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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 Open to Public

Inspection

A For the	2011 Calendar year, or tax year beginning and er	naing								
B Check if applicable	C Name of organization	_	D Employer identificati	on number						
X Address change	NEIGHBORHOOD FUNDERS GROUP, INC.									
Name change	Doing Business As		<u>06-136</u>	<u>8627</u>						
Initial return	Number and street (or P.O. box if mail is not delivered to street address)	oom/suite	E Telephone number							
Termin- ated	1201 CONNECTICUT AVE, NW 3	202-65	2-2400							
Amende	City or town, state or country, and ZIP + 4	G Gross receipts \$	791,023.							
Applica			H(a) Is this a group return							
pending	F Name and address of principal officer.GARLAND YATES		for affiliates?	Yes X No						
SAME AS C ABOVE H(b) Are all affiliates included? Yes No										
I Tax-exempt status: X 501(c)(3)										
	e: ► WWW.NFG.ORG		H(c) Group exemption nu	•						
	organization: X Corporation Trust Association Other	I Year o	of formation: 1991 M St							
	Summary	<u>L</u> 10u1 C	77101711411011. <u>2</u> 33 <u>2</u> 141	ato or logar dominate. 20						
4 5	Briefly describe the organization's mission or most significant activities SEE P.	ART T	II, LINE 1.							
2017 Activities & Governance	meny describe the organization's mission of most significant detivities DDD 1.		<u> </u>							
	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net asset	s.						
8 3 1	lumber of voting members of the governing body (Part VI, line 1a)		3	15						
Ø 4 N	Number of independent voting members of the governing body (Part VI, line 1b)		4	15						
ຶ່ນ 5 T	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		. 5	4						
∯ 6 T	otal number of volunteers (estimate if necessary)		6	15						
(a) 7a T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.						
₹ b 1	Net unrelated business taxable income from Form 990-T, line 34		7b	0.						
2			Prior Year	Current Year						
	Contributions and grants (Part VIII, line 1h)		737,350.	606,648.						
9 5	Program service revenue (Part VIII, line 2g)		112,720.	114,646.						
10 II	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		373.	51.						
06 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,654.	7,014.						
-	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		853,097.	728,359.						
	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,000.	19,415.						
14 E	Benefits paid to or for members (Part IX, column (A), line 4)	}	0.	0.						
15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		294,196.	220,035.						
√છ (I	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
	otal fundraising expenses (Part IX, column (D), line 25) 17,08	3.	-							
Ĭ 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		560,468.	604,597.						
161			859,664.	844,047.						
19	otal expenses: Add lines 13-17 (must equal Part IX, column (A), line 25)	-	-6,567.	-115,688.						
sets or	701	Bed	ginning of Current Year	End of Year						
# 1 P	May Assigned Dailly Sind (18)		385,646.	263,156.						
250 - R	otal liabilities (Part X, Iii 226)		57,747.	50,945.						
21 22	Netwassets or fund, balances Subtract line 21 from line 20		327,899.	212,211.						
	Signature Brock		02,70334							
	ties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my kn	owledge and belief, it is						
	, and complete Declaration of preparar (other than officer) is based on all information of which									
	Land Bath	<u> p p</u>	MNenha	V 15 20/1						
Sign	Signature of officer		Date	13/000						
Here	GARLAND YATES, INTERIM. EXECUTIVE DIRE	CTOR								
1.0.0	Type or print name and title	<u> </u>								
	Print/Type pregarer's name Pregarer's Asignature 1		Date Check	PŢIN						
Paid DAVID F. GRALING CPA Dank F. Shall CPA 11-14-12 "self-employed P 003665										
	2-1392008									
Preparer Firm's name GELMAN, ROSENBERG & FREEDMAN Firm's EIN 52-139. Use Only Firm's address 4550 MONTGOMERY AVE SUITE 650N										
· ···,	BETHESDA, MD 20814-2930 Phone no. (301) 951-9090									
May the iR	S discuss this return with the preparer shown above? (see instructions)		11.110.1101. 1.00	X Yes No						
132001 01-23		ns.		Form 990 (2011)						

LHA For Paperwork Reduction Act Notice, see the separate instructions.

1

132002

			Yes	NIC
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	No
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	public office? If "Yes," complete Schedule C, Part I	2		v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_3_		<u> X</u>
7	during the tax year? If "Yes," complete Schedule C, Part II			v
5		4		X
3	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 for which donors have the right to			v
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		37
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		35
^	Schedule D, Part III	8		<u> </u>
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			77
40	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 temporarily restricted endowments, permanent			7.5
	endowments, 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, VIII, VIII, IX, or X			
_	as applicable			
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	<u> </u>	
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		<u> X</u>
С	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	11c		<u> </u>
ď	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		<u>X</u>
e	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			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	<u> </u>
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
12	If "Yes," and if 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		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	ا ا		v
1 <i>F</i>	·	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			v
46		15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			37
47	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			37
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	.		37
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			7.5
^	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000 "	2044
		Form 5	33U (/U11\

Part IV Checklist of Required Schedules (continued)

