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Form 990
2009

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)

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

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable	C Name of organization Central City Concern		D Employer identification number 9 3-0728816
<input type="checkbox"/> Address change	Doing Business As		E Telephone number (503) 294-1681
<input type="checkbox"/> Name change	Number and street (or P O box if mail is not delivered to street address) 232 NW 6th Avenue		G Gross receipts \$ 38,623,025
<input type="checkbox"/> Initial return	Room/suite		
<input type="checkbox"/> Terminated	City or town, state or country, and ZIP + 4 Portland, OR 972093609		
<input type="checkbox"/> Amended return	F Name and address of principal officer Edward Blackburn 232 NW 6th Avenue Portland, OR 972093609		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Application pending			H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)

I Tax-exempt status 501(c) (3) ► (insert no) 4947(a)(1) or 527

J Website: ► www.centralcityconcern.org

K Form of organization Corporation Trust Association Other ► L Year of formation 1979 M State of legal domicile OR

Part I Summary

1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE O The mission of Central City Concern (CCC) is to provide pathways to self-sufficiency through active intervention in poverty and homelessness. Founded in 1979, CCC has developed a continuum of social services integrating programs for health care, affordable housing and employment		
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets		
3 Number of voting members of the governing body (Part VI, line 1a)	3	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5 Total number of employees (Part V, line 2a)	5	687
6 Total number of volunteers (estimate if necessary)	6	31
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	1,275
b Net unrelated business taxable income from Form 990-T, line 34	7b	-1,123

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	5,911,763	7,695,532
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	27,459,375	30,435,339
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	542,925	345,657
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	335,748	78,035
	34,249,811	38,554,563

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	19,115,699	21,513,435
16a Professional fundraising fees (Part IX, column (A), line 11e)	27,111	15,050
b Total fundraising expenses (Part IX, column (D), line 25) ► 312,954		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	8,707,883	8,898,596
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	27,850,693	30,427,081
19 Revenue less expenses Subtract line 18 from line 12	6,399,118	8,127,482

20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	43,506,000	55,704,859
22 Net assets or fund balances Subtract line 21 from line 20	19,505,453	23,664,451
	24,000,547	32,040,408

Part II Signature Block			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
***** Signature of officer		2011-05-13 Date	
Edward Blackburn Executive Director Type or print name and title			

Paid Preparer's Use Only	Preparer's signature ► Robert M Prill	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► Hoffman Stewart & Schmidt PC 4900 Meadows Road Ste 200 Lake Oswego, OR 970353295			EIN ►
				Phone no ► (503) 220-5900

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

THE MISSION OF CENTRAL CITY CONCERN (CCC) IS TO PROVIDE PATHWAYS TO SELF-SUFFICIENCY THROUGH ACTIVE INTERVENTION IN POVERTY AND HOMELESSNESS Founded in 1979, CCC has developed a continuum of affordable housing options integrated with direct social services

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 17,711,062 including grants of \$) (Revenue \$ 21,136,071)

Central City Concern maintains healthcare and recovery services, integrated with agency housing, to meet the primary and behavioral healthcare and drug and alcohol treatment and recovery needs of low income or chronically homeless clients in the Portland Metropolitan area. The CCC Recovery Center is an outpatient drug and alcohol treatment program serving primarily homeless and low-income clients. The 12th Avenue Recovery Center provides mental health services for homeless and low-income individuals. The recovery/Mentor program matches clients in early recovery with mentors to provide practical and emotional support. The Community Engagement Program (CEP) is a comprehensive healthcare, recovery and housing program serving chronically homeless individuals. (Continued on Schedule O) Housing rapid response connects with homeless individuals who have been identified by Portland Police as frequent offenders. CCC provides housing, supportive services and alternatives to these individuals. The David P. Hooper Detoxification center provides drug and alcohol treatment services including outreach, sobering and subacute medical detoxification. The Letty Owings Center is a residential drug and alcohol treatment program for low-income, chemically dependent women who are pregnant or newly parenting. The Old Town Clinic (OTC) is a medical, surgical and psychiatric healthcare clinic for a patient base of homeless and low-income individuals. Puentes/Float is a linguistically and culturally appropriate substance abuse treatment and mental health services program for Spanish speaking families. Recuperative care program (RCP) provides transitional housing, recuperative healthcare services and daily case management for low-income and homeless individuals following hospitalization. The Benefit and Entitlement Specialist Team (BEST) provides expedited assistance with SSI/SSD and Medicaid applications for referred homeless individuals. Family alcohol and drug free community housing network (FAN) is a collaborative program that serves families recovering from the effects of drug and alcohol addiction. It provides services in case services, rent subsidy, and alcohol/drug free community housing

