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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 **2010**

Open to Public Inspection

<u>A_</u>	For the	2010 ca	lendar year,	or tax year beg	inning	,a	nd ending						
В	Check if app	plicable	C Name of c	organization	Inner-City	Revitali	zation) Emplo	yer ident	ification number
	Address ch	range		(Corporation	n				1	•		
吕	•	_	Doing Bus								72-	1402	559
닏	Name chan	nge			box if mail is not d	lalmorad to atract	oddroso)		Room/su	ite E			
	Initial return	n -	8	•	box ii maii is not o	lelivered to street a	accress)		Hoom/su	ite	elepn	one numb	er
$\overline{\Box}$	Terminated	4		Вож 908								_	
닏	remniateu	J		wn, state or count	ry, and ZIP + 4								
	Amended re	return	Alexa	ndria	··	LA 7130	09				Gross rece	ipts\$	658,308
	Application	nendina	F Name and	d address of princ	cipal officer				l				
ш	- причинен	. ponemy	Barb	ara Das	hiell				H(a) Is	s this a grou	p return for a	affiliates?	Yes X No
			P.O.	Box 90	8				H(b) A	re all affil	iates inclu	ded?	Yes No
				andria	•	LA 7	1300		'				structions)
_												(**************************************	,
<u> </u>	Tax-exer					(insert no)	4947(a)(1) or	527					
<u>J</u>	Website	e: > W			<u>revitali</u>	zation.o	rg		H(c) 0		mption nu	mber 🕨	
K	Form of or	rganization	X Corpo	oration Trust	Association	Other >			L Year of format	10n 19	98	M State of	f legat domicile LA
<u> </u>	Part I	Sι	ımmary										
	1 B	Briefly de	escribe the c	organization's r	nission or most s	significant activi	ties:						
A \		-		-	althful, a	-		e hou	sing for	low :	income	3	•
ဋ			lies.	•			•	•	J		• • • • • • • • • • • • • • • • • • • •	•	
ā	İ							• •			•		
Activities & Governance	1			1							•		
Ĝ	2 0			-	ation discontinue		s or disposed of	f more th	an 25% of its r	net asse	ts ,		
જ	3 N	lumber	of voting me	embers of the ç	overning body (I	Part VI, line 1a)					3	_13_	
es	4 N	lumber (of independe	ent voting men	nbers of the gove	erning body (Pa	rt VI, line 1b)	_			4	13	
==	5 T	otal nur	nber of indiv	viduals employ	ed in calendar ye	ear 2010 (Part \	/, line 2a)				5	5	
둉	6 T			· · ·	te if necessary)	,	,	•			6	15	
⋖				•	rom Part VIII, col	lumn (C) line 1		•			7a		
											1		0
_	1 0 14	vet unre	iateu busine	iss taxable inco	ome from Form 9	990-1, line 34	·			rior Year	7b		urrent Year
	。	`antribud	hone and ar	onto (Bost VIII	line 1h\				-		,613	- 0	554,737
ne	8 C		_	ants (Part VIII,	•		•		<u></u>				
ē	9 P										,427		101,113
Revenue	10 ln						•		_	2	,501		2,458
ш.	11 0	Other rev	/enue (Part	VIII, column (A	i), lines 5, 6d, 8c	, 9c, 10c, and 1	1e) .						
	12 T	otal rev	enue – add	lines 8 through	11 (must equal	Part VIII, colum	nn (A), line 12)			266	,541		658,308
	13 G	arants a	nd sımılar aı	mounts paid (F	art IX, column (/	A), lines 1–3)							62,304
					art IX, column (A	,							
	1 45 0				loyee benefits (F		(A) lines 5-10)			83	,190		98,306
sesued	16-0		-	-			(A), IIIIes 5–10)	•		0.5	, 150		20,300
Ë	IOAF			-	IX, column (A), i								
Exp				-	, column (D), line	-					<u> </u>		
ш	17 0	Other exp	penses (Par	rt IX, column (A	N), lines 11a-11d	l, 11f–24f)					,247		181,154
	18 T	otal exp	enses. Add	l lines 13-17 (n	nust equal Part I	X, colump(A),/I	me:25)//C	🎚			,437		341,764
	19 R	Revenue	less expens	ses. Subtract I	ine 18 from line	12		ري ا		15	,104		316,544
50						1 कर		180		of Curre	nt Year		nd of Year
Net Assets or	20 T	otal ass	ets (Part X,	, line 16)		M JUL	1 1 2011	IO (A)	1	, 693	<u>, 328</u>	2	,303,340
Ϋ́	21 T	otal liab	ulities (Part	X, line 26)		ĵ.		18		198	,457		491,925
$\frac{2}{2}$	∄ 22 N	let asse	ts or fund ba	alances Subtra	act line 21 from I	ine 20 AC		2000	1	,494		1	,811,415
	Part II		gnature E			J65	7 211, 131				, , ,		<u> </u>
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He	ere		Barba	ra Dash	iell			Exe	cutive	Dire	ector	•	
		7	ype or print n	ame and title									
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US	e Only				Jackson							_	
		Firm's a	ddress 🕨	Alexan	dria, LA	71303				Pho	ne no	318-	·445-9334
Ма	y the IRS	S discus	s this return	n with the prepa	arer shown abov	e? (see instruct	ions)						Yes No
_					he separate inst				_				Form 990 (2010)
DΑ						•							(2010)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 119,527 including grants of \$ 62,304) (Revenue \$ 81,488)

4e Total program service expenses ▶ 187,315

DAA

Form 990 (2010)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	•	x	110
^	·	_12	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		x
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	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
• •	VII, VIII, IX, or X as applicable	含		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		-	
_	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
Ū	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
Lu	Schedule D, Parts XI, XII, and XIII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120		_
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	174		
-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	l	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	- 10		-
	If "Yes," complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	_va		
~	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20ь		