	Note. All Form 990 filers are required to complete Schedule O	38 Form	X	<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		٦,	
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	~-	1	_v
27		36	 	X
36	If "Yes," complete Schedule R, Part V, line 2	26		y .
26	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b	<u> </u>	X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	OF.		\ _V
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
9F-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity?			_v
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	20		\ _V
20	Schedule N, Part II	32		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
20	If "Yes," complete Schedule N, Part I	31	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
0.4	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٠,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			.
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	instructions for applicable filing thresholds, conditions, and exceptions)			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	Schedule L, Part I	25b		X
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	any tax-exempt bonds?	24c		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	Schedule K If "No", go to line 25	24a		X
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	Schedule J	23		X
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
-	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		162	140
			Yes	No

	Check if Schedule O contains a response to any question in this Part V											
			Yes	No								
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable											
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			l								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ								
	(gambling) winnings to prize winners?	1c	Х									
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,											
	filed for the calendar year ending with or within the year covered by this return 2a 4			1								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X									
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)											
За	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?											
b	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O											
4a	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		X								
b	If "Yes," enter the name of the foreign country			ĺ								
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	,		1								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X								
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X								
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			1								
	any contributions that were not tax deductible?	<u>6a</u>		X								
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1								
	were not tax deductible?	6b										
7	Organizations that may receive deductible contributions under section 170(c).											
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b		X								
b	, , ,											
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v								
	to file Form 8282?	7с		X								
	If "Yes," indicate the number of Forms 8282 filed during the year			v								
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		_								
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>g</u> 7h										
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			l								
Ü	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		1								
9	Sponsoring organizations maintaining donor advised funds.	Ŭ										
a	Did the organization make any taxable distributions under section 4966? N/A	9a										
	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b										
10	Section 501(c)(7) organizations. Enter											
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a											
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities											
11	Section 501(c)(12) organizations. Enter											
а	Gross income from members or shareholders N/A 11a											
b	Gross income from other sources (Do not net amounts due or paid to other sources against											
	amounts due or received from them)											
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a										
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			i								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.											
а	is the organization licensed to issue qualified health plans in more than one state? N/A	13a										
	Note. See the instructions for additional information the organization must report on Schedule O			1								
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1								
	organization is licensed to issue qualified health plans			1								
	Enter the amount of reserves on hand	<u> </u>										
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ļ	X								
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 (10011								
		FOrm	29211/	. 7H1111								

132005 01-23-12

Form 990 (2011) NEIGHBORHOOD FUNDERS GROUP, INC. 06-1368627 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management Yes No No No No No No No N		Check if Schedule O contains a response to any question in this Part VI				X						
there are material differences in unknown owing myths among members of the governing body, of the governing body of the governing body, of the governing body diegated broad authority to an executive committee or similar committee, explain in Schedule 0. b Enter the number of voting members included in line 1s, above, who are independent to the properties of the proper	Sec	tion A. Governing Body and Management	· , <u>- </u>									
If there are material differences in voting rights among members of the governing body disaplated board allurinity to an exclusive committee, explain is Stephalus 0, 15 b. B. Either the number of voting members included in line 1a, above, who are independent 1 b. 15 D. Earlier the number of voting members included in line 1a, above, who are independent 1 b. 15 D. D. D. The control of the control over the interest policy of the control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? D. D					Yes	No						
body delegated broad authority to an executive committee or similar committee, explain in Schedule 0, but he committee or similar committee, explain in Schedule 0, but he committee or similar committee, explain in Schedule 0, but he committee or similar committee, explain in Schedule 0, but he committee or similar committee or similar committee, explain in Schedule 0, but he organization review the presence of officers, directors, or trustees, or key employees to a management company or other person? 2	1a	Enter the number of voting members of the governing body at the end of the tax year 1a	15									
De Enter the number of voting members included in line 1a, above, who are independent 1b 1 15 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees 2		If there are material differences in voting rights among members of the governing body, or if the governing										
2		body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
officer, director, fustees, or key employee? Did the organization delegate control over management duties customantly performed by or under the direct supervision of officers, directors, or fustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the pinor Form 990 was filed? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Did the organization contemporaneously document the neelings held or written actions undertaken during the year by the following: The governing body? Did the organization organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the neelings held or written actions undertaken during the year by the following: The governing body? Did the organization than written, or key employee listed or Part VII, Section A, who cannot be reached at the organization's making address? If Yes, "provide the names and addresses in Schedule 0. Section B, Policies (fits Section B requiests information about policies not required by the Internal Revenue Code) Yes. No. Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? If Yes, "did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Did the organization have a written conflict of interest policy? If Yes,	b	Enter the number of voting members included in line 1a, above, who are independent 1b	15	l								
3 Did the organization delegate control over management duties oustomanly performed by or under the direct supervision of offects, pricecys, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents ance the prior Form 990 was fitted? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more member of the governing body? 5 Did the organization have members of the governing body? 6 Did he organization have members of the governing body? 7 Did the organization have members of the governing body? 8 Did the organization contemporateously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporateously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporateously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization than the governing body? 9 Is there any officer, derector, flustee, or key employee lested in Part VII, Section A, who cannot be reached at the organization is making address? If Yes, 2 move the names and addresses in Schedule 0 9 Did the organization have local chapters, branches, or affiliates? 10 Did the organization have local chapters, branches, or affiliates? 11 Is a set the organization have written policioes and procedures governing the activates of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exampt purposes? 11 Is a set the organization have a written organization to revew this Form 990 to laid members of this governing body before filing the form? 12 Did the organization have a written whistleblower policy? If Yes, 7 to line 13 13 Did the organization regularly and	2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	any other									
of officers, directors, or frustess, or key employees to a management company or other person? 4		officer, director, trustee, or key employee?		2		X						
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Not the organization have members or stockholders? 7a Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7b Ara any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Ara any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8b Ax 8b Each committee with authority to act on behalf of the governing body? 8c Each committee with authority to act on behalf of the governing body? 8b Each committee with authority to act on behalf of the governing body? 8c Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is maining address? If Yes, Founde the names and addresses in Schodule 0 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No. 10a Did the organization have local chapters, branches, or affiliates? 11b Has the organization have internal procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization to severe whis Form 990 11a Bas the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11b West officers, declore, or trustees, and key employee required to disclose annually interest that could give itse to conflicts? 10b the organization requiring and consistently monitor and enforce compliance with the policy? If Yes, describe in Schedule O how this was done 10b the organization have a written noticing of interest po	3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision										
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Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. □ Own website □ Another's website ▼ Upon request 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ NADIM SALTI - 703 - 941 - 0051 6415 LYRIC LANE, FAILIS ROAD, VA 22044		• • • • • • • • • • • • • • • • • • • •	•									
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6415 LYRIC LANE, FALLS ROAD, VA 22044	20	State the name, physical address, and telephone number of the person who possesses the books and reco	ords of the organizat	ion: 🕨	•							
6415 LYRIC LANE, FALLS ROAD, VA 22044												
	3200	6415 LYRIC LANE, FALLS ROAD, VA 22044										

