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2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Short Form

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year
may use this form may use this form

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

Open to Public Inspection

Contributions and a special part of the property of the prop	Α	For th	ne 2009 ca	<u>alendar</u>	year, or tax year beginning , 2	009, and er	nding		,
PRICE STATE   PRICE   PRICE   PROJECT   PROJ	В	Check (	f applicable	<u> </u>	C		D	Employer	identification number
Temperature compared to the compared of the compared to the		Address	s change	use IRS	FRIENDS FOR NEIGHBORHOOD PROGRESS,	INC		52-10	036628
Section 531(c/3) organizations and 4947(x/1) nonexempt charitable trusts   Faculties and special content of the content of t		Name o	change		100 SOUTH MARKET STREET		E	Telephone	number
### Application periodry  ### Application periodry  ### Section \$91(c/3) organizations and 4947(x(1)) nonexempt charitable trusts		Initial re	eturn	type.	FREDERICK, MD 21701		1	(301)	694-1506
*Section 301(c/3) organizations and 4947(x/T) nonexempt charitable trusts  *Section 301(c/3) organizations and 4947(x/T) nonexempt charitable trusts    *Note   *Section 301(c/3) organizations and 4947(x/T) nonexempt charitable trusts   *Note   *Section 301(c/3) organizations and 4947(x/T) nonexempt charitable trusts   *Note   *Section 301(c/3) organization is not a section 509(c/3) organization and the programmation and the programmation and the programmation is not a section 509(c/3) organization and the programmation and the programmation is not a section 509(c/3) organization and the programmation of the programmation and the	$\vdash$			Specific			<b>⊢</b>		
**Section 501(c/3) organizations and 4947(a/1) nonexempt charitable trusts must ditach a completed Schodule A (Form 990 or \$90.000 completed Schodule B (Form 990 or \$90.000 complete Schodule B (Form 990 or \$90.000 completed B (Form 990 or \$90.				tions.			F		
Website: N/A	1	Applica	tion pending	<u> </u>					
Website: ► N/A			Section :	501(c)(3) iust atta	) organizations and 4947(a)(1) nonexempt charitable tru ch a completed Schedule A (Form 990 or 990-EZ).	usts 	Other (specify	<u>)</u>	
Tax-exempt status (check only one)	_			- /-			1		
Section   Sect	ı		_		1,01				edule B (Form 990,
Sez.,000 A Tom 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return	<u>1</u>						<u> </u>		
Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)   1   359,016.   2   2   2   359,016.   2   2   359,016.   3   3   3   3   3   3   3   3   3		\$25,0	00 A Form	n 990-EZ	or Form 990 return is not required, but if the organization of	hooses to fil	e a return, be sure t	o file a co	mot more than emplete return
1   Contributions, gifts, grants, and similar amounts received   2   Program service revenue including government fees and contracts   3   Membership dues and assessments   4   Investment income   4   20,264.     5a   Gross amount from sale of assets other than inventory   5a   5b   5c   5c   5c   5c   5c   5c   5c	r —	Add I instea	ines 5b, 6 ad of Forn	b, and 7 n 990-E	7b, to line 9 to determine gross receipts, if \$500,000 or i	more, file F	orm 990	▶\$	380,020.
2   Program service revenue including government fees and contracts   2   3   3   4   20, 264.	Pa	ift!~	Rev	enue, l	Expenses, and Changes in Net Assets or Ful	nd Balan	ces (See the in	structio	ns for Part I.)
2   Program service revenue including government fees and contracts   3   3   3   3   4   1   1   1   1   1   1   1   1   1	_								
3 Membership dues and assessments 4 Investment income 5 a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (subtract in 5b from in 5a) 6 Special events and activities (complete applicable parts of Schedule 6) if any amount is from gaming, check here a Gross revenue (not including \$				_	-			2	