<u> </u>	Triv Checklist of Required Schedules (Continued)					
04	Did the experience are also on the off cook of supply and also one of the cook				Yes	No
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		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		-	21		
~~	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22	x	l
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	•	ŀ			
	organization's current and former officers, directors, trustees, key employees, and highest compensated					
	employees? If "Yes," complete Schedule J			23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	•	ŀ		-	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b					
	through 24d and complete Schedule K. If "No," go to line 25			24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	•	.	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	-	Ì			
_	to defease any tax-exempt bonds?			24c		
d		•	ľ	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction					
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		- 1			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?					
	If "Yes," complete Schedule L, Part I			25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	•	Ţ			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		į	26		X
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		į	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,				X 2/2	ا ایک ارتی
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)					35
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	٠.		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					
	Schedule L, Part IV			28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)					
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		}	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					
	conservation contributions? If "Yes," complete Schedule M			30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					32
~~	Part I		}	_31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"					v
22	complete Schedule N, Part II	•	ŀ	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I			33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		}	33		
-	IV, and V, line 1			34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		ŀ	35		X
а	Did the organization receive any payment from or engage in any transaction with a		•			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,					
	Part V, line 2	Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			ŀ		
	related organization? If "Yes," complete Schedule R, Part V, line 2		İ	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		ľ			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,				1	
	Part VI			37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			\Box		
	19? Note. All Form 990 filers are required to complete Schedule O			38	x	
				_	000	

Form 990 (2010) Inner-City Revitalization 72Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V

19 Enter the number reported in Box 3 of Form 1098 Enter -0- in rot applicable 10 Did the cognization comply with backup withholding rules for reportable payments to vendors and reportable gamment growth provided in the rot Enter -0- in rot applicable 20 Did the cognization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gammling) withings to prize winnings to prize winnin		the state of the s					T.,	T'
be Enter the number of Forms W-20 included in line 1a, Enter -0- in lot applicable Oils the organization comply with backup withfolding rules for reportable gamments to vendors and reportable gamming (gambling) with application provided in the part of the p	12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	12	20			Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (gambning) withough so prize warners? 22 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendary year ending with to within the year covered by this return 1 It all least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 Note. If the sun of lines 1 and 26 is greater than 25 (2,00 cmm) be required to -left Lees emistancians) 3 Did the organization have unrelated huseness gross mome of \$1,000 or more during the year? 3 Left Have 1 If the sun of the 1 American 1 If the complex of the organization have an interest in, or a signature or other authority over, a final civil account in a foreign country. ► 4 A An y time during the calendar year, did the organization have an interest in, or a signature or other authority over, a final civil account in a foreign country. ► 5 Left Haves, the complex of the foreign country. ► 5 Left Haves, the complex party only the organization have an interest in, or a signature or other authority over, a final civil account in a foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the man of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 Left Haves, the complex prize of the foreign country. ► 5 L	_					\dashv	İ	
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Sinternents, Need for the calendary year ending with or within the year covered by this return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to ending the year? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to ending the year? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to ending the year? By If Yes, 1 has it field a Form 900-T for this year? If Yes, 1 provide an explanation in Schedule O If Yes, 1 has it field a Form 900-T for this year? If Yes, 1 provide an explanation in Schedule O If Yes, 1 has it field a Form 900-T for this year? If Yes, 1 provide an explanation in Schedule O If Yes, 1 and 1 an	2a	· · · · · · · · · · · · · · · · · · ·			•			
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	DAA						990	(2010)

Form		2-1402559				F	age 6
Pa	irt VI Governance, Management, and Disclosure For each "Yes" re	sponse to lines 2 t	hrou	ah 7b bel	ow, ar	nd fo	r a
	"No" response to line 8a, 8b, or 10b below, describe the circun						
	O. See instructions.	,,		3-			
	Check if Schedule O contains a response to any question in the	nis Part VI					X
Sec	tion A. Governing Body and Management						
			-		-	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	i	1a	13	۶۳.,	,	.1
b	Enter the number of voting members included in line 1a, above, who are independent		1b	13	$\exists \&$		1 1
2	Did any officer, director, trustee, or key employee have a family relationship or a business	relationship with	<u>,</u>				
	any other officer, director, trustee, or key employee?	· olationionip vviti			2	`*\-	X
3	Did the organization delegate control over management duties customarily performed by o	r under the direct	•	•	1	<u> </u>	
	supervision of officers, directors or trustees, or key employees to a management company				3		x
4	Did the organization make any significant changes to its governing documents since the pr	•	•		4		x
5	Did the organization become aware during the year of a significant diversion of the organization			•	5		x
6	Does the organization have members or stockholders?	allori 5 assets		•	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one of	or more members			1	\vdash	
	of the governing body?	more members			7a	ŀ	x
b	Are any decisions of the governing body subject to approval by members, stockholders, or	other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions un	•			4,47	C1 (10)	<u> </u>
·	the year by the following:	deriaken dunng					13
а	The governing body?				2.0	X	á
b	Each committee with authority to act on behalf of the governing body?				8a	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who can				8b		
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule						
Sec	tion B. Policies (This Section B requests information about policies not		orno	I Dovonu	9		X
<u> </u>	tion b. I olicies (This occitor b requests information about policies hot	required by the III	<u>ema</u>	i neveriu	e C00		
10a	Does the organization have local chanters, branches, or offiliates?				40=	Yes	No
b	Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities				10a		X
U					401		
11a	chapters, affiliates, and branches to ensure their operations are consistent with those of the	-		•	10b		
ı ıa	Has the organization provided a copy of this Form 990 to all members of its governing bod form?	y before filing the				v	1
b	• • • • • • • • • • • • • • • • • • • •	00		•	11a	X	38
	Describe in Schedule O the process, if any, used by the organization to review this Form 9	90.			شُدُّ ه	·	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interest	is that could give				v	l
_	rise to conflicts?			• • •	12b	_X	
С	Does the organization regularly and consistently monitor and enforce compliance with the p	policy" If "Yes,"			1		
40	describe in Schedule O how this is done				12c		X
13	Does the organization have a written whistleblower policy?	•		•	13	X	<u> </u>
14	Does the organization have a written document retention and destruction policy?			•	14	<u> X</u>	
15	Did the process for determining compensation of the following persons include a review an	•••			,	1, t + 1	
	independent persons, comparability data, and contemporaneous substantiation of the delib	eration and decision?					
a	The organization's CEO, Executive Director, or top management official				15a		X
b	Other officers or key employees of the organization				15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				\$2 m Ali	Sec.	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arrangement			34.2		
	with a taxable entity during the year?				16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization					100	
	participation in joint venture arrangements under applicable federal tax law, and taken step	s to safeguard the			W.		
	organization's exempt status with respect to such arrangements?				16b		L
<u>Sec</u>	tion C. Disclosure	 					
17	List the states with which a copy of this Form 990 is required to be filed ▶ None						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990,	and 990-T (501(c)(3)s o	nly) av	/aılable			•
	for public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing doc	uments, conflict of inter	est pol	ю,			
	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	ne				
	organization ▶ Barbara Deshiell PO Box						

