital surplus, or land, building, or		ment fund		31			
۲	32	Retained earnings, endowment, accumulated				32			
Š	33	Total net assets or fund balances	1110011	le, or other farida	1,931,381	33		60	94,448
	l			-	6,836,438		-		14,024
Da	34 rt XI	Total liabilities and net assets/fund balances Financial Statements and Reporting			0,630,436	34	<u> </u>	4,5	14,024
Га	ıığı	Financial Statements and Reporting						Yes	No
4	۸.	percenting method wood to proper the Form 000	、	Cash X Accrua	al Other			103	 ""
1		counting method used to prepare the Form 990					-		v-
2		ere the organization's financial statements com	-	•			2a		X
		ere the organization's financial statements audi	-				2b	<u> </u>	
("Yes" to lines 2a or 2b, does the organization h				ght of			
		idit, review, or compilation of its financial staten		·			_20	<u> </u>	₩
3		s a result of a federal award, was the organizati	on req	uired to undergo an aud	it or audits as set forth i	n			
		e Single Audit Act and OMB Circular A-133?					3a		X
	b If'	"Yes," did the organization undergo the require	d audit	t or audits?			3b		
								Form 991	0 (0000)

SCHEDULE A (Form 990 or 990-EZ)

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 91-1943624 Neighborhood Partnerships, Inc. Reason for Public Charity Status (All organizations must complete this part) (see instructions) The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross Q receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated d Type III-Other By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box. Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the organizations the organization supports (iii) Type of organization (iv) is the organization (vi) Is the (vii) Amount of (v) Did you notify (ii) EIN (i) Name of supported (described on lines 1-9 in col (i) listed in your the organization in organization in col support organization above or IRC section governing document? col.(i) of your (i) organized in the (see instructions)) US? support? Yes Yes Yes No No No 0 0 0 0 0

Total

	ule A (Form 990 or 990-EZ) 2008 Neighborhood l					91-194362	
Par					!)(A)(iv) and	170(b)(1)(A)(vi)
	(Complete only if you checked	the box on line	5, /, or 8 of	Part I)			
	ion A. Public Support Indar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
		(a) 2004	(b) 2005	(6) 2000	(u) 2007	(e) 2006	(i) iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants")	اه	0	o			0
2	Tax revenues levied for the organization's	<u> </u>					
-	benefit and either paid to or expended on	f					
	its behalf	l ol	o	o			0
3	The value of services or facilities						
	furnished by a governmental unit to the]	
	organization without charge	o	0	0			0
4	Total Add lines 1-3	o	0	o	0	О	0
5	The portion of total contributions by each	1	-		` , , }		
	person (other than a governmental unit				* 4	* ;	
	or publicly supported organization)				35	* ,	
	included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			· .			
6	Public support. Subtract line 5 from line 4				· · · · · · · · · · · · · · · · · · ·	., .	0
	ion B. Total Support	.	·			<u> </u>	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	0	0	0	0		0
8	Gross income from interest, dividends,	<u>_</u>		J		- 	<u>_</u>
	payments received on securities loans,						
	rents, royalties and income from similar						
_	sources	0	0	0			0
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on					:	0
10	Other income Do not include gain or						
	loss from the sale of capital assets					i	
	(Explain in Part IV)	0	0	0			0
11	Total support. Add lines 7 through 10	<i>></i> *	* * \$ < }	», }	∜ ≈>∮ :		0
12	Gross receipts from related activities, etc (s		='			12	
13	First five years. If the Form 990 is for the o	rganızatıon's firs	st, second, thir	d, fourth, or fift	h tax year as a	section 501(c)	(3)
	organization, check this box and stop here	· <u> </u>					
	ion C. Computation of Public Support		11 1 44	1 (0)			0.000/
14	Public support percentage for 2008 (line 6, c			column (f))		14	0 00%
15	Public support percentage from 2007 School			line 12 and lin	. 14 22 1/20	15 / as mará shaa	0 00%
16a	33 1/3% support test-2008. If the organiza and stop here. The organization qualifies as				2 14 IS 33 1/37	% of more, chec	K this dox
b	33 1/3% support test-2007. If the organization		_		nd line 15 ie 33	3 1/3% or more	check this
	box and stop here. The organization qualifie				10 IIIIC 10 13 00	, 175 70 OI IIIOIE,	► □
17a	10%-facts-and-circumstances-test-2008.				e 13, 16a, or 1	16b. and line 14	ıs 10%
	or more, and if the organization meets the "f						
	the organization meets the "facts-and-circum	nstances" test	The organizati	on qualifies as	a publicly supp	oorted organiza	tion ▶ 🔲
b	10%-facts-and-circumstances test-2007.						
	or more, and if the organization meets the "f				-	•	
	the organization meets the "facts-and-circun	nstances" test	The organizati	on qualifies as	a publicly supp	oorted organiza	tion ▶ 🔲
18	Private foundation. If the organization did not ch	eck a box on line	13, 16a, 16b, 1	7a ,or 17b, checl	this box and se	ee instructions	▶ 🗀

Schedule A (Form 990 or 990-EZ) 2008 Neighborhood Partnerships, Inc. 91-1943624 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not 1,020,457 1,636,173 2,316,379 1.036.726 447,744 include any "unusual grants") 6,457,479 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 36,558 61,780 362.424 1.127.917 1.160.433 organization's tax-exempt purpose 2,749,112 Gross receipts from activities that are not an unrelated trade or business under section 513 0 Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 1.057.015 1.697.953 2.678.803 2.164.643 1.608.177 9.206.591 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 0 b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for 0 the year or \$5,000 0 0 c Add lines 7a and 7b Public support (Subtract line 7c from 9,206,591 Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2007 (e) 2008 (a) 2004 **(b)** 2005 (c) 2006 (f) Total 1,057,015 1.697.953 2,678,803 2,164,643 1,608,177 9,206,591 Amounts from line 6 10a Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b.