4   novestment income 5 a Gross amount from sale of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract in 56 from in 5a) c Government (not including \$			_					3	
b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract in 5b from in 5a)  6 Special events and activities (complete applicable parts of Schedule 6) if any amount is from gaming, check here a Gross revenue (not including \$ reported on line 1) b Less direct expenses other than fundraising expenses c Net income and (loss) from spatial events add activities (Subtract line 6b from line 6a)  7 a Gross sales of inventory, liess returns and allowances b Less, cost. of logode-sold c Gross profit or (loss) from seles of inventory (Subtract line 7b from line 7a)  8 of line events (loss) from seles of line entire in the form line 7a)  9 fotal revenue (loss) from seles of line entire in the form line 7a)  10 Grants and subtract line 25 from seles of line entire in the form line 7a)  11 Senetits fail to for formembers 11 Selection and employee benefits 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 15 Printing, publications, postage, and shipping 16 Other expenses (describe * SEE STATEMENT 3 ) 16 177, 319.  17 Total expenses. Add lines 10 through 16		4	Investme	nt incon	ne			4	20,264.
b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract in 5b from in 5a)  6 Special events and activities (complete applicable parts of Schedule 6) if any amount is from gaming, check here a Gross revenue (not including \$ reported on line 1) b Less direct expenses other than fundraising expenses c Net income and (loss) from spatial events add activities (Subtract line 6b from line 6a)  7 a Gross sales of inventory, liess returns and allowances b Less, cost. of logode-sold c Gross profit or (loss) from seles of inventory (Subtract line 7b from line 7a)  8 of line events (loss) from seles of line entire in the form line 7a)  9 fotal revenue (loss) from seles of line entire in the form line 7a)  10 Grants and subtract line 25 from seles of line entire in the form line 7a)  11 Senetits fail to for formembers 11 Selection and employee benefits 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 15 Printing, publications, postage, and shipping 16 Other expenses (describe * SEE STATEMENT 3 ) 16 177, 319.  17 Total expenses. Add lines 10 through 16		5a	Gross am	nount fro	om sale of assets other than inventory	5a		,;	-
b Less direct expenses other than fundraising expenses  c Net income.oc.(loss)-from-pedial premis and activities (Subtract line 6b from line 6a)  7a Gross \$28 55.0f.goods-sold   0   7a   7b   7c   7c   7c   7c   7c   7c   7c		b	Less cos	st or oth	er basis and sales expenses	5 b			
b Less direct expenses other than fundraising expenses  c Net income.oc.(loss)-from-pedial premis and activities (Subtract line 6b from line 6a)  7a Gross \$28 55.0f.goods-sold   0   7a   7b   7c   7c   7c   7c   7c   7c   7c	R	С	Gain or (los	s) from sa	ale of assets other than inventory (Subtract In 5b from In 5a)			5 c	
b Less direct expenses other than fundraising expenses  c Net income.oc.(loss)-from-pedial premis and activities (Subtract line 6b from line 6a)  7a Gross \$28 55.0f.goods-sold   0   7a   7b   7c   7c   7c   7c   7c   7c   7c	Ž	6	Special ever	nts and ac	ctivities (complete applicable parts of Schedule G). If any amount is from	n gaming, che	eck here	(統)	
b Less direct expenses other than fundraising expenses  c Net income.oc.(loss)-from-pedial premis and activities (Subtract line 6b from line 6a)  7a Gross \$28 55.0f.goods-sold   0   7a   7b   7c   7c   7c   7c   7c   7c   7c	N	a	Gross rev	venue (r	not including \$ of contributions		_	_   ÷a;\}	