Form **990** (2011)

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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

(A) Name and Title	(B) Average hours per week	box	not c , unle	ss pe	ition more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee Officer Key employee Highest compensated employee		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(1) KEVIN RYAN CO-CHAIR	2.00	X		X				0.	0.	0.
(2) MOLLY SCHULZ-HAFID CO-CHAIR	2.00			X				0.	0.	0.
(3) CHERYL FITZGERALD TREASURER	2.00	x		x_				0.	0.	0.
(4) DAVID BECKWITH BOARD MEMBER	2.00	x						0.	0.	0.
(5) ANGELA BROWN BOARD MEMBER	2.00	х						0.	0.	0.
(6) ED EGNATIOS BOARD MEMBER	2.00	x						0.	0.	0.
(7) CHARLES FIELDS BOARD MEMBER	2.00	х						0.	0.	0.
(8) KAREN FITZGERALD BOARD MEMBER	2.00	x					_	0.	0.	0.
(9) SOLOMON GREENE BOARD MEMBER	2.00	х						0.	0.	0.
(10) JAMES HEAD BOARD MEMBER	2.00	х	_					0.	0.	0.
(11) SARAH HERNANDEZ BOARD MEMBER	2.00	x						0.	0.	0.
(12) CHRISTOPHER PEREZ BOARD MEMBER	2.00	x	_					0.	0.	0.
(13) CYNTHIA RENFRO BOARD MEMBER	2.00	x	-					0.	0.	0.
(14) NATHANIEL CHIOKE WILLIAMS BOARD MEMBER	2.00	х						0.	0.	0.
(15) JERRY MALDONADO BOARD MEMBER	2.00	x						0.	0.	0.
(16) MELISSA JOHNSON EXECUTIVE DIRECTOR	40.00			х		_		102,262.	0.	12,895.

Form **990** (2011)

	(A) Name and business address	NONE	(B) Description of services	(C) Compensation
-				
2	Total number of independent contractors (including but \$100,000 of compensation from the organization	not limited to those	listed above) who received more than	

Form 990 (2011)

		. Statement of Rever			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b d e		ts, and	606,648.				
ngu	g		1a-1f \$	 [
OB	<u>h</u>	Total. Add lines 1a-1f		D O . d .	606,648.			
	2 a	CONFERENCE		Business Code 900099	66,510.	66,510.		
Program Service Revenue	2 a	VENCE COLLEGE		900099	48,136.	48,136.		
Ser	c			300033	40,130.	20,130:		
e a	d							
9	е							
4	f	All other program service reve	enue					
_	g	Total. Add lines 2a-2f		>	114,646.			
	3	Investment income (including other similar amounts) Income from investment of ta		▶	51.			51.
	4 5	Royalties	x-exempt bond t	proceeds >				<u> </u>
	Ū	Hoyanios	(ı) Real	(ii) Personal		-	•	
	6 a	Gross rents	62,664.					
	b	Less rental expenses	62,664.					:
	С	Rental income or (loss)	0.					
	d	Net rental income or (loss)		_	0.			
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
ĺ		assets other than inventory						
	b	Less: cost or other basis]				
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss) Gross income from fundraisin	a ovente (net					
Jue	Оа	including \$	•					
Other Revenue		contributions reported on line						
Ř		Part IV, line 18	. a					
the	b	Less: direct expenses	. b					
0	С	Net income or (loss) from fund	draising events	D				
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	а					
		Less: direct expenses	b	L				
		Net income or (loss) from gam			-			
	10 a	Gross sales of inventory, less]				
	_	and allowances	a .					
		Less: cost of goods sold Net income or (loss) from sale	. b					
İ		Miscellaneous Revenu		Business Code				
Ì	11 a	MISCELLANEOUS		900099	7,014.			7,014.
	b				,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	c						-	
	d	All other revenue						
	е	Total. Add lines 11a-11d		>	7,014.			
13200	12	Total revenue See instructions.		<u> </u>	728,359.	114,646.	0.	7,065.
01-23	-12							Form 990 (2011)