<u>LA</u> 71309

Alexandria

Form 990 (2010)	Inner-City	Revitalization
UIIII 990 (2010)	TIME CITY	VC ATCOTTEGETOR

DAA

72-1402559

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Form **990** (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the orga	ınızatıon nor an	y rela	ated	orga	nıza	tions	con	npensated any current offic	er, director, or trustee	
(A) Name and Title	(B) Average hours per			checi	C) k all t	that a _l	pply)	compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) See Attached for	0.00	Lis	ti	ng				0	0	O
(2) Barbara Dasheill										
Executive Director	40.00			X			<u> </u>	46,500	0	0
(3)										
(4)										
(5)										,
(6)										
(7)										
(8)										
(9)										
(10)		-			_					
(11)										
(12)			-							
(13)		-								
(14)			_							
(15)										
(16)					_					

Form **990** (2010)

Pa	rt VII Section A. Officers	, Directors, Trus	stee	з, Ке	y Er	nplo	yee	s, an	nd Highest Compensated	Employees (continued)	
	(A) Name and Title	(B) Average	Pos	ition ((chec	C) k all t	that a	ppły)		(E) Reportable	(F) Estimated
		hours per week (describe hours for related organizations in Schedule O)	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
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
(26)											
(27)											
(28)											, , , , , , , , , , , , , , , , , , , ,
1b	Sub-total				•	·		>	46,500		
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectic	n A	•			>	46,500		
2	Total number of individuals (in				thos	e lis	ted a	bove		\$100,000 in	
	reportable compensation from	the organization	<u> </u>	0			-				Yes No
3	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization	' complete Schede e 1a, is the sum	dule of re	J for porta	suci able	h ind com	lıvıdı pens	ual satio	n and other compensation	from the	3 X
5	Did any person listed on line 1 for services rendered to the or									ndıvidual	5 X
Sec 1	ction B. Independent Contractor Complete this table for your five	e highest comp	ensa	ted :	ndep	end	ent o	contr	ractors that received more	than \$100,000 of	
	compensation from the organi	Zation (A) business address						Ī		(B) tion of services	(C) Compensation
J	V Construction Grou				•	757	'5 d	ef	ferson Hwy #60	tion of services	Compensation
В	aton Rouge	LA	. 7	06	06		_	C	Construction		336,727
								_			
	Total number of independent of	contractors (incli	ıdına	but	not I	ımıt4	ed to	thos	se listed above) who		J. C. S. S. S. S. S. S. S. S. S. S. S. S. S.
_	received more than \$100,000	-	_						22 Hotel above, Will	•	

Pa	rt V	III Statement of Reve	nue						
1						(A)	(B) Related or	(C)	(D) Revenue
1		•				Total revenue	exempt	Unrelated business	excluded from tax
i							function revenue	revenue	under sections 512, 513, or 514
S S	1ส	Federated campaigns	1a				10101100		012, 010, 01011
Program Service Revenue Contributions, gifts, grants and other similar amounts	b	Membership dues	1b						
ğΕ	~	Fundraising events	1c	-					
ifts ara	ں ہ		1d						
a,e	a	Related organizations			20 124				
Sir	e	Government grants (contributions)	1e		528,124		,		
ig je	T	All other contributions, gifts, grants, and similar amounts not included above	l l		06 640				
를			1f		26,613				
i pu	g	Noncash contributions included in lines 1a-	-1f \$	5	17,500		,		
0	h	Total. Add lines 1a-1f		·	•	554,737			
Jue					Busn. Code				
š	2a	Rent - Olive House		L	_	55,355	55,355		
8	b	Rent - IRC				40,445	40,445		
Ş	С	Service/maint./Mgt	Fee	ſ		4,243	4,243		
Ser	d	Laundry Facility		ſ		928	928		
Ē	е	Miscellaneous Incom	е	ſ		100	100		
gre	f	All other program service reve		Ī		42	42		
P.	q					101,113			
		Investment income (including	dividen	ds interes					
			airiacii	ao, miorce	·"	2,458			2,458
		and other similar amounts)Income from investment of tax-exempt bond pr				2,430			2,456
			r-exem	or poug bu	oceeds -				
	5	Royalties		/··\ Da			<u> </u>		
	_	(i) Real		(II) Pe	ersonal	* *	* ,		
	6a	·					* **		
	b	Less rental exps				,			
	С	Rental inc or (loss)						·	-
		7a Groce amount from							
	r a	sales of assets (i) Securities	5	(II) C	Other	,	À \$.		
		other than inventory					<i>‰</i>		
	b	Less cost or other				¥			
		basis & sales exps					(1) (1)		
	С	Gain or (loss)				,	* *		r
	d	Net gain or (loss)			•				J
_		Gross income from fundraising eve	nts [
nue		(not including \$				*			
Ş		of contributions reported on line 1c)	\ I			* *			:
æ		See Part IV, line 18	a			× st			
Other Reven	h	Less: direct expenses	្នំ				. *	3	
ŏ		Net income or (loss) from fund	~ L	ovente			* '	<u> </u>	
				everits			•		
	ya	Gross income from gaming activitie				*	۸,		
		See Part IV, line 19	a						
		Less direct expenses	ьĹ			**			
		Net income or (loss) from gam	ung act	ivities	•				
	10a	Gross sales of inventory, less				4			
		returns and allowances	a			w v			
		Less cost of goods sold	ь						
	С	Net income or (loss) from sale	s of inv	entory					
		Miscellaneous Revenue			Busn. Code				
	11a		-						****
	b	•		Ī					
	С			Ī					
	d	All other revenue .		Ī					
	е	Total. Add lines 11a-11d		_	•				
	12	Total revenue. See instruction	าร			658,308	101,113	0	2,458

Part IX Statement of Functional Expenses

Form 990 (2010)