b Less direct expenses other than fundraising expenses  c Net income.or. (loss) from perfait events and activities (Subtract line 6b from line 6a)  7a Gross \$25,55.0 (poods-sold	Ŭ			-		6a		\$ ~ D\$1.	
C   Net   Income.on-(less)-from-special events and activities (Subtract line 6b from line 6a)   7a   7a   7b   7b   7b   7c   7c   7c   7c   7c	<i>~</i>	ь	•		•	6 b			
b   less   cost of goods   color   c	5								
b   less_cost_of_goods-sold						7a			
C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)   7c	<b>V</b>					7 b			
8    Other reverble   Classifies   SEE STATEMENT 1	<del>}</del> !					7a)		7c	
10   Grants and significant aniounts paid (attach schedule)   SEE STATEMENT 2   10   176,718.	ٿــ	8	Other reven	ne lidescr	108-2 SEE STATEMENT 1	,	,	) 8	740.
10   Grants and significant aniounts paid (attach schedule)   SEE STATEMENT 2   10   176,718.	것	1.	1671				<del></del>	′ <del> </del>	
Total expenses (describe   SEE STATEMENT 3   16   177, 319.   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   1, 127, 472.   19   1, 127		-				८४४ ८	ТАТЕМЕНТ 2	<del></del>	
Total expenses (describe   SEE STATEMENT 3   16   177, 319.   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   1, 127, 472.   19   1, 127	<u></u>	11	Popofit		or sor mombors—	200 3	INLUMENT 2	<u> </u>	170,710.
Total expenses (describe   SEE STATEMENT 3   16   177, 319.   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   1, 127, 472.   19   1, 127	Z								
Total expenses (describe   SEE STATEMENT 3   16   177, 319.   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   1, 127, 472.   19   1, 127	Z	1			the state of the s				8 769
Total expenses (describe   SEE STATEMENT 3   16   177, 319.   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   1, 127, 472.   19   1, 127	, A				· · · · · · · · · · · · · · · · · · ·			<b>⊢</b>	
Total expenses (describe   SEE STATEMENT 3   16   177, 319.   17   Total expenses. Add lines 10 through 16   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.   19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   19   1, 127, 472.   19   1, 127	₩.								7,044.
17   Total expenses. Add lines 10 through 16   17   370, 650.     18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9, 370.     19   Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   20   1, 127, 472.     20   Other changes in net assets or fund balances (attach explanation)   20   21   1, 136, 842.     20   Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)   (A) Beginning of year   (B) End of year     22   Cash, savings, and investments   256,006.   22   235,804.     23   Land and buildings   792,601.   23   804,457.     24   Other assets (describe ► SEE STATEMENT 4   )   98,059.   24   122,306.     25   Total assets   1,146,666.   25   1,162,567.     26   Total liabilities (describe ► SEE STATEMENT 5   )   19,194.   26   25,725.     27   Net assets or fund balances (line 27 of column (B) must agree with line 21)   1,127,472.   27   1,136,842.	S	16	Other expen	publicat	ions, postage, and simpping riba ► CFF CTATFMFNT 3		`		177 319
18   Excess or (deficit) for the year (Subtract line 17 from line 9)   18   9,370.	•								
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)   20 Other changes in net assets or fund balances (attach explanation)   21	_	<del></del>					- <u></u>		
19   1,127,472   1,136,842   20   20   20   21   1,136,842   20   21   1,136,842   20   21   1,136,842   20   21   1,136,842   20   21   1,136,842   20   21   1,136,842   20   21   1,136,842   20   21   1,136,842   20   21   21   21   21   21   21   2	А	ļ		-					9,310.
Net assets or fund balances at end of year Combine lines 18 through 20   21   1,136,842     Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)   (A) Beginning of year   (B) End of year	NS	19	Net asset	ts or fun	nd balances at beginning of year (from line 2/, column (	A)) (must a	igree with end-of-y	ear 19	1 127 472