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)

	Check if Schedule O contains a response not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
1	organizations in the United States. See Part IV, line 21	19,415.	19,415.		
2	Grants and other assistance to individuals in	17,413.	19,413.		
2	the United States See Part IV, line 22				
2	Grants and other assistance to governments,				
3	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
4	·				· · · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors,	114,915.	18,115.	93,226.	3,574
	trustees, and key employees	114,313.	10,113.	93,220.	2,3/9
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B) Other salaries and wages	75,076.	56,296.	15,666.	3,114
7	Pension plan accruals and contributions (include	73,070.	30,430.	13,000.	3,114
8		3,327.	2,574.	614.	139
	section 401(k) and section 403(b) employer contributions) Other employee benefits	6,011.	4,481.	1,281.	249
9	Payroll taxes	20,706.	8,463.	11,508.	735
0		20,700.	0,403.	11,500.	
11	Fees for services (non-employees):				
a	Management				
b	Legal	33,529.		33,529.	
	Accounting	33,323.		33,323.	
	Lobbying Professional fundraising services. See Part IV, line 17				
e	Investment management fees				
f	Other	182,911.	158,417.	24,494.	···
g	Advertising and promotion	102,911.	1,30,417.	24,474.	
12 13	Office expenses	39,462.	14,125.	25,337.	
13 14	Information technology	33,402.	14,143.	25,551.	
	Royalties				
15	· · · · · · · · · · · · · · · · · · ·	132,010.		132,010.	
16	Occupancy	43,036.	41,538.	1,498.	
7	Travel _ Payments of travel or entertainment expenses	43,030.	41,550.	1,490.	
18	-				
	for any federal, state, or local public officials Conferences, conventions, and meetings	140,566.	135,814.	4,752.	
19	Interest	140,300.	133,014.	4,134.	-
20	Payments to affiliates				
21	Depreciation, depletion, and amortization	18,070.		18,070.	
22	Insurance	2,270.		2,270.	
23 24	Other expenses. Itemize expenses not covered	2,270.		2,270.	
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	ALLOCATION OF OVERHEAD	0.	110,975.	-120,247.	9,272
b	DDDG 33YD GDDIITGDG	8,739.	5,000.	3,739.	2,2,2
c	DAMPOTT OFFI	1,676.	3,000	1,676.	
d	AMA DE DESCRITA ADMINISTRA	900.		900.	
	All other expenses	1,428.	539.	889.	
25	Total functional expenses. Add lines 1 through 24e	844,047.	575,752.	251,212.	17,083
26	Joint costs. Complete this line only if the organization	<u> </u>	2,0,132.		2,,00
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here fif following SOP 98-2 (ASC 958-720)				
201	0 01-23-12			<u>. </u>	Form 990 (20

		•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			15,043.	1	191,943
	2	Savings and temporary cash investments		67,176.	2	12,195	
	3	Pledges and grants receivable, net		214,500.	3		
	4	Accounts receivable, net			458.	4	1,187
	5	Receivables from current and former officers, di	ectors	s. trustees, kev		·	
		employees, and highest compensated employee		· · · · · · · · · · · · · · · · · · ·			
		of Schedule L		5			
	6	Receivables from other disqualified persons (as	define	d under section			
	•	4958(f)(1)), persons described in section 4958(c)		1			
		employers and sponsoring organizations of sect		· ·		i	
		employees' beneficiary organizations (see instru-		• •		6	
515	7	Notes and loans receivable, net	Cuons	'		7	
Assets	8	Inventories for sale or use		-			
∢	9	Prepaid expenses and deferred charges		-	18,889.	8	6,321
	_	Land, buildings, and equipment cost or other	ı	, –	10,003.	9	0,321
	IUa		1	104 001			
		basis Complete Part VI of Schedule D	10a	104,991.	E0 264		41 104
		Less accumulated depreciation	10b	63,797.	59,264.	10c	41,194
	11	investments - publicly traded securities	······································	11			
	12	Investments - other securities See Part IV, line 1		12			
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets	10.016	14	40.046		
	15	Other assets. See Part IV, line 11	10,316.	15	10,316		
	16	Total assets. Add lines 1 through 15 (must equa	al line :	34)	385,646.	16	263,156
	17	Accounts payable and accrued expenses		.	17,857.	17_	3,652
	18	Grants payable		18			
	19	Deferred revenue	_	25,053.	19	28,017	
	20	Tax-exempt bond liabilities		_		20	
es	21	Escrow or custodial account liability Complete F				21	
Liabilities	22	Payables to current and former officers, director	s, trus	tees, key employees,			
Ē		highest compensated employees, and disqualifie	ed per	sons Complete Part II			
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ited th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated	third	parties		24	····
	25	Other liabilities (including federal income tax, pages	yables	to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of		ļ	
		Schedule D			14,837.	25	19,276
	26	Total liabilities. Add lines 17 through 25			57,747.	26	50,945
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
es		lines 27 through 29, and lines 33 and 34.					
Ĕ	27	Unrestricted net assets		. L	-27,679.	27	70,245
ğ	28	Temporarily restricted net assets			355,578.	28	141,966
2	29	Permanently restricted net assets				29	
Ī		Organizations that do not follow SFAS 117, cl	neck h	nere 🕨 🔲 and			
5		complete lines 30 through 34.					
2	30	Capital stock or trust principal, or current funds	:		30		
Ď	31	Paid-in or capital surplus, or land, building, or eq	uipme	ent fund		31	
Net Assets of Fund Balances	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances	- · · · · · · · ·		327,899.	33	212,211
	34	Total liabilities and net assets/fund balances			385,646.	34	263,156