- whether or not the business is regularly carried on Other income Do not include gain or
- loss from the sale of capital assets (Explain in Part IV)
- 13 Total support. (Add lines 9, 10c, 11,

organization, check this box and stop here

rents, royalties and income from similar						
sources	7,703	11,375	26,088	46,899	27,677	119,742
Unrelated business taxable income (less						
section 511 taxes) from businesses						
acquired after June 30, 1975						0
Add lines 10a and 10b	7,703	11,375	26,088	46,899	27,677	119,742
Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly						
carried on						0
Other income Do not include gain or						
loss from the sale of capital assets						
(Explain in Part IV)	0	6,940	0			6,940
Total support. (Add lines 9, 10c, 11,						
and 12)						9,333,273
First five years. If the Form 990 is for the or	ganization's firs	t, second, third	, fourth, or fifth	tax year as a	section 501(c)(3)

Sec	ction C. Computation of Public Support Percentage		
15	Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	98 64%
16	Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	99 04%
Sec	ction D. Computation of Investment Income Percentage		
17	Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	1 28%
18	Investment income percentage from 2007 Schedule A. Part IV-A. line 27h	18	0 77%

19a	33 1/3% support tests-2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 1	17 is	·
	not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	ightharpoons	X
b	33 1/3% support 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	\blacktriangleright	

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047
2008
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• S	ection 501(c)(4), (5), or (6) or	ganizations Complete Part III			
Na	ame of organization			Empl	oyer identification number
Neig	hborhood Partnerships, In			91-19	
Pa	rt I-A To be compl	eted by all organizations exem	pt under sectio	on 501(c) and sectio	n 527 organizations.
		actions for Schedule C for details			
1	•	the organization's direct and indirect	political campaigi	n activities in Part IV	
2	Political expenditures			•	\$
3	Volunteer hours				
Pa	rt I-B To be compl	eted by all organizations exem	nt under sectio	on 501(c)(3)	
		actions for Schedule C for details.	-	55 .(5)(5).	
1		excise tax incurred by the organization		4955 ▶	\$ 0
2		excise tax incurred by organization r			\$ 0
3		ed a section 4955 tax, did it file Form	_		Yes No
4a	Was a correction made?			•	Yes No
b	If "Yes," describe in Part				
		eted by all organizations exem	pt under section	on 501(c), except se	ction 501(c)(3).
		uctions for Schedule C for details			,
1	Enter the amount directly	y expended by the filing organization	for section 527 e	xempt function	
	activities			•	\$
2		filing organization's funds contributed	d to other organiz	ations	
	for section 527 exempt f			•	\$
3		ct exempt function expenditures Add	d lines 1 and 2 an	d enter here and	
	on Form 1120-POL, line			•	\$0
4		n file Form 1120-POL for this year?			Yes No
5		sses and employer identification num			
		inter the amount paid and indicate if the received and promptly and directly			
		id or a political action committee (PA			
				(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
					0 0
				ŀ	
	<u> </u>				0 0
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				-	0 0
					0
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					<u>o</u>

Page 2

ghborhood Partnerships, Inc	91-19436

F		nizations exempt under section 501(c)(3) to 01(h)). See the instructions for Schedule C for		
		belongs to an affiliated group	- dotailo	
В		checked box A and "limited control" provision	s apply.	
		bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	7,259	0
b	Total lobbying expenditures to influence	•	31,334	0
С	Total lobbying expenditures (add lines 1a	a and 1b)	38,593	0
d	Other exempt purpose expenditures	•	2,834,194	0
е	Total exempt purpose expenditures (add	lines 1c and 1d)	2,872,787	0
f	Lobbying nontaxable amount Enter the	amount from the following table in both		
	columns		293,639	0
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	, , , , , , , , , , , , , , , , , , ,	
	Not over \$500,000	20% of the amount on line 1e	*	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	, 1	
	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		₩1. _{2.3} 3. •
g	Grassroots nontaxable amount (enter 25	% of line 1f)	73,410	0
h	Subtract line 1g from line 1a Enter -0- if	line g is more than line a	0	0
i	Subtract line 1f from line 1c Enter -0- if I	ine f is more than line c	0	_ 0
j	If there is an amount other than zero on section 4911 tax for this year?	either line 1h or line 1i, did the organization file Fo	rm 4720 reporting	Yes No
		ear Averaging Period Under Section 501(h)	omplete all of the five	

(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 2a through 2f of the instructions.)