Part II   Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)   (A) Beginning of year   (B) End of year	ŤĚ	20						<u> </u>	1,121,412.
Part II         Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ           (See the instructions for Part II)         (A) Beginning of year         (B) End of year           22         Cash, savings, and investments         256,006.         22         235,804.           23         Land and buildings         792,601.         23         804,457.           24         Other assets (describe ► SEE STATEMENT 4         )         98,059.         24         122,306.           25         Total assets         1,146,666.         25         1,162,567.           26         Total liabilities (describe ► SEE STATEMENT 5         )         19,194.         26         25,725.           27         Net assets or fund balances (line 27 of column (B) must agree with line 21)         1,127,472.         27         1,136,842.	Ś	1		•	· · · · · · · · · · · · · · · · · · ·	١			1 136 842
(See the instructions for Part II )         (A) Beginning of year       (B) End of year         22 Cash, savings, and investments       256,006. 22       235,804.         23 Land and buildings       792,601. 23       804,457.         24 Other assets (describe ► SEE STATEMENT 4       )       98,059. 24       122,306.         25 Total assets       1,146,666. 25       1,162,567.         26 Total liabilities (describe ► SEE STATEMENT 5       )       19,194. 26       25,725.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       1,127,472. 27       1,136,842.	<b>D</b>						ore file Form 990 i	_	
22 Cash, savings, and investments       256,006. 22       235,804.         23 Land and buildings       792,601. 23       804,457.         24 Other assets (describe ► SEE STATEMENT 4 )       98,059. 24       122,306.         25 Total assets       1,146,666. 25       1,162,567.         26 Total liabilities (describe ► SEE STATEMENT 5 )       19,194. 26       25,725.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       1,127,472. 27       1,136,842.	1 6	H C H	Daia	ince o	<del> </del>	0,000 01 1110			
23 Land and buildings       792,601. 23       804,457.         24 Other assets (describe ► SEE STATEMENT 4 )       98,059. 24       122,306.         25 Total assets       1,146,666. 25       1,162,567.         26 Total liabilities (describe ► SEE STATEMENT 5 )       19,194. 26       25,725.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       1,127,472. 27       1,136,842.	22	) () ac	h saving	s and in	· · · · · · · · · · · · · · · · · · ·				
24 Other assets (describe ► SEE STATEMENT 4 )       98,059. 24 122,306.         25 Total assets       1,146,666. 25 1,162,567.         26 Total liabilities (describe ► SEE STATEMENT 5 )       19,194. 26 25,725.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       1,127,472. 27 1,136,842.					resinents				
25 Total assets       1,146,666. 25       1,162,567.         26 Total liabilities (describe ► SEE STATEMENT 5 )       19,194. 26       25,725.         27 Net assets or fund balances (line 27 of column (8) must agree with line 21)       1,127,472. 27       1,136,842.					NA ► SEE STATEMENT 4				
26 Total liabilities (describe ► SEE STATEMENT 5 )       19,194. 26 25,725.         27 Net assets or fund balances (line 27 of column (B) must agree with line 21)       1,127,472. 27 1,136,842.				(uestill	OLD STRILLINGIAL 4				
<b>27 Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21) 1, 127, 472.   <b>27</b> 1, 136, 842.				es (desa	ribe ► SEE STATEMENT 5				
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	_						1 2/22//3	<u> </u>	