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must				<u> </u>
	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		· · · · · · · · · · · · · · · · · ·		0.40
•	organizations in the U.S. See Part IV, line 21			* ***	
2	Grants and other assistance to individuals in			, , , ,	
-	the U.S. See Part IV, line 22	62,304	62,304	***	
2	ŕ	02,304	02,304		
3	Grants and other assistance to governments,				t .
	organizations, and individuals outside the			30 86	54,
	U.S. See Part IV, lines 15 and 16			* ** **	, , , , , , , , , , , , , , , , , , ,
4	Benefits paid to or for members			* 13 1 "	*****
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	98,306	30,327	67,979	
8	Pension plan contributions (include section 401(k)			<u> </u>	
	and section 403(h) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	2,295	2,295		
~	Accounting	7,867	2,233	7,867	
d	Lobbying	7,007		· 7,007	
u	Professional fundraising services See Part IV, line 17				
4	-		·		
	Investment management fees	22 960		22 060	
g	Other	23,869 238	· · · -	23,869	
12	Advertising and promotion			238	
13	Office expenses	2,911		2,911	<u> </u>
14	Information technology				<u> </u>
15	Royalties				<u> </u>
16	Occupancy		<u></u>		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	46,652	40,125	6,527	
23	Insurance	25,743	14,645	11,098	
24	Other expenses Itemize expenses not covered	5 3 .	> 2*		*{
	above (List miscellaneous expenses in line 24f. If	· · · · ·			***
	line 24f amount exceeds 10% of line 25, column		1. ()		
	(A) amount, list line 24f expenses on Schedule O)			The Contraction	
а	Maintenance	23,614	23,614		
b	Interest Expense	11,671	•	11,671	
С	Utilities - Electricity	10,018	5,009	5,009	
d	Utilites	8,034	2,973	5,061	
e	Telephone	4,091		4,091	
f	All other expenses	14,151	6,023	8,128	
25	Total functional expenses. Add lines 1 through 24f		187,315	154,449	0
	Joint costs. Check here ▶ If following	,			
	SOP 98-2 (ASC 958-720). Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				
DAA	pargri and randialoung collettation	<u> </u>			Form 990 (2010)

P	art)	C Balance Sheet			
		•	(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing	96,146	1	55,742
	2.	Savings and temporary cash investments	20,669	2	73,300
	3	Pledges and grants receivable, net	36,142		136,072
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key	· · · · · · · · · · · · · · · · · · ·		33
		employees, and highest compensated employees. Complete Part II of Schedule L		 5	_ ×
	6	Receivables from other disqualified persons (as defined under section		`	. \$1. \$2 ³ .
	_	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing	***	.\\\	
		employers and sponsoring organizations of section 501(c)(9) voluntary	35, * 45	, '	
		employees' beneficiary organizations (see instructions)		6	· · · · · · · · · · · · · ·
Assets	7	Notes and loans receivable, net	28,057	7	26,480
SSE	8	Inventories for sale or use	54,887	8	583,388
Ą	9	Prepaid expenses and deferred charges	1,153		1,153
	-	Land, buildings, and equipment: cost or	/ 4/133		27.55
	700	other basis Complete Part VI of Schedule D 10a 1,653,104	4	% 35	
	h	Less. accumulated depreciation 10b 227, 466		10c	1,425,638
	11	Investments—publicly traded securities	1,434,700	11	1,423,030
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,566		1 567
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,693,328	15 16	1,567 2,303,340
	17	Accounts payable and accrued expenses	1,571	17	35,597
	18	Grants payable	1/3/1	18	33,331
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	· · · · · · · · · · · · · · · · · · ·
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	· · · · · · · · · · · · · · · · · · ·
Liabilities	22	Payables to current and former officers, directors, trustees, key	. 43	21	1 X X X
iic	ZZ.	employees, highest compensated employees, and disqualified persons.	* * *		, , , , , , , , , , , , , , , , , , , ,
ē		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	179,870	24	444,956
	25	Other liabilities Complete Part X of Schedule D	17,016		11,372
	26	Total liabilities. Add lines 17 through 25	198,457	26	491,925
S		Organizations that follow SFAS 117, check here ▶ X and complete	190,437	20	491,925
Se		lines 27 through 29, and lines 33 and 34.		3	
an	27	Unrestricted net assets	1,453,651	اد د 27	1,790,086
Bal	28	Temporarily restricted net assets	40,020	28	20,129
9	29	Permanently restricted net assets	1,200		1,200
5	23	Organizations that do not follow SFAS 117, check here ▶ □ and	1,200	25	2.5
Ļ		complete lines 30 through 34.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	· ·	
0	30	Capital stock or trust principal, or current funds	\$: W		
ë	31	Paid-in or capital surplus, or land, building, or equipment fund	-	30	
SS	32	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32 33	Total net assets or fund balances	1,494,871	32	1 011 /15
S	34	• •		33	1,811,415
	34	Total liabilities and net assets/fund balances	1,693,328	34	2,303,340

Form **990** (2010)

orm	990 (2010) Inner-City Revitalization	<u>7</u> 2-1402559			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any questi	on in this Part XI	•			
	•					
1	Total revenue (must equal Part VIII, column (A), line 12)		1 1	6	58,	308
2	Total expenses (must equal Part IX, column (A), line 25)		2	3	41,	764
3	Revenue less expenses Subtract line 2 from line 1		3	3	16,	544
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, colu	ımn (A))	4	1,4	94,	871
5	Other changes in net assets or fund balances (explain in Schedule O)		5	_	-	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equa	ıl Part X, line 33,				
	column (B))		6	1,8	11,	415
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any questi	on in this Part XII				
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual	Other	_	_		
	If the organization changed its method of accounting from a prior year or checked	"Other," explain in		- ,	,	
	Schedule O.			1		
2a	Were the organization's financial statements compiled or reviewed by an independent	dent accountant?		2a	_	X.
b	Were the organization's financial statements audited by an independent accounta	int?		2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes re-	sponsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an	independent accountant?		2c	х	
	If the organization changed either its oversight process or selection process durin	g the tax year, explain in	·			cs .
	Schedule O.					3
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial stater	ments for the year were				
	issued on a separate basis, consolidated basis, or both				,	2
	Separate basis Consolidated basis Both consolidated and separ	ate basis		` _		٠
За	As a result of a federal award, was the organization required to undergo an audit of	or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization	ion did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken	to undergo such audits		3b	X	
				Form	990	(2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Inner-City Revitalization Corporation