4b (Code) (Expenses \$ 3,818,997 including grants of \$) (Revenue \$ 4,170,235)

Central City Concern Housing provides a variety of affordable housing options where persons, who otherwise might be homeless, may live comfortably, securely and safely. In fiscal 2010, we owned, leased or managed 23 buildings providing more than 1,500 units of housing throughout the Portland Metropolitan area. This housing is available to single adults and to families, is both transitional and permanent, market rate and subsidized, serves people in recovery, living with HIV/AIDS, living with mental illness, living on social security and disability incomes, and/or people gaining employment skills and/or returning to work. (Continued on Schedule O) Of the more than 1,500 units of our housing, more than 60% are alcohol and drug free community (ADFC) housing for single adults and 88 units are ADFC units for families in recovery

4c (Code) (Expenses \$ 1,255,083 including grants of \$) (Revenue \$ 1,377,931)

CCC Employment Access Center (EAC) is a job resource center with specialized programs to assist homeless individuals, or those at risk of becoming homeless, achieve self-sufficiency by identifying and teaching the vocational and social skills needed to find and sustain full-time employment. Along with core employment services and over a dozen on-site partners, the EAC also maintains a variety of specialized programs including the access to Building Trades & Customer Service occupations and the Homeless Veterans Reintegration Project

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses \$ 2,971,052 including grants of \$) (Revenue \$ 3,749,827)

4e Total program service expenses \$ 25,756,194

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule 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 similar funds or 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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.
- Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.
- Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.
- Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.

12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

12A Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No

If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A Yes

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 United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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 U.S.? 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 U.S.? If "Yes," complete Schedule F, Part III

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		
6		No
7		No
8		No
9		No
10		No
11	Yes	
12		No
13		No
14a		No
14b		No
15		No
16		No
17	Yes	
18	Yes	
19		No
20		No

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		No
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	29	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32		No
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	Yes	
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	Yes	
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	Yes	
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		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	Yes	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O			

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	34
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	687
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
4b	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	4b	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
6b	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).	7a	Yes
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
7d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.	9a	
9b	Did the organization make any taxable distributions under section 4966?	9b	
10	Section 501(c)(7) organizations. Enter	10a	
10b	Initiation fees and capital contributions included on Part VIII, line 12	10b	
11	Section 501(c)(12) organizations. Enter	11a	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III or IV**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)
- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)
- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees
- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses
- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
1a	Yes	
1b		No
1c		No
1d	Yes	
1e		No
1f		No
1g		No
1h		No
1i		No
1j	Yes	
1k		No
1l		No
1m		No
1n		No
1o		No
1p	Yes	
1q		No
1r	Yes	

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

Software ID:
Software Version:
EIN: 93-0728816
Name: Central City Concern

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income (\$)	(e) End-of-year assets (\$)	(f) Direct Controlling Entity
Central City Investor Inc 232 NW Sixth Avenue Portland, OR 97209 93-0728816	Conduct, promote or attainment of lawful business	OR	0	1,000	N/A
8 NW 8 LLC 232 NW Sixth Avenue Portland, OR 97209 93-0728816	General Partner in 8 NW 8th Limited Partnership	OR	-39	1,119,013	N/A
Hotel Alder LLC 232 NW Sixth Avenue Portland, OR 97209 93-0728816	General Partner in Hotel Alder Limited Partnership	OR	-28	165,747	N/A
Central City Housing LLC 232 NW Sixth Avenue Portland, OR 97209 93-0728816	Engage in real estate ownership and related activities	OR	20,845	1,033,077	N/A
CCC Estate LLC 232 NW Sixth Avenue Portland, OR 97209 93-0728816	Owner and operator of residential affordable housing	OR	-48	940,518	N/A
Rose Quarter Housing LLC 232 NW Sixth Avenue Portland, OR 97209 26-4402152	General Partner in Rose Quarter Condo A Limited Partnership	OR	0	1,069	N/A