Form	990-EZ (2009) FRIENDS FOR NEI	GHBORHOOD PROGRESS	, INC	52	-103	36628 Page <b>2</b>
Par	talle Statement of Program Sei	vice Accomplishments	(See the instruction	ons.)		Expenses
What i	s the organization's primary exempt purpose? SEI	E STATEMENT 6			(Reg   5017	uired for section c)(3) and (4)
Desc	ribe what was achieved in carrying out th	e organization's exempt purp	oses In a clear and co	ncise manner,	orga	nizations and section (a)(1) trusts; optional
desci	ribe the services provided, the number of cam title	persons benefited, or other	relevant information for	each	494/	(a)(1) trusts; optional thers)
		<u></u>			10, 0	1
28	SEE STATEMENT 7				┨	
					ł	
					-	
	(Grants \$ ) If th	is amount includes foreign g	rants, check here	<u> </u>	28 a	275,540.
29					]	
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	(Grants \$ ) If th	is amount includes foreign gi	rants check here		1 29 a	
30	<u> </u>	and difficulty inforded or foreign gr	4.11.0, 0.11001.1101.0			
30					┪	
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	70				20.0	
21	<del></del>	is amount includes foreign g	rants, check here		30 a	
31	Other program services (attach schedule	•		- □	33 -	
		is amount includes foreign gi	rants, cneck nere		31 a	275,540.
	Total program service expenses (add li				32	
Par	t IV: List of Officers, Directors			<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>	_	
	(a) Name and address	(b) Title and average hours per week devoted	(c) Compensation (If not paid, enter -0)	(d) Contributions	s to	(e) Expense account and other allowances
	(a) Name and address	to position	not paid, enter -u)	deferred compens		and other allowances
TOL	IN SICA, ESQ	PRESIDENT	0.	adiorica componer	0.	0.
	SOUTH JEFFERSON STREET	l KESIDENI	0.		٥.	j
		ľ				
	DERICK, MD 21701					
	VEN GORDON	TREASURER	0.		0.	0.
499	HOBNAIL COURT	0		•		
FRE	DERICK, MD 21702					
RIC	HARD WELDON	DIRECTOR	0.		0.	0.
	WINTERGREEN LANE	1 n				
	NSWICK, MD 21701	,				
	B BYRON	DIRECTOR	0.	<u> </u>	0.	0.
		DIRECTOR	0.		υ.	١
	SOUTH MARKET STREET	Į				
	DERICK, MD 21701			ļ		
	TT WINNETTE	DIRECTOR	0.		0.	0.
100	SOUTH MARKET STREET	] 0				
FRE	DERICK, MD 21701					
	HAEL SPURRIER	DIRECTOR	0.	1	0.	0.
	SOUTH MARKET STREET	1 0				
	DERICK, MD 21701	j				
	CIA HALL	SECRETARY	0.	<del></del>	0.	0.
		SECKETAKI	0.		0.	٠.
	NORTH_COURT_STREET	ļ				
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Form	990-EZ (2009) FRIENDS FOR NEIGHBORHOOD PROGRESS, INC 52-103662	8 _	Р	age 3
Par		TEM	ENT	8
			Yes	No
,33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of			١,,
24	each activity  Were any changes made to the expension or governing decuments? If 'Ver I attach a conformed copy of the changes.	33	<del> </del>	X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34	<del>                                     </del>	<u> </u>
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
á	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice			
	reporting, and proxy tax requirements?	35 a	ļ. —	X_
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
.:	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] 0.	<b> </b>	`-	
" t	Did the organization file Form 1120-POL for this year?	37b	<del> </del> -	X
`38 <i>a</i>	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38 a		X_
ı	olf 'Yes,' complete Schedule L, Part II and enter the total	-		
20	amount involved  Section F01(o)(7) executations Fator	1		
	Section 501(c)(7) organizations Enter Initiation fees and capital contributions included on line 9 . 39a N/A			
	o Gross receipts, included on line 9, for public use of club facilities  39b  N/A	-4	2	ړي
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	31.7.78	10	
	section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.	4 c	1 .:	<i>'</i>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	İ		
•	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a			
,	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I	40 ь		Х
· (	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization		_	
, ,			;	
(	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
•	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40.5	· ·	X
	List the states with which a copy of this return is filed MD	40 e	Ц	1.
41	List the states with which a copy of this fetulis is filed a			
42	The organization's (CENTEN CORPON CORPON)	662	_ = = = -	22
,	books are in care of > SEAVEN GORDON Telephone no > (301) Located at > 499 HOBNAIL COURT FREDERICK MD ZIP + 4 > 21701	_ 003		,3
• ;	totaled at 135 hoperate coort itablified in the control of the con			
ı	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b		Х
	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 a Foreign Bank and Financial Accounts.			
(	At any time during the calendar year, did the organization maintain an office outside of the US?	42 c		Х
	If 'Yes,' enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		▶ □	N/A
~~	and enter the amount of tax-exempt interest received or accrued during the tax year		Ш	N/A
	· · · · · · · · · · · · · · · · · · ·			
		г—	Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	44		X
		<b> </b>	<b></b>	<del>                                     </del>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45	<u></u>	Х
BAA	TEEA0812L 01/30/10 Fo	rm <b>99</b> 0	)-EZ	(2009)