Employer identification number 72–1402559

Pá	art I	Reas	on for Public Cha	ity S	Status (A	All organizat	ions	must c	omplet	e this	part.)	See ir	struct	ions.			
Γhe	orgai	nization is not	a private foundation be	cause	it is. (For	lines 1 through	11, cl	heck only	one box	.)			•				
1			nvention of churches, or			=		-									
2	П		cribed in section 170(b														
3	Ħ		a cooperative hospital s					tion 170	(b)(1)(A)(i	iii).							
4	H	•	search organization ope		•					•)(1)(A)(i	ii). Ente	r the ho	spital'	s name		
-	ш	city, and state					-				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				,	
5		•	on operated for the ben	efit of	a college	or university ov	wned d	or operati	ed by a g	overnme	ental uni	t descri	hed in	•			
Ŭ		_	b)(1)(A)(iv). (Complete		•	or armyoromy or	VII.CG (or operati	od by a g	0 101111110	ontar an	. 000011	JCG				
6			ite, or local government		-	ıl unıt described	d in ee	action 17	n/h\/1\/A	WW							
7	X		on that normally receive	•							from the	, aonor	d public				
•	41	•	•				OIT IIO	ili a gove	en in Entai	i di iit Oi	iiOiii tiie	genera	ii public				
			section 170(b)(1)(A)(vi)	-	-	· ·	Dont	U N									
8	\mathbb{H}	•	trust described in secti					•			b b-						
9		•	on that normally receive									•	•	SS			
			activities related to its			•		•		•							
		• •	gross investment incon					•			() from t	ousines	ses				
			he organization after Ju			•		•		•							
10	Н	J	on organized and opera		•	•		•									
11	Ш	•	on organized and opera		•		•					•					
		•	one or more publicly sup	•	_							-	section				
			eck the box that describ										_				
		a Type			c [_	Type III-Fund				d		e IIIOt					
е	Ш	-	this box, I certify that the	_				-									
			undation managers and	other	than one	or more publicly	y supp	oorted or	ganization	ns descr	ibed in s	section	509(a)(1)			
		or section 50								_							
f		-	ation received a written	deterr	mination fr	om the IRS tha	at it is	a Type I,	Type II,	or Type	III supp	orting					
		•	check this box								-						
g		Since August	t 17, 2006, has the orga	nızatı	on accepte	ed any gift or co	ontribu	ution from	any of th	ne							
		following per															
			n who directly or indirec				ether v	with perso	ons descr	ibed in (II) and					Yes	No
			w, the governing body o			-									11g(ı)		
			member of a person de			•									11g(ii)		
		(iii) A 35% c	ontrolled entity of a per-	son de	escribed in	(i) or (II) above	9?								11g(iii)		
<u>h</u>		Provide the t	following information ab	out the	e supporte	d organization((s)					1	-				
(i)		of supported	(ii) EIN			pe of organization			organization		ou notify		s the		(vii) Amo		
	org	anization				ibed on lines 1–9 e or IRC section			sted in your document?		nization in of your	organızat	zed in the		supp	ort	
						instructions))		goroning		sup	port?	U	S ?				
				<u> </u>				Yes	No	Yes	No	Yes	No		_		
(A)																	
									<u> </u>								
(B)									1			-					
												ļ					
(C)									ļ								
(D)		- 		T													
		 										<u> </u>					
(E)				T													
												<u> </u>					
						4 A 4 4 6 1	7	1,34	^ `` ·***	, Sp.							

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	405,075	114,410	106,416	171,613	554,737	1,352,251
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge				_		
4	Total. Add lines 1 through 3	405,075	114,410	106,416	171,613	554,737	1,352,251
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	`	,				
6	Public support. Subtract line 5 from line 4			` . *\$%	的數學是不	·	1,352,251
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	405,075	114,410	106,416	171,613	554,737	1,352,251
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,654	2,435	2,226	2,501	2,458	12,274
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	4,582					4,582
11	Total support. Add lines 7 through 10					Ţ´ ;** ,	1,369,107
12	Gross receipts from related activities, etc.	(see instructions)				. 12	101,113
13	First five years. If the Form 990 is for the	organization's first,	second, third, fou	irth, or fifth tax yea	ar as a section 501	I(c)(3)	
	organization, check this box and stop her					·	>
Sec	tion C. Computation of Public Su	upport Percent	age			···-·	
14	Public support percentage for 2010 (line 6	, column (f) dıvıded	by line 11, colum	n (f))		14	98.77%
15	Public support percentage from 2009 Sch		•			15	%
16a	33 1/3% support test—2010. If the organi	zation did not chec	k the box on line 1	3, and line 14 is 3	3 1/3% or more, o	check this	
	box and stop here. The organization quali	• •					► X
b	33 1/3% support test—2009. If the organi				5 is 33 1/3% or m	ore,	
	check this box and stop here. The organiz	•		•			▶ [
17a	10%-facts-and-circumstances test—201	•					
	10% or more, and if the organization meet						
	Part IV how the organization meets the "fa organization		_	•		•	> [
b	10%-facts-and-circumstances test—200						
	15 is 10% or more, and if the organization	meets the "facts-ar	nd-circumstances'	test, check this b	ox and stop here.	•	
	Explain in Part IV how the organization me	eets the "facts-and-	circumstances" te	st The organization	on qualifies as a pr	ublicly	
	supported organization				•		▶ _
18	Private foundation. If the organization do	i not check a box o	n line 13, 16a, 16b	, 17a, or 17b, che	ck this box and se	е	
	instructions					••	▶
	<u> </u>	<u> </u>	<u> </u>	··	· ·		

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support					,	
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			-			
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b			_			
8	Public support (Subtract line 7c from line 6.)			415			
	tion B. Total Support			,			
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		-				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	~	st, second, third, fo	urth, or fifth tax yea	ar as a section 501	(c)(3)	▶ [
Sec	tion C. Computation of Public S		ntage	•	•		
15	Public support percentage for 2010 (line 8	 		nn (f))		15	%
16	Public support percentage from 2009 Sch	edule A, Part III, li	ine 15	.,,		. 16	%
Sec	tion D. Computation of Investme	ent Income Pe	rcentage				
17	Investment income percentage for 2010 (line 10c, column (f	f) divided by line 13	3, column (f))		17	%
18	Investment income percentage from 2009		• • • • • • • • • • • • • • • • • • • •			18	%
19a	33 1/3% support tests—2010. If the orga						. —
	17 is not more than 33 1/3%, check this b						▶ _
b	33 1/3% support tests—2009. If the orga						_ ┌
20	line 18 is not more than 33 1/3%, check the Private foundation. If the organization did						
==		Gridon a box	and the state of t		500 111511401		

Schedule A (F	Supplem	ental Ir ne 17a d	nformation.	Complete		e the explanation	72-140255 ns required by Part ny additional inform	II, line 10;
Part I	I, Line	10	- Other	Income	Detail			
Other	Income				, \$	4,582		
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection
Employer identification number