Form **990** (2011)

_	990 (2011) NEIGHBORHOOD FUNDERS GROUP, INC.	06-13	68627	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	72	8,3	59.
2	Total expenses (must equal Part IX, column (A), line 25)	2	84	4,0	47.
3	Revenue less expenses Subtract line 2 from line 1	3	-11	5,6	88.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32	7,8	99.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	21	2,2	11.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question 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	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
h	If "Yes " did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Inspection

Name of	the organizati	on			_ 	 _		E	mployer id	lentificati	on number
		NEIGHBO	RHOOD FUNDER	S GRO	UP, I	NC.			06	<u>-1368</u>	627
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	e this par	t) See inst	ructions.			
The organ	ization is not a	a private foundation l	because it is: (For lines	1 through	11, check	only one b	ox)				
1 🖳	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)				
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
з 🗀	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4 🗀	A medical res	search organization o	operated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(i	ii). Enter th	e hospital	s name,
	city, and stat	e·									
5 🗔	An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	erated by	a governi	nental un	it describe	d in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)								
6 🔲	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7 X		_	eives a substantial part				,, ,, ,	r from the	general p	ublic desci	ribed in
		b)(1)(A)(vi). (Comple		* *							
8 🔲			ection 170(b)(1)(A)(vi).	(Complete	Part II)						
9 🔲			eives: (1) more than 33		-	rom contri	butions, rr	nembersh	p fees, and	d aross red	eipts from
			nctions - subject to certa								
			axable income (less sec							-	
		509(a)(2). (Complete			,			,			, -
10 🔲			perated exclusively to te	st for publ	ic safety S	See sectio	on 509(a)(4	I).			
11			perated exclusively for the		-			-	v out the p	ourposes o	f one or
			ations described in secti								
			organization and compl				•	'			
	a Type		~	с 🗀 Тур	_		tegrated		а	Type III · C	Other
e 🗀	By checking	this box, I certify tha	it the organization is not			-	_	r more dis	qualified p	ersons oth	er than
	-		han one or more publicl		-	-	-				
f			ten determination from						,,,,		. , ,
		rganization, check th			,						
g	Since Augus	t 17, 2006, has the o	rganization accepted ar	ny gift or c	ontribution	from any	of the follo	owing per	sons?		
	_		rectly controls, either a			•		• •			Yes No
	the gov	erning body of the si	upported organization?					• •		11g(i)	
	(ii) A family	member of a persor	described in (i) above?	•				_		11g(ii)	
	(iii) A 35%	controlled entity of a	person described in (i)	or (II) abovi	e?			·		11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganization	(s).						
				_	, ,						
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	organization	(v) Did vo	u notify the	(vi) ls		(vii) Am	nount of
• •	anization	(, 2	organization (described on lines 1-9	in col. (i) la	sted in your	organizat	ion in col.	organizati (i) organiz	on in col. red in the	sup	
·			above or IRC section	governing	document?	(i) of you	r support?	\',' " Ü.S			
			(see instructions))	Yes	No	Yes	No	Yes	No		
			L								
		-						}			
									<u> </u>		
		Ì		Ì)			
			<u> </u>	<u> </u>	<u> </u>		L		 		
				 				ļ	 		
									11		
Total		<u> </u>	<u> </u>	<u> </u>	L	L <u></u> _	<u></u>	<u> </u>			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

Schedule A (Form 990 or 990-EZ) 2011 NEIGHBORHOOD FUNDERS GROUP, INC. 06-13686

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 06-1368627 Page 2

(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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	1,062,780,	758,738.	453,950.	737,350.	606,648.	3,619,466.
2	Tax revenues levied for the organ-						
	ızatıon'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	1,062,780.	758,738.	453,950.	737,350.	606,648.	3,619,466.
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)						1,295,649.
	Public support. Subtract line 5 from line 4						2,323,817.
	ction B. Total Support						,
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	1,062,780.	758,738.	453,950.	737,350.	606,648.	3,619,466,
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						ı
	and income from similar sources	12,025.	9,387.	1,001.	373.	51.	<u>22,837.</u>
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)			<u></u>	2,654.	7,014.	9,668.
11	Total support. Add lines 7 through 10					T	3,651,971.
	Gross receipts from related activities,	•	•			_12	<u>607,655.</u>
13	First five years. If the Form 990 is for		first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	
Sec	organization, check this box and stor ction C. Computation of Publ	<u>) here</u> ic Support Per	rcentage	 · · · · · · · · · · · · · · · · · · 		•	
	Public support percentage for 2011 (I			column (ft)		14	63.63 %
	Public support percentage from 2010	• • • • • • • • • • • • • • • • • • • •	,	olumn (i))		15	40 40
	,, ,	•	•	a lina 12 and lina :	14 10 22 1/20/ 07 7		
IUa	6a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qual	=			III 15 15 35 17370	o or more, check to	IIS DOX
17-	· · · · · ·		• •		12 16a ar 16b a	and line 14 to 100/	
17 a	 10% -facts-and-circumstances test and if the organization meets the "fac 	_					•
	meets the "facts-and-circumstances"					t iv now the organ	ıızatıorı ⊾ 🗀
		-	•		•	17a and luna 45 to	100/
10	10% -facts-and-circumstances test	_				•	
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.						
10							
10	Private foundation. If the organization	n did not check a l	DOX OIT III IE 13, 10	a, 100, 17a, 01 17C		dule A (Form 990	
					JUNE		U 330-LLIZUII