orm 990-l	EZ (2009) FRIENDS FOR NEIGHBO	RHOOD PROGRESS	, INC	<u> </u>	0628	P	age <b>4</b>		
Part VI	Section 501(c)(3) organization	s and section 4947	(a)(1) nonexem	pt charitable trusts on	l <b>y.</b> All se	ction			
•	501(c)(3) organizations and sec 46-49b and complete the tables	s for lines 50 and 5	пехетрі спапіа 1.	able trusts must answer	question	115			
	·					Yes	No		
46 Did th	ne organization engage in direct or indire ublic office? If 'Yes,' complete Schedule (	ct political campaign ac C. Part I	tivities on behalf of	for in opposition to candidat	es 46		X		
	ne organization engage in lobbying activities				47		X		
	organization a school as described in se				48		X		
	ne organization make any transfers to an				49a		X		
	s,' was the related organization a section	·			49b				
	plete this table for the organization's five	_	mnlovees (other th	an officers directors trustes	s and key				
empl	byees) who each received more than \$10	0,000 of compensation	from the organizat	ion If there is none, enter 'N	lone.'				
(a)	(a) Name and address of each employee paid hours per week more than \$100,000 (b) Title and average hours per week devoted to position of the position for the properties of the position of the properties of the								
NONE					-				
<u> </u>									
			-						
_									
· Total	number of other employees paid over \$1	00 000							
' I TOTAL	number of other employees paid over \$1			_					
<b>51</b> Comp	plete this table for the organization's five	highest compensated in	ndependent contrac	ctors who each received more	e than \$10	0,000	of		
comp	ensation from the organization. If there i	s none, enter 'None '							
	(a) Name and address of each independent contr	actor paid more than \$100,000		(b) Type of service	(c) Comp	ensation	n		
NONE_									
4									
<u>ა</u>		<del></del>					—		
<u></u> -									
<b>d</b> Total	number of other independent contractors	s each receiving over \$	100,000 .	<b>-</b>					
	T								
	Under penalties of perjury, I declare that I have examinue, correct, and complete Declaration of preparer (	ined this return, including according the officer) is based on a	mpanying schedules and all information of which pr	statements, and to the best of my know eparer has any knowledge	viedge and be	lief, it is	'		
	1 V. Ala	Non1		10-16	17				
Sign	Signature of officer	us (		Date //	10				
lere									
	SEAVEN GORDON  Type or print name and the			TREASURER					
	(1/2)	$\bigcirc$	, Date	/ Check if Pre	parer's Identif e instructions)	yıng Nur	mber		
Paid	Preparer's signature BARBARA ROMAN	7.10man		Self- employed N					
re- parer's	Firm's name (or LINTON SHAFER W.	ARFIELD & GARRE	TT, P.A., CE	PA'S	<u>-</u>				
Jse	yours if self employed). > 201 THOMAS JOHN	SON DRIVE			N/A				
Only	address, and FREDERICK, MD 2	<del></del>		Phone no ► (301		9200			