Part'II		nner-City Revitalization		_	
Total number at end of year Total number at end of year					
Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate grants from (during year) Aggregate grants from (during year) Aggregate grants from (during year) Aggregate grants from (during year) Aggregate grants from (during year) Aggregate grants from (during year) Aggregate value at end of year	Pa	ort I Organizations Maintaining Donor Advised Fu	inds or Other Similar Funds or	Account	s. Complete if the
Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charable purposes and not for the herefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III ★ Conservation Easements. Complete lif the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(9) do conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (a) 2c d d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ★ A Number of states where property subject to conservation easement is located ★ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements is holds? Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ★ A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ★ A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements du		organization answered "Yes" to Form 990, Par	t IV, line 6.	· · · · · · · · · · · · · · · · · · ·	
2 Aggregate contributions to (during year) 3 Aggregate contributions for (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization sproperty, subject to the organizations exclusives legal control?			(a) Donor advised funds	(b)	Funds and other accounts
Aggregate grants from (during year) 4. Aggregate value at end of year 5. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Old the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III ★ Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements in a certified historic structure included in (a) 2b Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easements is located Noundary of states where property subject to conservation easement is located Noundary of states where property subject to conservation easements is located Noundary of conservation easement reported on hine 2(d) above satisfy the requirements during the year Noundary of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Noundary of expenses incurred in monito	1	Total number at end of year			
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violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \$ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	5		•		
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \$\begin{array}{c} \\$ \\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of					Yes No
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \$\begin{array}{c} \\$ \\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	6	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	cing conservation easements during the y	ear .	
 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 		>			
 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 	7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conservation easements during the year		
(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of			• ,		
(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)		
 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 		•			Yes No
balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	9	In Part XIV, describe how the organization reports conservation easen	nents in its revenue and expense stateme	nt, and	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of		balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that o	describes th	ne
Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of		organization's accounting for conservation easements.			
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	Pá			Similar A	Assets.
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of		Complete if the organization answered "Yes" to	o Form 990, Part IV, line 8.		
\cdot	1a	If the organization elected, as permitted under SFAS 116 (ASC 958), i	not to report in its revenue statement and	balance sh	eet
multiple page of the page of the fact of the factories to the forest of		works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of	
public service, provide, in Part XIV, the text of the foothole to its financial statements that describes these items.		public service, provide, in Part XIV, the text of the footnote to its finance	cial statements that describes these items		
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet	b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	to report in its revenue statement and bala	ance sheet	
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of		works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of	
public service, provide the following amounts relating to these items:		·			
(i) Revenues included in Form 990, Part VIII, line 1				•	\$
(ii) Assets included in Form 990, Part X					\$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the	2	···	r other similar assets for financial gain, pro	ovide the	•
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:					
a Revenues included in Form 990, Part VIII, line 1	а			•	\$
b Assets included in Form 990, Part X	b	•	·		\$

<u>Sche</u>	dule D (Form 990) 2010 Inner-Cit	<u>y Revitalizat</u>	ion	<u> </u>	<u>.402559</u>	Page 2
Pa	rt III Organizations Maintaining			ures, or Othe	er Similar Ass	
3	Using the organization's acquisition, accessio collection items (check all that apply).	n, and other records, chec	ck any of the followin	g that are a signi	ficant use of its	
а	Public exhibition	d Loan o	or exchange program	s		
b	Scholarly research	e Other				
c	Preservation for future generations	J [] J		•	•	
4	Provide a description of the organization's col	ections and explain how t	hey further the organ	nization's exempt	nurnose in Part	
•	XIV.	out of and of plant flow	andy runarion and origin		parpood in rain	
5	During the year, did the organization solicit or	receive donations of art. I	nistorical treasures in	or other similar		
Ū	assets to be sold to raise funds rather than to					Yes No
Pa	art IV Escrow and Custodial Arra				d "Yes" to For	
L	line 9, or reported an amou	_ ,			4 100 10101	m 550, r are rv,
	Is the organization an agent, trustee, custodia			er assets not		
Iu	included on Form 990, Part X?	iror other intermediary to	CONTIDUIDATE OF OUR	ei assets 110t		Yes No
h	If "Yes," explain the arrangement in Part XIV a	and complete the following		•	•	les No
	ii res, explain the arrangement iii i art XIV a	and complete the lonowing	j table.			Amount
_	Pogunajna balanga				1-	7 (modific
ں ۔	Beginning balance Additions during the year			• •	1c	
a					. 1d	
e	Distributions during the year		•		. <u>1e</u>	
1	Ending balance			•	. [1f]	
	Did the organization include an amount on Fo	rm 990, Part X, line 21?	•	•	•	Yes No
	If "Yes," explain the arrangement in Part XIV. Int V : Endowment Funds. Completion	oto if organization o	nowared "Vee" t	- Form 000 I	Dort IV/ line 10	
Pa	irt V 📜 Endowment Funds. Compl		T			
_		(a) Current year	(b) Prior year	(c) Two years ba		back (e) Four years back
1a		1,200	1,200	1,4	200	035* \ " " "
b	Contributions	<u> </u>			*	
C	Net investment earnings, gains, and				* '-	
_	losses				4 .	
d	Grants or scholarships				~ YZ	
е	Other expenditures for facilities and					
	programs				's & *	
f	Administrative expenses				26 ÅW	
g	End of year balance	1,200	1,200	1,2	200	
2	Provide the estimated percentage of the year	end balance held as [.]				
а	Board designated or quasi-endowment ▶	. %				
b	Permanent endowment ► 100.00 %					
С	Term endowment ► %					
3a	Are there endowment funds not in the posses	sion of the organization th	at are held and adm	ınıstered for the		
	organization by					Yes No
	(i) unrelated organizations					3a(i) X
	(ii) related organizations					3a(ii) X
b	If "Yes" to 3a(II), are the related organizations	listed as required on Scho	edule R?		_	3b
4	Describe in Part XIV the intended uses of the	organization's endowmen	t funds			
Pa	art VI Land, Buildings, and Equip			0.		
	Description of investment	(a) Cost or other basis	(b) Cost or other t	pasis (c)	Accumulated	(d) Book value
		(investment)	(other)	d€	epreciation	
1a	Land		75.	826		75,826
	Land	l .	, - ,			
b	Buildings		1,526		193,830	
	Buildings				193,830	
С	Buildings Leasehold improvements		1,526,	759		1,332,929
c d	Buildings		1,526,		9,028 24,608	1,332,929 2,822 14,061