	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	229,716	250,601	294,374	293,639	1,068,330				
b	Lobbying ceiling amount (150% of line 2a, column(e))	* **		\$	*	1,602,495				
С	Total lobbying expenditures	50,195	31,303	47,312	38,593	167,403				
d	Grassroots non-taxable amount	57,429	62,650	73,594	73,410	267,083				
е	Grassroots ceiling amount (150% of line 2d, column (e))					400,625				
f	Grassroots lobbying expenditures	45,080	2,386	22,192	7,259	76,917				

Schedule C (Form 990 or 990-EZ) 2008

	5768 (election under section 501(h)). See the instructions for Schedule C for	1			(b)	
		Yes	No	Δ	(b) mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local	-				
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
_	Volunteers?					
a			-			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>			
C	Media advertisements?					
d	Mailings to members, legislators, or the public?		<u> </u>			
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?	<u> </u>	<u> </u>			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>			
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 1i					0
2a				ļ		
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	l				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u>.</u>		
Par	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion 5	01(c)	(5), oi	•	
	section 501(c)(6). See the instructions for Schedule C for details					
				-	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	†	
	t III-B To be completed by all organizations exempt under section 501(c)(4), sec	tion 5	01/c	(5) 0	'	
ı a	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No"					
	question 3 is answered "Yes." See Schedule C instructions for details.	O		,		
	Dues, assessments and similar amounts from members		T 1	ľ		
1	·		 			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of					
	political expenses for which the section 527(f) tax was paid).					
a	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c	-		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	S	3	ļ		
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_	_		0
Par	IV Supplemental Information					
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line	5 and	Part I	LB line	ו1 ב	
	complete this part for any additional information	o, and	· arti	1-D, III N	, 11	
	· · · · · · · · · · · · · · · · · · ·	orooto	•			
Part	I-A Line 1 Neighborhood Partnerships works at the state legislative level to pass legislation which of	reales				
	dunity for law magness Organization Over offerto force on localistics in this primary issues are					
oppo	rtunity for low income Oregonians. Our efforts focus on legislation in two primary issue areas					
offer	deble housing and asset building. All of our activities are non-nations. Marghborhood					
alion	dable housing and asset building. All of our activities are non-partisan. Neighborhood					
Da-	varshins novar andorsas candidates					
ranti	nerships never endorses candidates					
1	alabase and with taken the form of higher labbasets to announce the same about a material with					
regis	slative activity takes the form of hiring lobbyists to represent our issues, direct contact with			• • • • •		
lec:-	laters and their staff arrangement and delivery of the transfer to a constitution and the according to					
iegis	ators and their staff, preparation and delivery of testimony to committees, and the coordination					

Part IV	Supplemental Information (continued)	
of grassroot	ets participation and communication	
		•

SCHEDULE D (Form 990)

Supplemental Financial Statements

20**08**

Department of the Treasury
Internal Revenue Service
Name of the organization

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.

Open to Public Inspection

Name	of the organization			Employer	identification number
Neial	nborhood Partnerships, Inc	_	g	91 <u>-19436</u>	524
Par		or Advised Funds or Other Simila			
	the organization answered "Yes" t	o Form 990, Part IV, line 6			
		(a) Donor advised funds		(b) Fu	inds 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	<u> </u>			
5	Did the organization inform all donors and d	onor advisors in writing that the assets	held ın d	lonor ad	vised
	funds are the organization's property, subject				∐ Yes ∐ No
6	Did the organization inform all grantees, dor				be
	used only for charitable purposes and not fo	r the benefit of the donor or donor advis	sor or otl	her	
	impermissible private benefit?				Yes No
Par	Conservation Easements. Comp	lete if the organization answered "Y	es" to l	Form 99	00, Part IV, line 7
1	Purpose(s) of conservation easements held	by the organization (check all that appl	y)		
	Preservation of land for public use (e.g.	·		ın histori	cally important land area
	Protection of natural habitat	Preserva	ition of c	ertified b	nistoric structure
	=				
2	Preservation of open space Complete lines 2a–2d if the organization hel	d a gualified concentation contribution	n the for	m of a c	onconvation easement
2	on the last day of the tax year	d a qualified conservation contribution	iii tiie ioi	iiii oi a c	onservation easement
	on the last day of the tax year				Held at the End of the Year
а	Total number of conservation easements			2a	Held at the Lild of the Teal
b	Total acreage restricted by conservation eas	sements		2b	
c	Number of conservation easements on a ce			2c	
d	Number of conservation easements included			2d	
3	Number of conservation easements modifie		or termin	ated by	the organization
•	during the taxable year			,	
4	Number of states where property subject to	conservation easement is located	>		
5	Does the organization have a written policy		ection, vi	olations	, and
	enforcement of the conservation easements				Yes No
6	Staff or volunteer hours devoted to monitorii	ng, inspecting, and enforcing easement	s during	the yea	r •
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing easements d	luring the	e year	▶ \$
8	Does each conservation easement reported	on line 2(d) above satisfy the requirem	ents of s	section	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?				∐ Yes ∐ No
9	In Part XIV, describe how the organization re	eports conservation easements in its re	venue a	nd expe	nse statement, and
	balance sheet, and include, if applicable, the	_	i's financ	cial state	ments that describes
	the organization's accounting for conservation				
Par		ons of Art, Historical Treasures, or O	ther Sin	nilar As	sets.
	Complete if the organization answere	<u> </u>			
1a					
	art, historical treasures, or other similar assessivice, provide, in Part XIV, the text of the				
L	If the organization elected, as permitted und				
b	historical treasures, or other similar assets h				
	service, provide the following amounts relati		esearch	in luitin	stance of public
	•	·			► •
	(i) Revenues included in Form 990, Part VII	i, line T			\$
•	(ii) Assets included in Form 990, Part X			las Enri	▶ \$
2	If the organization received or held works of		assets	ior rinar	iciai gain, provide the
_	following amounts required to be reported u	_			▶ ¢
a	Revenues included in Form 990, Part VIII, II	iic i			\$
b	Assets included in Form 990, Part X				- φ