May the IRS discuss this return with the preparer shown above? See instructions **BAA** 

►X Yes No Form **990-EZ** (2009)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2009

Open to Public Inspection

Employer identification number Name of the organization 52-1036628 FRIENDS FOR NEIGHBORHOOD PROGRESS, INC Part I | Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(bX1)(A)(iii) Enter the hospital's 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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(bX1XAXvi). (Complete Part II) 7 X 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts 9 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type III — Functionally integrated Type III— Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other е than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that 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 following persons? g Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) 11 g (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (v) Did you notify the organization in col (i) of your support? (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (vi) Is the (vii) Amount of Support (i) Name of Supported Organization (ii) EIN (iv) Is the organization in col (i) listed in your organization in col (i) organized in the governing document? Yes Yes No Yes No No

•	·			WOOD DDOOD	TOC THO	FO 1036636	
	t II Support Schedule for		OR NEIGHBOR			52-1036628	
[Fai	(Complete only if you checke					1 17 O(D)(1)(A)	(•1)
Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	501,442.	367,790.	248,385.	418,076.	359,016.	1,894,709.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4	Total. Add lines 1-through 3	501,442.	367,790.	248,385.	418,076.	359,016.	1,894,709.
, ,	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).	٠		,		•,	0.
6	Public support. Subtract line 5			, -	, ,	•	1 004 700
_	from line 4 tion B. Total Support		•		· · · · · · · · · · · · · · · · · · ·		1,894,709.
	ndar year (or fiscal year	(1) 0005	(1) 2005	(-) 2007	(4) 2008	(-) 2000	(A Total
begi	nning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	501,442.	367,790.	248,385.	418,076.	359,016.	1,894,709.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,988.	3,840.	1,654.	3,309.	1,559.	12,350.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV	-1,922.	16,380.	16,800.	14,287.	10,861.	56,406.
11	Total support. Add lines 7 through 10	* ' ' ' ,					1,963,465.
12	Gross receipts from related active	rities, etc (see ins	tructions)			12	0.
13	First five years. If the Form 990 organization, check this box and		ition's first, secon	d, third, fourth, c	or fifth tax year as	a section 501(c)	(3)
Sec	tion C. Computation of Pu					1	00.50
14 15	Public support percentage for 20 Public support percentage from a	2008 Schedule A,	Part II, line 14			14	96.5 % 96.9 %
~ 1	a 33-1/3 support test — 2009. If the and stop here. The organization						
- 1	<b>33-1/3 support test</b> – <b>2008.</b> If the and <b>stop here.</b> The organization	e organization did qualifies as a pub	not check a box of licly supported or	on line 13, or 16a ganization.	, and line 15 is 33	3-1/3% or more, o	check this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	test, check this	box and stop her	e. Explain in Part	t IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	nd-circumstances test The organiz	' test, check this ation qualifies as	box and <b>stop her</b> a publicly suppor	<b>e.</b> Explain in Part rted organization	t IV how the
18 RAA	Private foundation. If the organi	zation did not che	ck a box on line,	13, 16a, 16b, 17a			nstructions   190 or 990-EZ) 2009

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support						
Calendar year (or fiscal yr beginning in)►	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	·					
2 Gross receipts from admissions, merchandise sold						
or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line						
7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
Calendar year (or fiscal yr beginning in) ► 9 Amounts from line 6	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 lins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, seco				
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and	is for the organiz stop here blic Support P	ation's first, seco	nd, third, fourth,	or fifth tax year a	as a section 501(c)	(3)
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 Ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu	is for the organiz stop here blic Support P	ation's first, seco	nd, third, fourth,	or fifth tax year a	as a section 501(c)	(3) ► ∏ %
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 lins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage from	is for the organiz stop here blic Support P 09 (line 8, columi 2008 Schedule A,	ation's first, seco Percentage n (f) divided by li Part III, line 15	nd, third, fourth,	or fifth tax year a	as a section 501(c)	(3)
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 lins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage from Section D. Computation of Inv	is for the organizstop here blic Support P 009 (line 8, column 2008 Schedule A,	ation's first, seco Percentage n (f) divided by li Part III, line 15 me Percentag	nd, third, fourth, ne 13, column (f)	or fifth tax year a	as a section 501(c).  15 16	(3) \rightarrow \limits
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage from Section D. Computation of Inv 17. Investment income percentage from	is for the organiz stop here blic Support P 109 (line 8, colum 2008 Schedule A, restment Incor or 2009 (line 10c,	ation's first, seco Percentage n (f) divided by li Part III, line 15 me Percentag column (f) divided	nd, third, fourth, ne 13, column (f) e	or fifth tax year a	as a section 501(c)  15  16	(3)  \[ \bigcup \left[ \frac{\pi}{\pi} \\ \pi \pi
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage from Section D. Computation of Inv 17. Investment income percentage f	is for the organizatop here blic Support P 09 (line 8, column 2008 Schedule A, restment Incor or 2009 (line 10c, rom 2008 Schedu	ation's first, seco Percentage  n (f) divided by li Part III, line 15 me Percentag column (f) divide ile A, Part III, line	nd, third, fourth, ne 13, column (f) e ed by line 13, column (f)	or fifth tax year a	as a section 501(c) 15 16 17 18	(3)  \[ \bigcup \left[ \] \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 organization, check this box and Section C. Computation of Pu 15 Public support percentage from Section D. Computation of Inv 17. Investment income percentage from	is for the organizstop here blic Support P 009 (line 8, column 2008 Schedule A, restment Incor or 2009 (line 10c, rom 2008 Schedul organization did not iox and stop here the organization did	ation's first, seco Percentage  In (f) divided by lith part III, line 15 Ine Percentage  It column (f) divided lith part III, line is check the box on the organization and not check a bo	nd, third, fourth,  ne 13, column (f)  e ed by line 13, column (f)  117  line 14, and line 15  n qualifies as a p  x on line 14 or 19	or fifth tax year a ) umn (f)) is more than 33-1/iublicly supported ia, and line 16 is	15 16 17 18 3%, and line 17 is no organization more than 33-1/3%	(3)