Part VII	Investments—Other Securities. See Form 990), Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of v	
	(including name of security)		Cost or end-of-year	market value
(1) Financial of				
	ld equity interests			
(3) Other				
. (A) .				
. (B)				
(C)			<u> </u>	
(D) .				
. (E)				
. (F)				
(G) .				
.(H)				
(I) T-1-1 (O-1)	(h)			
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.)	Dort V line 12		*
Part VIII	Investments—Program Related. See Form 99 (a) Description of investment type	T	(a) Mathadata	· · · · · · · · · · · · · · · · · · ·
	(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)				
	n (b) must equal Form 990, Part X, col (B) line 13.)		, "'+3×\$'	
Part IX	Other Assets. See Form 990, Part X, line 15.	<u> </u>		
	(a) Description			(b) Book value
(1)				· · · · · · · · · · · · · · · · · · ·
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, line 25			
1.	(a) Description of liability	(b) Amount	Ø Č	
	income taxes		**************************************	>
	al Deposits - Olive House	5,857		
	al Deposits - IRC	3,434		
	for Kees Park	1,254		
	ties Deposits aid Rental Income	470 242		
	ance Escrow	R		
	Taxes Escrow	105 10		
	IGNOS EBCIOM	10		
(9)			The state of the s	
(10) (11)				
	n (b) must equal Form 990, Part X, col. (B) line 25.)	11,372		^
o CIN 40 (AC	O 740) Fastants to Back VIV a seed the late (15 (201)	11,3/4	<u> </u>	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2010 Inner-City Revitalization	72-14025	59	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial State	ments	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	658,308
2	Total expenses (Form 990, Part IX, column (A), line 25)	•	2	341,764
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	316,544
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 through 8	·	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	ı	10	316,544
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme		eturn	
1	Total revenue, gains, and other support per audited financial statements		1	658,308
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	•	9	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2¢	7.3	
d	Other (Describe in Part XIV.)	2d	7.5	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	• • • •	3	658,308
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	T	14	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	658,308
	rt XIII. Reconciliation of Expenses per Audited Financial Statement	ents With Expenses per		
1	Total expenses and losses per audited financial statements	2.00.000 po.	1	341,764
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
- а	Donated services and use of facilities	2a	4	
b	Prior year adjustments	2b		
	Other losses	2c		
ď	Other (Describe in Part XIV.)	2d	- 130 5	
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	341,764
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	f		341,704
٠ •	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIV.)	i i		
	Add lines 4a and 4b	[4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	341,764
			131	
	rt XIV Supplemental Information			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 3, and			
	V, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d at	nd 4b Also complete this part to	o provide	
any a	dditional information.			
		• •	••	•
				•
			•	•

Schedule D (Form 990) 2010 Inner-City Revitalization 72-1402559 Part XIV Supplemental Information (continued)

Schedule D (Form 990) 2010

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Parti

General Information on Grants and Assistance

Corporation

Inner-City Revitalization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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

► Attach to Form 990.

Employer Identification number 72–1402559

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OMB No 1545-0047

- 2	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ne amount of the groe? ntoring the use of	grants or ass grant funds	istance, the grantees in the United States	eligibility for the grants	or assistance, an	p	X Yes	%
Pa	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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. Part II can be duplicated if additional space is needed	vernments ar scipient that re e is needed	nd Organi sceived m	zations in the Ul ore than \$5,000.	rited States. Com Check this box if	plete if the org no one recipie	anization answ nt received mo	rered "Yes" to re than \$5,000. Pa	= <u></u>
-	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	t
£									
(3)									
ව									
<u>\$</u>									
(2)									
9									
3									
®									
(6)									
0 6	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	organizations			:				

Schedule I (Form 990) (2010)

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

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72-1402559

Schedule I (Form 990) (2010) Inner-City Revitalization

(e) Method of valuation (book, FMV, appraisal, other) Rental Assistan Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Other 62,304 (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients 43 (a) Type of grant or assistance 1 Rent Expense Part * Part IV

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

• Attach to Form 990 or 990-EZ.

2010
Open to Public

Name of the organization

Inner-City Revitalization Corporation

Employer Identification number 72-1402559

Form 990, Part III, Line 2

The organization was awarded grants to construct single family homes for sale to low income individuals and families.

Form 990, Part III, Line 4d - All Other Achievements
Rental Assistance to low income individuals and families

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
Finance committee reviews and presents the results and explanations of the
990 before the full board

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents, policies, and financial statements are available to the public at request

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Attachment Sequence No.

► See separate instructions. Inner-City Revitalization

Corporation

► Attach to your tax return.