Schedule A (Form 990 or 990 EZ) 2011 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)

Section A. Public Support							
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011 (f) Tota	al
1 Gifts, grants, contributions, and					1		
membership fees received (Do not							
include any "unusual grants ")							
2 Gross receipts from admissions,							
merchandise sold or services per-							
formed, 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 bus-							
iness under section 513							
4 Tax revenues levied for the organ-			1				
ization'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	<u> </u>			 			
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)							
Section B. Total Support				l	·	<u></u>	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011 (f) Tota	 al
9 Amounts from line 6	(u) 2007	(6) 2000	(6) 2000	(4) 2010	16) 20	1) 100	۸۱
10a Gross income from interest,							
dividends, payments received on							
securities loans, rents, royalties							
and income from similar sources				ļ			
b Unrelated business taxable income							
(less section 511 taxes) from businesses							
acquired after June 30, 1975							
c Add lines 10a and 10b							
11 Net income from unrelated business							
activities not included 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)	L	I	<u> </u>	<u> </u>	1		
14 First five years. If the Form 990 is for	the organization'	s first, second, thii	d, fourth, or fifth t	ax year as a secti	on 501(c)(3)) organization,	
check this box and stop here							<u> </u>
Section C. Computation of Publ	<u>ic Support Pe</u>	rcentage					
15 Public support percentage for 2011 (I	ine 8, column (f) d	livided by line 13, o	column (f))		15		9
16 Public support percentage from 2010					16		9
Section D. Computation of Inves	stment Incom	e Percentage					
17 Investment income percentage for 20	111 (line 10c, colui	mn (f) dıvıded by liı	ne 13, column (f))		17		9
18 Investment income percentage from 2010 Schedule A, Part III, line 17							9
19a 33 1/3% support tests - 2011. If the	organization did i	not check the box	on line 14, and line	e 15 is more than	33 1/3%. a	ind line 17 is not	
more than 33 1/3%, check this box a	-		•		**	1	•
b 33 1/3% support tests - 2010. If the	•	•	•			3 1/3% and	
line 18 is not more than 33 1/3%, che							•
20 Private foundation. If the organization					_	inzation -	Ē
132023 01-24-12	ii did flot check a	DOX OIT III 16 14, 19	a, or rab, crieck t			Form 990 or 990-F2	<u> </u>

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization Employer identification number NEIGHBORHOOD FUNDERS GROUP, 06-1368627 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year 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? Did 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? 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 an historically important land area Protection of natural habitat 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. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 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 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 public service, provide, in Part XIV, the text of the footnote to its financial 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 works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 NEIGHBO	RHOOD FUND				or Other S		368627	
L									
3	Using the organization's acquisition, accessing the company (check all that apply):	on, and other record	us, cneck	any of the	tollowing tha	t are a signifi	cant use of r	ts collection	i items
а	Public exhibition	ď	. 1	oan or exc	hange progra	ıms			
b	Scholarly research	•	• 🗀 (Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	in how th	ey further tl	he organizatio	on's exempt	purpose in P	art XIV.	
5	During the year, did the organization solicit o	r receive donations	of art, his	storical trea	sures, or othe	er sımılar asş	ets		
	to be sold to raise funds rather than to be ma						[Yes	☐ No
Par	t IV Escrow and Custodial Arrange reported an amount on Form 990, Par	gements. Compl				'Yes" to Form	n 990, Part I	V, line 9, or	
10	Is the organization an agent, trustee, custodi		diant for	oontribuition	o or other as	coto not incli			
Id	on Form 990, Part X?	an or other interme	ulary lor (CONTINUE	is of other as	sets not incit	լոբա		☐ No
	•			-1-1-				Yes	NO
D	If "Yes," explain the arrangement in Part XIV	and complete the to	ollowing t	able.		٣			
						ŀ		Amount	
С	Beginning balance					-	1c		
d	Additions during the year					-	1d		
е	Distributions during the year					}-	1e		
f	Ending balance					L	1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	217		-		Į	Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.								
Par	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo	rm 990, Part	IV, line 10			
		(a) Current year	(b) P	rior year	(c) Two year	s back (d) T	hree years ba	ck (e) Four	years back
1a	Beginning of year balance								
b	Contributions								-
С	Net investment earnings, gains, and losses			7-1					
d	Grants or scholarships								
e	Other expenditures for facilities		1				<u>_</u>		
Ŭ	and programs		ŀ						
	Administrative expenses		 						
	End of year balance		 					-	
g	Provide the estimated percentage of the curr	ront year and halan	an (lunn 1	a column /)) bold as				
2		ent year end balan		y, column (a	a)) Helu as.				
a	Board designated or quasi-endowment	%	%						
ь	Permanent endowment								
С	Temporarily restricted endowment	%							
_	The percentages in lines 2a, 2b, and 2c shou	•							
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	it are held a	ınd admınıste	red for the o	rganization	Г	
	by:								Yes No
	(i) unrelated organizations	•••	-					3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sched	lule R?				3b	
4	Describe in Part XIV the intended uses of the								
Par	t VI Land, Buildings, and Equipm	nent. See Form 99	0, Part X,	, line 10.					
	Description of property	(a) Cost or obasis (invest	1		or other (other)	(c) Accur deprec		(d) Bool	< value
	Land			- -					
	Buildings					-			
2	Leasehold improvements								
d	Equipment			3	0,385.	2:	952.		6,433.
	Other .				4,606.		845.		4,761.
	. Add lines 1a through 1e. (Column (d) must e	aual Form 000. Por	t Y colum				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1,194.
<u> jold</u>	<u>. Assimiles i a uniough i le. (Columni (a) most e</u>	quai i Ullii 330, Pali	, A, CUIUII	ייי (ט), וווופ ו	10/0//			<u></u>	<u>- 1 - J = 0</u>