_	4
Page	

Part	ш	Organizations Maintaining	d Collections of	Aπ,	HIST	orical i	reasures,	or Oti	ner Similar As	sets (continue	<u>;a)</u>
3	Using	the organization's accession	and other records,	che	ck any	of the f	ollowing tha	at are a	significant use	of its collection	
	<u>items</u>	(check all that apply)									
а		Public exhibition		d		Loan	or exchange	progra	ams		
b	同	Scholarly research		е	\Box	Other					
С	Ħ	Preservation for future genera	ations								
4	Provide Part	de a description of the organiz		and (explai	n how th	ney further t	he orga	anızatıon's exem	pt purpose in	
5	Durin	g the year, did the organization s to be sold to raise funds rath								☐ Yes ☐	No
Part	IV	Trust, Escrow and Custo						on ans	swered tes lo	5 FOIII 990,	
	1 11	Part IV, line 9, or reported							h		
та		organization an agent, trustee ded on Form 990, Part X?	, custodian or oth	erini	erme	diary for	Contribution	ns or ot	ner assets not	☐Yes☐	No
b		s," explain the arrangement in	Part XIV and com	plete	the f	ollowina	table				
-	., .	o, oxplain the all all germent in		٠,٠٠٠		9			A	mount	
С	Begin	nning balance						1c			
d		ions during the year						1d			
e		butions during the year						1e			
f		ng balance						1f		-	0
		ne organization include an amo	ount on Form 000	Dort	Y lin	0 212		<u> </u>		Yes X	No
2a		•		rait	^ , iiii	5211				☐ ies [X]	140
b Part		s," explain the arrangement in Endowment Funds. Com	plete if organiza	tion		ered "V	es" to For	m gan	Part IV line 1	n	
rait	V	Endowment Funds. Com	(a) Current year		(b) Prio		(c) Two year		(d) Three years bac		
4-	Pogur	anna of year halance	(a) Current year	V. 8	(D) F 110	year		, (Si)	(a) Thice years bac	(c) rour years i	#*: ,
1a	_	nning of year balance		1 7					·	·	4
b		ributions		,				*			
C		tment earnings or losses		-		** 6 .**		p	123		
d		ts or scholarships		\$ Y	*	, ,,	* '				
е		expenditures for facilities		2 3				::14	i.	1 % % .	
	-	programs	-	 			7 °C			4 8 4	
f		nistrative expenses	0					2 (3 , 3		.% %	· ~3
g		of year balance	_	1	bold		*/**9`; \$ \\$#	¥, ,	, «c	31	. «. »
2		de the estimated percentage o		ance	•	as					
a		d designated or quasi-endowm		-	%						
b	_	anent endowment	<u>"</u> %								
C 2-		endowment		ho o		otion the	at are hold :	and adi	ministered for the	•	
3a		nere endowment funds not in the	ne possession or t	ile o	ganız	auon in	at are rielu i	anu au	ministered for the	Yes	No
	-	nization by								3a(i)	140
	(i)	unrelated organizations								3a(ii)	
_	(ii)	related organizations is" to 3a(ii), are the related organic	anizations listed s	e r^~	urod	on Saha	adula P2			3b	
b		ribe in Part XIV the intended u								<u> </u>	
Part		Investments—Land, Buil						ert X li	ne 10		
r ar t	V I	Description of investment							Depreciation	(d) Book value	
		Description of Investment	(a) Cost or of (investn		isis		st or other s (other)	(6)	Depreciation	(d) Book value	
1a	Land				0		0				
b	Build	inas			0		ō		0		0
C		ehold improvements			ol		0		0		<u>_</u>
d		oment			0		133,421		98,733	34	,688
e	Other				<u></u>		0		0		0
		lines 1a–1e (Column (d) shou	uld equal Form 000) Pa		olumn (i		:))	▶	34	,688
<u>- 54</u>	<u></u>	inico la lo jodialili (u) silva	ia oqual i onii əəc	, , .		Sidiriii (I	<i>-,,</i>	//		adula D (Farm 990)	