Identifying number

72-1402559

	ess or activity to which this form relates									
	ndirect Depreciat			.,						
Pa	rt I Election To Exper	•	•				data D	art I		
1	Note: If you have a		ty, complete F	an v Defore	you c	comp	nete Pa	arı I.	4	500,000
	Maximum amount (see instruction	-	a inatrilations)						2	300,000
2 3	Total cost of section 179 property Threshold cost of section 179 pro		• • •						3	2,000,000
4	Reduction in limitation. Subtract li	•		•	•	•	•		4	2,000,000
5	Dollar limitation for tax year Subtract lii				talv caa	. inetrue	rtione		5	
6	(a) Descriptio		riess, enter-o- ir me	(b) Cost (busine				lected cost	3	
<u> </u>	(-)	,		(-,		,,	(-, -			<u> </u>
						\neg				
7	Listed property. Enter the amount	from line 29			Τ.	7				^ / **
8	Total elected cost of section 179		s in column (c). Iir	nes 6 and 7		<u> </u>			8	
9	Tentative deduction. Enter the sm						•		9	
10	Carryover of disallowed deduction								10	
11	Business income limitation. Enter			ss than zero) oi	line 5 ((see in	struction	s) ·	11	
12	Section 179 expense deduction. A		•	•	•				12	
13	Carryover of disallowed deduction	·			▶ [13				
	: Do not use Part II or Part III belov							•		£.,.
Pa	rt II Special Depreciat	ion Allowance a	nd Other Dep	reciation (D	o not	inclu	de liste	ed prope	erty.)	(See instructions)
14	Special depreciation allowance fo									
	during the tax year (see instruction	· · · · · · · · · · · · · · · · · · ·	·						14	
15	Property subject to section 168(f)(•	• •						15	
16	Other depreciation (including ACF	• •	•						16	46,335
Pa	rt III MACRS Depreciat		ude listed prop	erty.) (See	nstruc	ctions	s.)			
		-								
			Sect	ion A						
17	MACRS deductions for assets pla	iced in service in tax y							17	317
	MACRS deductions for assets pla If you are electing to group any assets p		years beginning b	efore 2010	sset acco	ounts, c	heck here	▶ □	17	317
	If you are electing to group any assets p		years beginning b	efore 2010 or more general a						317
17 18	If you are electing to group any assets p	placed in service during t	years beginning b	efore 2010 or more general a 7 Tax Year Usine eciation ent use	g the G	Genera			stem	(g) Depreciation deduction
	If you are electing to group any assets Section B—	Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in	years beginning be the tax year into one rvice During 2010 (c) Basis for depri (business/investm	efore 2010 or more general a 7 Tax Year Usine eciation ent use	g the G	Genera	l Depre	ciation Sy	stem	
18	Section B—, (a) Classification of property	Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in	years beginning be the tax year into one rvice During 2010 (c) Basis for depri (business/investm	efore 2010 or more general a 7 Tax Year Usine eciation ent use	g the G	Genera	l Depre	ciation Sy	stem	
18 19a	Section B—. (a) Classification of property 3-year property	Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in	years beginning be the tax year into one rvice During 2010 (c) Basis for depri (business/investm	efore 2010 or more general a 7 Tax Year Usine eciation ent use	g the G	Genera	l Depre	ciation Sy	stem	
18 19a b	Section B—. (a) Classification of property 3-year property 5-year property	Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in	years beginning be the tax year into one rvice During 2010 (c) Basis for depri (business/investm	efore 2010 or more general a 7 Tax Year Usine eciation ent use	g the G	Genera	l Depre	ciation Sy	stem	
19a b c	Section B—. (a) Classification of property 3-year property 5-year property 7-year property	Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in	years beginning be the tax year into one rvice During 2010 (c) Basis for depri (business/investm	efore 2010 or more general a 7 Tax Year Usine eciation ent use	g the G	Genera	l Depre	ciation Sy	stem	
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Forms	Oti	her Notes an	nd Loans Receiv	able		
990 / 990-PF						2010
	For calendar year 2010,	or tax year beginnir	ng			<u> </u>
lame					Employer le	dentification Number
Corporation	evitalization			,	72-14(12550
corporación					72-13(74333
Form 990, Par	rt X, Line 7 -	Additiona	1 Informatio	n		
	Name of borrower			Relationship to disqu	alified pers	son
1) Mortgage Re	eceivable					
2) Long Term I	Receivable					
<u>3)</u>				 .		
4) 5)						
6)						
7)						
8)						
9)						
				A Second Second		* * * * * * * * * * * * * * * * * * * *
Original amount		Maturity		· · · · · · · · · · · · · · · · · · ·		
borrowed	Date of loan	date	R	epayment terms		Interest rate
1)						
2)		-				
3)		-				
4) 5)						
6)		*		-		
7)						
8)		<u> </u>				
9)						
10)	_	1 2 2 2				
*- <u> </u>	· · · · · · · · · · · · · · · · · · ·	` <u></u>		<u> </u>		
Sec	curity provided by borrower			Purpose of le	oan	
1)				 		
2)	· - -		_			
3) 4)						
5)						
6)						
7)	 					
8)						
9) 10)	· ·					
* * / / / /			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		Sold T	
	ation for a second and by I and a		Balance due at	Balance due at	F	air market value
Considera 1)	ation furnished by lender		beginning of year 1,000	end of year 1,00	00	(990-PF only)
2)	·		27,057	25,48		
3)			· · · · · · · · · · · · · · · · · · ·	-		
4)						
5)						
6) 7\					 	
7 <u>) </u>						
9)						
10)						
Totals			28,057	26,48	30	

12/31/2010

INNER-CITY REVITALIZATION CORPORATION BOARD OF DIRECTOR

Names russ and the Nathers and Gennies	W. Address in E	Seiry CHStates	B PHONEH	BOARD OF DIRECTOR PHONER ENAME ADDRESS	Name of Company Profession
Andrew Bindursky	P. O. Box 2026	Alexandria, LA 71309	318-445-2441 W		Alexandria Iron
Sandra Bright Committee Chair	1214 Apple white	Alexandria, LA 71302	$318-448-8841 \ \underline{H}$ $318-623-6068$	brytedst76@aol.com	Retired- Registered Nurse Lower Third Neighborhood Community Leader
Virginia Brown Chair	4306 Wellington Blvd.	Alexandria, LA 71303	318-445-8800 W 318-452-2741cell 318-445-8066 fex	vwb173@aol.com	McBride & Collier Law Firm Attorney at Law
Comelius Coleman Committee Chair	5920 Deerfield Dr.	Alexandria, LA 71301	318-448-4400 JV 318-730-8380cell	Cc2deerfield2aol.com	Louisiana Lagniappe Associate Real Estate Broker
Mona Gaines	1902 Main St. Apt #11	Alexandria, LA 71301	318-449-8548 <u>H</u>	N/a	Tenant at Olive House
Jan Haworth	1155 Lake Dr.	Woodworth, LA 71485	318-487-1366 <u>H</u>	haworthm@bellsouth.net	Executive Director Grandparents Raising Grandkid – Non-Profit
Winnie Marshall	225 15 th St.	Alexandria, LA 71301	$318-445-0120 \ \underline{H}$ $318-613-5591$ cell	louwin@bellsouth.net	Retired - Pinecrest State School President Bolton Ave. Neighborhood Group
G.G. Metoyer Vice- Chair	910 Papin St.	Alexandria, LA 71302	318-443-2439 <u>H</u> 318442-6737 cell	Ggmetnotary@aol.com	Retired- Principal
Randalle Moore Secretary	301 Jackson St. Suite 304	Alexandria, LA 71301	318-445-2825 W 318-730-6362œll 318-443-2349 fax	rmoore@mooreplanninggroup.com	Landscape Architect- Moore Planning Group 730-6362 cell
Louis Roberts	3613 10 th St	Alexandria, LA 71302	318-443-5674 H	Ihroberts1906@yahoo.com	Retired- Asst. Principal
Thomas Roque	934 Third St.	Alexandria, LA 91309	$318-487-2337 \underline{W}$ 800- 514-7369fax	Thomas.roque@capitalonebank.com	Capital One Bank Community Development Mortgage Lending
Heather Rutherford Treasurer	4641 Windermere Place	Alexandria, LA 71303	318-448-3143 ext.415 W 318-447-0338cell	heather@oandcocpas.com	Oestriecher & Company CPA's Certified Public Accountant
Brad Smith	1423 Wimbledon Blvd.	Alexandria, LA 71301	318.445.7269 W 318.613.5771 cell	bsmith@peoplesstate.com	Peoples State Bank Business Development Officer
Sandra Williams	1707 McEnery St	Alexandria, LA 71301	318-613-1905cell	N/a	Minister