Schedule A	(Form	1 990 or	990-E	Z) 2009	FRI	ENDS	FOR	NEIG	HBOR	COOHS	PROC	GRESS,	INC	52-103	6628	Page 4
Part IV	Sup	olemen	ital In	forma	tion. (	Compl	ete th	ns par	t to p	rovide	the e	explana	tions	required by f formation. S	⊃art II, lır	ne 10;
-	Part	II, line	17a -	or 17b;	; and	Part II	II, line	e 12. F	Provid	de any	other	additic	nal in	formation. S	ee instru	ictions.
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## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

FRIENDS	FOR N	FIGHRORHOO	<b>D PROGRESS</b>	. INC
rniliuda	r Or III		D I NOGNESS	

52-1036628

PART	11 1	INF 1	O-OTHER	INCOME
FARI	11. 1	-1145-14	J - O I I I L R	

NATURE AND SOURCE	2009	2008	2007	2006	2005
NET RENTAL LOSS	TAL \$ 10,861.	14,287. \$ 14,287.	16,800. \$ 16,800.	16,380. \$ 16,380.	$\frac{-1,922.}{$-1,922.}$

2009	FEDERAL STATEMENT	TS		PAGE 1
_	FRIENDS FOR NEIGHBORHOOD PROG	RESS, IN	IC	52-1036628
STATEMENT 1 FORM 990-EZ, PART I, LINE OTHER REVENUE MISCELLANEOUS	8		TOTAL \$	740. 740.
STATEMENT 2 FORM 990-EZ, PART I, LINE GRANTS AND SIMILAR AMO  CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	DUNTS PAID  EXEMPT  HOMELESS INDIVIDUALS SOUTH MARKET STREET			
CASH AMOUNT GIVEN:	FREDERICK, MD 21701		\$	176,718.
STATEMENT 3 FORM 990-EZ, PART I, LINE OTHER EXPENSES  CONTRACT LABOR DEPRECIATION OFFICE EXPENSE REAL ESTATE TAXES UTILITIES	16		\$ TOTAL \$	91,405. 30,903. 28,866. 5,387. 20,758. 177,319.
STATEMENT 4 FORM 990-EZ, PART II, LINE OTHER ASSETS  AUTOMOBILES FURNITURE AND FIXTURES MACHINERY AND EQUIPMEN PLEDGES AND GRANTS REC PREPAID EXPENSES AND D	; IT CEIVABLE	TOTAL	BEGINNING  \$ 4,500. \$ 9,110. 52,376. 24,750. 7,323. \$ 98,059. \$	ENDING 1,500. 11,277. 37,999. 68,628. 2,902. 122,306.
STATEMENT 5 FORM 990-EZ, PART II, LINE TOTAL LIABILITIES  ACCOUNTS PAYABLE AND A ACCRUED LIABILITIES		TOTAL	\$ 18,523. \$ 671.	ENDING  24,515.  1,210.  25,725.

١...

2009

### **FEDERAL STATEMENTS**

PAGE 2

FRIENDS FOR NEIGHBORHOOD PROGRESS, INC

52-1036628

STATEMENT 6
FORM 990-EZ, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO PROMOTE AND ADVANCE THE WELFARE OF THE RESIDENTS OF FREDERICK COUNTY, MARYLAND.

STATEMENT 7
FORM 990-EZ, PART III, LINE 28
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

THE OPERATION OF A SOUP KITHCEN FOR THE INDIGENT, A DAYTIME SHELTER FOR THE HOMELESS, A MEDICAL CLINIC PROVIDING HEALTH CARE FOR THE HOMELESS, AND VARIOUS OTHER RELATED ACTIVITIES TO SUPPORT THE HOMELESS.

# STATEMENT 8 FORM 990-EZ, PART V REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?

NO

NO