Sched	dule D (Form 990) 2008					Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990	to Fir	nancial Stateme	ents		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		1,635,854
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		2,872,787
3	Excess or (deficit) for the year Subtract line 2 from line 1			3		-1,236,933
4	Net unrealized gains (losses) on investments			4		
5	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Prior period adjustments			7		
8	Other (Describe in Part XIV)			8		
9	Total adjustments (net) Add lines 4-8			9		0
10	Excess or (deficit) for the year per financial statements. Combine lines 3	and 9		10		-1,236,933
Par	t XII Reconciliation of Revenue per Audited Financial State	ments	With Revenue	рег	Return	
1	Total revenue, gains, and other support per audited financial statements				1	1,635,854
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a			•	
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d			_ 2	2e	0
3	Subtract line 2e from line 1				3	1,635,854
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			_	%	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		^	* `	
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4	lc	0
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, II	ine 12			5	1,635,854
Par	t XIII Reconciliation of Expenses per Audited Financial State	ement	s With Expense	es pe	er Return	
1	Total expenses and losses per audited financial statements			L	1	2,872,787
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a			<u> </u>	
b	Prior year adjustments	2b		* 2		
С	Losses reported on Form 990, Part IX, line 25	2c			1	
d	Other (Describe in Part XIV)	2d			*	
е	Add lines 2a through 2d			2	2e	0
3	Subtract line 2e from line 1				3	2,872,787
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			2		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b			: 🔏	
С	Add lines 4a and 4b			4	lc	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I,	line 18	3)		5	2,872,787
Par	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part	XIII, lır				
			·			
			·			
					· · · · · · · · · · · · · · · · · · ·	

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Attach to Form 990.

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

Employer identification number	Owe no 1545-044 2008 Open to Public Inspection	98 Public
	over identification number	

Neighborhood Partnerships, Inc	91-1943624	
Part I General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ssistance, and	_

X Yes Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? Part II

Part IV and Schedule I-1 (Form 990) if additional space is needed (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash	1-1 (Form 98	90) if additional sp (c) IRC section	grant	(f) M (g) Amount of non-cash (f) M	(f) Method of valuation	(g) Description of	(h) Purpose of grant
	NII (a)	if applicable	לבן אווסמון כו כמאו אומוני	assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
ACCESS 3630 AVIATION WAY MEDFORD	93-0655396	501(C)(3)	10,000	0			COMMUNITY DEV
CARITAS COMMUNITY HOUS CO	93-0386801	501(C)(3)	10,000	0			COMMUNITY DEV
IMPACT NORTHWEST PO BOX 33530 PORTLAND, OR	93-0557964	501(C)(3)	164,240	0			COMMUNITY DEV
CATHOLIC CHARITIES 231 SE 12TH AVE PORTLAND, d	93-0386801	501(C)(3)	15,000	0			COMMUNITY DEV
HUMAN SOLUTIONS 12350 SW POWELL PORTLAND,	93-0977166	501(C)(3)	143,220	0			COMMUNITY DEV
CLACKAMAS COMM LAND TRUS 2316 SE WILLARD ST MILWAUK	93-1262940	501(C)(3)	10,000	0			COMMUNITY DEV
COLUMBIA CASCADE HSG	94-3111736	501(C)(3)	10,000	0			COMMUNITY DEV
COMMUNITY ACTION TEAM 124 N 18TH STREET ST HELENS	93-0554156	501(C)(3)	10,000	Ö			COMMUNITY DEV
COMM PRTNRS FOR AFFORD H PO BOX 23206 TIGARD, OR 972	96-1155559	501(C)(3)	10,850	0			COMMUNITY DEV
FARMWORKER HOUS DEV 1274 5TH ST SUITE 1A WOODBU	93-1055994	501(C)(3)	10,000	0			COMMUNITY DEV
COMMUNITY ACTION 1001 SW BASLINE ST HILLSBOR	93-0554941	5019(C)(3)	205,112	0			COMMUNITY DEV
HDC OF NW OREGON 220 SE 12TH AVE STE A-100 HIL	93-0860753	501(C)(3)	10,850	0			COMMUNITY DEV

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

Schedule I (Form 990) 2008

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

SCHEDULE 1-1 (Form 990) Department of the Treasury Internal Revenue Service

Vame of the organization

Partl

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

20**08** Open to Publ Inspection

Employer identification number

OMB No 1545-0047

COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV COMMUNITY DEV (h) Purpose of grant or assistance Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 91-1943624 (f) Method of valuation (book, FMV, appraisal, other) $\overline{}$ $\overline{}$ 7 0 n (e) Amount of non-cash assistance 15,000 10,000 185,757 90,000 10,000 10,000 193,693 5,000 10,000 15,000 10,000 10,000 10,000 (d) Amount of cash grant (c) IRC Code section gov agency if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 93-6002286 93-1078543 91-1205119 93-0814473 93-1255589 93-1012211 PO BOX 7364 SALEM, OR 97303 94-3165033 93-1152592 280 KENNETH FORD DRIVE RO 93-0587136 93-1057208 93-1057208 93-1032897 93-0709787 (p) EIN 1220 SW MORRISON SUITE 805 657 SW MAIN ST DALLAS, OR 91 605 SE KANE ST ROSEBURG, O PO BOX 5848 EUGENE, OR 9740 PO BOX 1209 VANCOUVER, OR 2316 SE WILLARD ST MILWAUK 405 SW 6TH STREET REDMOND 6160 SW MAIN ST BEAVERTON, 257 SW MADISON AVE CORVAL 2051 KAEN ROAD OREGON CIT 180 E 18TH AVENUE EUGENE, (WILLAMETTE NEIGHBRHD HSG CLACKAMAS CO SOC SERVICE OREGON MICROENT NETWORK MAINSTREAM HOUSING INC METROPOLITAN AFFORD HOU Veighborhood Partnerships, Inc. (a) Name and address of organization TUALATIN VALLEY HOUS HOUSING WORKS POLK COMM DEV CORP NORTHWEST HOUS ALT or government SHARE UMPQUA CDC SALEM CDC

Enter total number of Section 501(c)(3) and government organizations Enter total number of other organizations

UCAN

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

Schedule I-1 (Form 990) 2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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. OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Neighborhood Partnerships, Inc.