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 NEIGHBORHOOD FUNDERS GROUP,	INC.	-:-10:-1	06-1	368627	Page 4
Par		Audited Finan	cial State	ments		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			<u>359.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		844,	047.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-115,	688.
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		10		-115,	688.
Par	t XII Reconciliation of Revenue per Audited Financial Statemer	nts With Reve	nue per R	eturn		
1	Total revenue, gains, and other support per audited financial statements			1	728	359.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a		\ \		
b	Donated services and use of facilities	2b		1 1		
С	Recoveries of prior year grants	2c		1		
d	Other (Describe in Part XIV)	2d		1		
	Add lines 2a through 2d			2e		ο.
3	Subtract line 2e from line 1			3	728	359.
_	Amounts included on Form 990, Part VIII, line 12, but not on line 1	•				, <u>, , , , , , , , , , , , , , , , , , </u>
4		1.1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1		
p	Other (Describe in Part XIV)	4b		} }		^
С	Add lines 4a and 4b			4c		250
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	A MARIE T.		5		<u>359.</u>
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents with Expe	enses per	Returr		
1	Total expenses and losses per audited financial statements			1	844,	047.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	_2a		1		
b	Prior year adjustments .	2b]]		
С	Other losses	2c]		
d	Other (Describe in Part XIV)	2d				
е	Add lines 2a through 2d			2e_		_0.
3	Subtract line 2e from line 1			3	844,	047.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)	4b		1 [
	Add lines 4a and 4b			4c		0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	844	047.
	t XIV Supplemental Information			1 3_1	032	0 1 1 1
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a and 4: Pa	art IV lines 1	h and 2h	· Part V line	4· Part
	2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl					4, r ait
	ET X, LINE 2: IN JUNE 2006, THE FINANCIAL A		•			
FAI	AT A, BINE 2. IN OOME 2000, THE FINANCIAL A	CCOONTING	2 STAMP	BUDS	BUARD	
(FA	ASB) RELEASED FASB ASC 740-10, INCOME TAXES	!. ጥዘልጥ PR	OVIDES	GUT	DANCE F	OR
7	<u> </u>	,,				<u> </u>
REI	PORTING UNCERTAINTY IN INCOME TAXES. FOR TH	IE YEARS E	NDED D	ECEM	BER 31,	<u>'</u>
201	1 AND 2010, NFG HAS DOCUMENTED ITS CONSIDE	RATION OF	FASB	ASC '	740-10	AND
DET	PERMINED THAT NO MATERIAL UNCERTAIN TAX POS	SITIONS QU	JALIFY	FOR :	EITHER	
REC	COGNITION OR DISCLOSURE IN THE FINANCIAL ST	ATEMENTS.	THE F	'EDER	AL FORM	1
990	, RETURN OF ORGANIZATION EXEMPT FROM INCOM	IE TAX, IS	SUBJE	CT T	0	
EX.	MINATION BY THE INTERNAL REVENUE SERVICE,	GENERALLY	FOR T	HREE	YEARS	
				Schedul	e D (Form 9	90) 2011

Part XIV Supplemental Information (continued)	<u>ge 5</u>
· ·	
AFTER IT IS FILED.	
PART XI, LINE 8 - OTHER ADJUSTMENTS:	
SUBLEASE REVENUE NETTED AGAINST EXPENSES ON THE FINANCIAL	
STATEMENTS AND INCLUDED AS REVENUE ON FORM 990, LINE 6A	
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
SUBLEASE REVENUE NETTED AGAINST EXPENSES ON THE FINANCIAL	
STATEMENTS AND INCLUDED AS REVENUE ON FORM 990, LINE 6A	-

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury

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.

2011
Open to Public Inspection

Name of the organization

NEIGHBORHOOD FUNDERS GROUP, INC.