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K-1 (\$)	(j) General or Managing Partner?
							Yes	No		
Biltmore Associates LP 232 NW 6th Avenue Portland, OR97209 45-0489074	Low-income housing	OR	Central City Housing LLC	Related	20,845	1,033,077		No		Yes
Chez Ami Limited Partnership 232 NW 6th Avenue Portland, OR97209 93-1312217	Low-income housing	OR	N/A	Related	20,518	1,195,611		No		Yes
Estate Building Limited Partnership 232 NW 6th Avenue Portland, OR97209 20-4374931	Low-income housing	OR	CCC Estate LLC	Related	-48	940,518		No		Yes
Hotel Alder LP 232 NW 6th Avenue Portland, OR97209 93-0728816	Low-income housing	OR	Hotel Alder LLC	Related	-28	165,747		No		Yes
Rothchild Building LP 232 NW 6th Avenue Portland, OR97209 93-1117363	Low-income housing	OR	N/A	Related	-115,386	696,530		No		Yes
Shoreline Building LP 232 NW 6th Avenue Portland, OR97209 93-1098444	Low-income housing	OR	N/A	Related	2,753	223,655		No		Yes
8 NW 8th Limited Partnership 232 NW 6th Avenue Portland, OR97209 65-1163344	Low-income housing	OR	8 NW 8 LLC	Related	-39	1,119,013		No		Yes
Rose Quarter Condo A Limited Partnership 232 NW 6th Avenue Portland, OR97209 26-4473087	Low-income housing	OR	Rose Quarter Housing LLC	Related		1,069		No		Yes

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)
(1)	Biltmore Associates LP	A	3,000
(2)	Estate Building Limited Partnership	A	56,080
(3)	Rose Quarter Condo A Limited Partnership	A	55,180
(4)	Rose Quarter Condo A Limited Partnership	D	1,731,070
(5)	8 NW 8th Limited Partnership	J	128,087
(6)	Estate Building Limited Partnership	J	47,892
(7)	Biltmore Associates LP	J	70,103
(8)	Central City Concern Development	J	70,000
(9)	Central City Concern Development	P	20,321
(10)	Biltmore Associates LP	P	146,081
(11)	Estate Building Limited Partnership	P	420,681
(12)	Hotel Alder Limited Partnership	P	216,499
(13)	Rothchild Building LP	P	80,091
(14)	Shoreline Building LP	P	103,246
(15)	8 NW 8th Limited Partnership	P	513,313
(16)	Rose Quarter Condo A Limited Partnership	P	71,215
(17)	Rothchild Building LP	R	-86,243
(18)	Chez Ami Limited Partnership	A	24,220

Additional Data

Software ID:
Software Version:
EIN: 93-0728816
Name: Central City Concern

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code	(Expenses \$	2,971,052 including grants of \$) (Revenue \$	3,749,827)
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When faced with the realities of decreasing funding for services, coupled with a shortage of employment opportunities for individuals with little or no skills, CCC conceived of business enterprises as one answer to both challenges. As of fiscal 2010, business enterprises consisted of Central City Painting - an interior and exterior painting service; Central City Janitorial - a janitorial service for owned and managed buildings; Clean and safe - a public sanitation and safety service in the downtown core; Central City Maintenance - a property maintenance service. These businesses offer employment opportunities to people living on no, or very low incomes. All have multiple barriers to employment such as homelessness, chemical dependency, and long-term welfare dependency. These enterprises provide on-the-job training that increases job skills and employability, leading to better-than-minimum wage incomes and helping people move from dependency to self-sufficiency. CCC also operates the Community Volunteer Corps, bringing meaningful community service projects to people in CCC's housing programs who need work skills and mentoring before seeking employment.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee			
Dean Gisvold Chair	1 00	X		X			0	0	0
George Bing Sheldon Vice-chair	1 00	X		X			0	0	0
Marilyn Webber Secretary	1 00	X		X			0	0	0
Larry Naito Treasurer	1 00	X		X			0	0	0
Pauline Anderson Director	1 00	X					0	0	0
Ella Booth Director	1 00	X					0	0	0
Paul Clithero Director	1 00	X					0	0	0
Richard Gibson MD Director	1 00	X					0	0	0
Linda Girard Director	1 00	X					0	0	0
Jonathan Radmacher director	1 00	X					0	0	0
Rob Teach Director	1 00	X					0	0	0
Julio Vazquez Director	1 00	X					0	0	0
Vialante Vieira Director	1 00	X					0	0	0
Michael White Director	1 00	X					0	0	0
Bill Wiechmann Director	1 00	X					0	0	0
Edward Blackburn Executive Director	40 00			X			116,005	0	19,818
David Altman CFO	40 00			X			123,564	0	17,946
Traci Manning COO	40 00				X		103,572	0	16,518
Phillip Shapiro Medical Director	40 00				X		178,310	0	13,339

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Program expenses	1,094,164	1,093,480	-670	1,354
Repairs and maintenance	1,060,923	954,032	105,504	1,387
Medical services and su	948,247	939,388	8,859	
Other expenses	309,318	204,561	94,095	10,662
Laundry and food	292,495	283,757	7,321	1,417