Employer identification number

91-1943624

Form 990 Part VI Section B Line 15 Compensation for officers and key employees is determined by the Board of Directors as part of the annual budget process. Compensation of similar organizations is tracked through an annual community survey of compensation and benefits, and reviewed as part of the budget drafting process. The Board also conducts periodic performance reviews of the Executive Director and the Executive Director conducts periodic performance reviews of all staff including key employees Performance and dedication to the mission of the organization are considered in setting compensation rates Form 990 Part VI Section C Line 19 The audited financial statement is available on our website. The governing documents and conflict of interest policy are available upon request. There is a statement on our website that these documents are available upon request Form 990 Part VI Section A Line 10 The 990 is prepared by the CFO and reviewed again by the CFO. The accountant who reports to the CFO reviews the 990 in detail and corrections are made where necessary The CFO reviews the 990 again and then has the Executive Director review the 990. The 990 form is then electronically sent to the board of directors for their review and comments. The 990 form is then reviewed again by the CFO, accountant and Executive Director before the final form is sent to the IRS and to the state agencies and posted on the organization's website Form 990 Part VI Section B Line 12c The policies of the organization are reviewed annually by the board of directors and staff for revisions and compliance Compliance with the conflict of interest policy is regularly reviewed in the bi-monthly board meetings and monthly staff

meetings as business and organization activities are discussed

Part III, Line 4d (990) - Program Service Accomplishments
(Code) (Expenses \$ 81,332 including grants of \$ 15,000) (Revenue \$ 1,103)
Training programs for 2008-2009 included "Affordable Housing Management"
(38 participants), "Board and Staff Roles in Financial Management" -at three locations (44 participants),
Affordable Housing Financial Management (38 participants) "Making Good
Asset Management Decisions" (30 participants) Following the training
up to 82 hours of technical assistance was provided to the organizations attending
(Code) (Expenses \$ 315,531 including grants of \$ 10,000) (Revenue \$ 330,522)
NP is a nonprofit partner for the State of Oregon's Individual Development Account (IDA)
Tax Credit Program NP raises funds through the sale of tax credits that are used to match
individuals' savings towards higher education, a new home purchase, or a small business startup
The funds are utilized by a network of statewide partner organizations that provide
financial literacy training, enterprise development assistance, and homeownership counseling
In 2009 there were 382 program graduates and 569 individual development accounts opened
The program is active in 29 of 36 Oregon counties
Since 2002, there have been 1,165 graduates in total
Control 2002, Mario India 1900 I, 100 Mario Mario II
(Code) (Forestant) 450,000 molecular areas of \$ 0.0 (Poyonia \$ 25,500.)
(Code) (Expenses \$ 150,983 including grants of \$ 0) (Revenue \$ 35,592)
Policy and Advocacy Neighborhood Partnerships views supporting advocacy for improved
public policies as one of our highest impact areas on the lives of low income Oregonians
Redefining the industry messaging efforts has resulted in increased state financial
support for affordable housing. Through our efforts to preserve affordable housing the Oregon
legislature created a dedicated revenue source for affordable housing in 2009
(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
(Code) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

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Partnerships.
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Portland OR 91	r E	Part VII, Section B, Line 1 (990) - Hignest Compensated	. ⊓เษเทยธรา	_	maependent contractors				
Contractor's Name Business Street Address City State Central City Concern X 232 NW 6th Portland OR 97 Human Solutions X 12350 SE Powell Portland OR 97 Portland Impact X PO Box 33530 Portland OR 97 Portland State University X PO Box 751 Portland OR 97			Check If						
Central City Concern X 232 NW 6th Portland OR Human Solutions X 12350 SE Powell Portland OR Portland Impact X PO Box 33530 Portland OR Portland State University X PO Box 751 Portland OR Portland State University X PO Box 751 Portland OR		Contractor's Name	Business	Street Address	City	State	Zip Code	Foreign Country	Description of Services
Human Solutions X 12350 SE Powell Portland OR Portland Impact X PO Box 33530 Portland OR Portland State University X PO Box 751 Portland OR	-	Central City Concern	×	232 NW 6th	Portland	OR	97209		Social Services
Portland Impact X PO Box 33530 Portland OR Portland State University X PO Box 751 Portland OR OR OR Impact No. 1 Portland No.	7	Human Solutions	×	12350 SE Powell	Portland		97236		Social Services
Portland State University X PO Box 751 Portland OR	က	Portland Impact	×	PO Box 33530	Portland	l	97292		Social Services
5 6 7 8 8 9	4	Portland State University	×	PO Box 751	Portland	R	97201		Program Evaluation
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Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

		Cash		Non Cash
1	Federated Campaigns		1 _	
2	Membership dues		2 _	
3	Fundraising events		3 _	
4	Related organizations		4 _	
	Government grants (contributions)		5 _	
6	All other contributions, gifts, grants, and similar amounts not included above			
	INDIVIDUAL CONTRIBUTIONS	10,852	_	
	NON-PROFIT GRANTS	50,000	_	
	FOUNDATION GRANTS	330,250	_	
	OTHER GRANTS AND CONTRIBUTIONS	64,955	_	
	LESS FORFEITED GRANTS	-8,313	_	
	Other contributions total	447,744	6 _	0
_7	Total	447,744	7	0

Part IX, Line 22 (990) - Depreciation, Depletion, etc.

Part IX, Line 22 (990) - Depreciation, De	16,139	15,047	989	103
		(B)	(C)	103 (D)
	(A) Total	Program	Management	(D) Fundraising
Description 1 Furniture, Equipment and Fixtures	16,139	services 15,047	and general 989	103
Furniture, Equipment and Fixtures 2	10,139	15,047	909	103
3	0	1		
4	0			
5	0			
6	0			
7	0			
8	0		,.	· · · · · · · · · · · · · · · · · · ·
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36	O			
37	0			
38	0			
39	0			
40	0			
41	0			
42	0			

Part X, Line 3 (990) - Pledges and Grants Receivable

	L	Pledges and grant	s receivable	Allowance for dou	btful accounts
		Beginning	End	Beginning	End
1 Grants receivable	1 [921,205	328,474		
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
)	10				
1	11				
2 Total pledges and grants receivable	12	921,205	328,474	0	C

Part X, Line 4 (990) - Accounts Receivable

		Accounts red	ceivable	Allowance for dou	ubtful accounts
		Beginning	End	Beginning	End
1 Accounts Receivable	1 [0	20,265		
2	2				
;	3				1
	4		, , , , , , , , , , , , , , , , , , , ,		
	5				
	6				
	7				
	8				
)	9				
0	10				
1 Total accounts receivable	11	0	20,265	0	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

_			Hodocol			9. Accedo	1. 400AD	133,421	82,593	98,733	0	49,641	34,688
			Leasehold Improve-			Check if Investment	Check #	Cost/Other	Beginning Accumulated	Ending Accumulated	Disposals/	Beginning	Ending
	Land	Buildings	ments	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	Adjustments	Balance	Balance
				×				133,421	82,593	98,733	0	49,641	34,688
								0	0			0	0
								0	0			0	0
,								0	0			0	0
								0	0			0	0
								0	0			0	0
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								0	0			0	0
								0	0			0	0
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								0	0			0	0
								0	0			0	0
								0	0			0	0
								0	0			0	0

Part	X, Line 25 (990) - Other Liabilities	19,177	17,812
	Description	Beginning	End
1	Accrued payroll and vacation	19,177	17,812
2			
3			
4			
5			
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Neighborhood Partnership Fund Fixed Assets - Account #1800 Depreciation Schedule

Purchase Description	Total	Useful	Method	Fully per	Current	Total Accum	current	Total Accum	Current	Total Accum
1 lead Firms	2 206 45		3		1	200.45	nen nen	Cepi	nebi Cebi	nebi
02/04/05 Mem Committee	3,206 13		ส ส	×		3,206 15		3,206 15		3,206 15
OZ/O1/33 Ivew Computers	0,234 00	n ı	ส เ	×		6,234 00		6,234 00		6,234 00
201/95 bookcase	00 Let	n	<u>ار</u>	×		151 00		151 00		151 00
02/01/95 Install New Computer	260 00	2	ช	×		260 00		260 00		260 00
08/01/95 HP Laser Jet 4 Plus Prtr	2,207 10	s	ร	×		2,207 10		2,207 10		2,207 10
01/30/97 New Computer/Software	2,470 00	2	ช	×		2,470 00		2,470 00		2,470 00
01/30/97 Writing cable/jack	588 79	S	ร	×		588 79		588 79		588 79
02/07/97 Computer Hardware&Software	457 77	2	ร	×		457 77		457 77		457 77
02/07/97 Installation of phone line	360 00	S	ร	×		360 00		360 00		360 00
03/13/97 Desk and Credenza	2,031 51	2	S	×		2.031 51		2.031 51		2.031.51
07/24/97 Computer & Monitor	1,285 35	5	ร	×		1,285,35		1 285 35		1 285 35
10/14/97 Laptop Computer&Software	2,939.97	S	7	×		2 939 97		79 959 67		7 939 97
02/19/98 Computer	1.570 50	'n	8	: ×		1.570.50		1.570.50		1 570 50
03/06/98 New Phone System	529 00	2	ร	×		529 00		529 00		529 00
35/31/98 New Office Furniture	12,895 94	9	ร	×	2,682 52	10.213 41	2.682 53	12.895 94		12.895 94
07/01/98 Wardrobe & Overhead sys	1,860 00	5	ร	×	186 00	1.674 00	186 00	1,860,00		1,860,00
38/31/98 Computer	1,585 00	ღ	ร	×		1,585 00		1,585 00		1.585 00
39/28/98 Office Art	754 00	s	ร	×		754 00		754 00		754 00
12/31/98 Acctg Software-ACCPAC	3,420 00	ო	ร	×		3.420 00		3.420 00		3 420 00
01/20/99 Computer	1,079 00	က	S	×		1.079.00		1 079 00		1 079 00
01/20/99 Computer % Monitor	1.258 00	60	8	×		1 258 00		1 258 00		1 258 00
34/22/99 Computer	1.084.00	· (r)	, v.	; ×		1 084 00		1.084.00		1 084 00
04/25/99 Software-Office98 upgrade	1.095 00	, m	, 1	×		1 095 00		1 095 00		1 095 00
•	49,322 08				2.868 52	46,453.55	2.868 53	49.322.08		49 322 08
1999-2000 Additions										
10/20/99 Computer	1.637 00	m	8	×		1 637 00		1 637 00		1 637 00
01/28/99 Computer & Installation	2 102 75	e	7	*		2 102 75		2 102 75		2 102 75
02/28/00 Desk Chair	559 96	7	l 5	: ×	79 99	583.27	-23.31	559 96		550 06
02/29/00 Computer&Monitor	1 923 00		J 07	· >	}	1 923 00	3	1 023 00		0000
03/30/00 Copier-Pitney Rowes	2 900 00	ď	i v	(>		00 076,		00 000		00 000 3
03/28/00 Desk	650 00	۸ د	d 0	(>	85 78	00000		00 006,5		00 006,6
05/24/00 Software - Graphic & Accoac	1.319 00	. m	, v.	()	2	1 319 00		310 00		319 00
	63,413 79		3		3,014 27	60,568 58	2,845 22	63,413 79	(0 01)	63,413 79
2000-2001 Additions									•	
10/10/00 Laptop computer	1,099 99	က	ร	×		1,099 99		1.099 99		1 099 99
01/30/01 Computer Server	5,355 00	က	ß	×		5.355.00		5 355 00		5 355 00
02/27/01 Accpac Server Software	1,000 00	က	S	×		1 000 00		1 000 00		1,000,00
01/30/01 Server installation Labor	480 00		Ū	: >		00 087		00 000		000
Totals 6/30/01	71,348 78		3	,	3,014 27	68,503 57	2,845 22	71,348 78	(10 0)	71,348 78
2001-2002 Additions										
7/25/2001 Toshiba TDP-S2 Dig Proj/Camera	2,814 36	ß	SF	×	0	2,814 36	0	2,814 36		2,814 36
Totals 6/30/02	74,163 14			ļ	3,014 27	71,317 93	2 845 22	74,163 14	(0 01)	74,163 14
2003-2004 Additions										
//15/2003 Computer replacement-ruth	0000	u	•							

Neighborhood Partnership Fund Fixed Assets - Account #1800 Depreciation Schedule

Date of Purchase	Description	Total	Useful	Fully Method Depr	YRED 07 current	CRED 07 6/30/2007 current Total Accum	YRED 08 current	6/30/2008 Total Accum	YRED 09 Current Depr	6/30/2009 Total Accum
		74,822 92			3,146 23	3,146 23 71,845 77	2,977 18	74,822 94	(0 01)	74,822 94
2004-2005 Additions	ins		1	į						
8/31/2004 Compu	8/31/2004 Computer replacement -Cynthia	440 00	S.	ช	88 00	249 33	88 00	337 33	88 00	425 33
11/30/2004 Compu	11/30/2004 Computer replacement -Meg	415 00	သ	ಸ	83 00	214 42	83 00	297 42	83 00	380 42
		75,677 92			3,317 23	72,309 52	3,148 18	75,457 69	170 99	75,628 69
2005-2006 Additions	But									
11/15/2005 Epson 76c Projector	76c Projector	00 666	2	SL	199 80	324 80	199 80	724 40	199 80	924 20
2/28/2006 Color Printer	nnter	2,098 00	S	SI	419 60	229 60	419 60	1,398 80	419 60	1,818 40
6/9/2006 Phone System	System	3,804 04	7	SL	543 43	566 43	543 43	1,653 30	543 43	2,196 74
		82,578 96			4,480 06	73,760 35	4,31101	79,234 19	1,333 82	80,568 02
2006-2007 Additions	318									
NONE		000				100				
		82,578 96	ı		4.480 06	73,760 35	4.311 01	79,234 19	1,333,82	80,568 02
2007-2008 Additions	nas									
7/14/2007 Dell Computer-Exec Dir	mputer-Exec Dır	808 00	S	SL			148 13	148 13	161 60	309 73
9/28/2007 Copier/	9/28/2007 Copier/Printer/Fax - Imagistics	5,489 00	2	SL			823 35	823 35	1,097 80	1,921 15
11/1/2007 Dell Computer - Michael	mputer - Michael	518 00	S	S			20 69	20 69	103 60	172 67
3/27/2008 Server		7,042 00	S	S.			352 10	352 10	1,408 40	1,760 50
5/1/2008 IDA Software	tware	35,220 00	ო	S			1,956 67	1,956 67	11,740 00	13,696 67
6/14/2008 Computer - Cynthia	ter - Cynthia	578 00	2	SL			9 63	9 63	115 60	125 23
		132,233 96					96 699'2	82,593 14	15,960 82	98,553,97
2008-2009 Additions	PI-									
8/14/2008 Computer for Allson	ter for Alison	00 809	9	SL					111 47	111 47
12/14/2008 Computer for Kane	ter for Kane	579 00	2	S					67 55	67 55
								•	16,139 84	98,732,99
								•		

7,669 96 82,593 14 16,139 84 98,732 99