Employer identification number 06-1368627

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SUPPORT OF POLICIES AND PRACTICES THAT ADVANCE ECONOMIC, RACIAL, AND SOCIAL JUSTICE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

STRATEGIC PROGRAMS: MAJOR STRATEGIC PROGRAMS, PARTNERSHIPS, AND

COLLABORATIONS OF NFG INCLUDING THE ANNUAL CONFERENCE. KEY ACTIVITIES

CONNECT TO THE LONG-TERM PROGRAM DEVELOPMENT AND OVERALL STRATEGIC

DIRECTION.

EXPENSES \$ 66,169. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

MEMBER SERVICES: PROVIDE INFORMATION, LEARNING OPPORTUNITIES, AND OTHER PROFESSIONAL DEVELOPMENT ACTIVITIES.

EXPENSES \$ 31,288. INCLUDING GRANTS OF \$ 0. REVENUE \$ 48,136.

PUBLIC POLICY: PROVIDES ACCESS TO MAPS AND DATA THAT HELP COMMUNITIES

TARGET THEIR EFFORTS TO PREVENT FORECLOSURES AND STABILIZE COMMUNITIES.

THESE TOOLS OFFER A METHOD FOR LEARNING WHERE FORECLOSURE NEEDS ARE

CONCENTRATED IN YOUR COMMUNITY AND SPECIALIZED MARKET INFORMATION THAT

CAN HELP YOU CRAFT AN APPROPRIATE POLICY SOLUTION.

EXPENSES \$ 583. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

WEBSITE

EXPENSES \$ 15,084. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

RURAL FUNDERS: ONGOING WORK AND KEY PARTNERSHIPS THAT AIM TO DEVELOP

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011)

Employer identification number 06-1368627

AND SUPPORT EDUCATIONAL PROGRAMS AND DIALOGUES MEANT TO EXPAND THE

NATURE AND SCOPE OF GIVING IN RURAL COMMUNITIES.

EXPENSES \$ 29,662. INCLUDING GRANTS OF \$ 19,415. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS INSTITUTIONAL MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S MEMBERS NOMINATE AND ELECT THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11: THE RETURN WAS PREPARED BY THE

OUTSIDE ACCOUNTANTS. A DRAFT OF THE FORM 990 WAS REVIEWED AND APPROVED BY

THE AUDIT COMMITTEE. BOARD MEMBERS WERE GIVEN A FINAL COPY OF THE FORM 990

TO REVIEW. ONCE REVIEWED, THE EXECUTIVE DIRECTOR SIGNED AND MAILED THE

RETURN.

FORM 990, PART VI, SECTION B, LINE 12C: OFFICERS AND DIRECTORS ARE
REQUIRED TO SIGN AN ACKNOWLEDGEMENT EACH YEAR THAT THEY HAVE RECEIVED THE
CONFLICT OF INTEREST POLICY. EACH OFFICER AND DIRECTOR IS ASKED TO NOTIFY
THE BOARD OF ANY CONFLICTS OF INTEREST. OFFICERS AND DIRECTORS ABSTAIN FROM
ANY APPROVAL OF SALARIES OR OTHER FORMS OF COMPENSATION FOR THEMSELVES.

IF A POTENTIAL CONFLICT OF INTEREST ARISES, THE POTENTIALLY INTEREST PERSON
DISCLOSES THE FINANCIAL INTEREST AND ALL MATERIAL FACTS TO THE GOVERNING
BOARD OR COMMITTEE. THE REMAINING BOARD OR COMMITTEE MEMBERS MEET TO

DETERMINE IF A CONFLICT OF INTEREST EXISTS. SHOULD A CONFLICT OF INTEREST
ARISE, THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE APPOINTS A

DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE
PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE

Schedule O (Form 990 or 990-EZ) (2011)

GOVERNING BOARD OR COMMITTEE DETERMINES WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE DETERMINES, BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS, WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE.

FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION PAID TO THE EXECUTIVE DIRECTOR IS EVALUATED ON AN ANNUAL BASIS BY THE OFFICERS (CO-CHAIRS AND TREASURER) OF THE BOARD OF DIRECTORS. COMPENSATION IS BASED UPON THE LEVEL OF SKILL REQUIRED FOR THE POSITION, COMPARISON OF COMPENSATION TO SIMILAR POSITIONS IN THE NON-PROFIT INDUSTRY, AND AN EVALUATION OF THE INDIVIDUAL'S ACHIEVEMENTS DURING THE YEAR. DETERMINATION OF THE COMPENSATION MADE BY THE OFFICERS OF THE BOARD IS RECOMMENDED TO THE FULL BOARD AND DOCUMENTED AS PART OF THE BUDGET APPROVAL PROCESS.

IN 2011, NFG DID NOT COMPLETE A REVIEW OF THE EXECUTIVE DIRECTOR'S SALARY

BECAUSE SHE DEPARTED IN OCTOBER AND THE PERFORMANCE REVIEW PROCESS WAS

NEVER COMPLETED. BECAUSE WE HIRED A PROFESSIONAL SERVICES CONTRACTOR TO

SERVE IN THIS POSITION UNTIL A NEW EXECUTIVE DIRECTOR IS HIRED, THE

COMPENSATION AMOUNT WAS NOT NEGOTIATED OR REVIEWED IN THE SAME MANNER AS A

FULL-TIME EXECUTIVE DIRECTOR WOULD HAVE BEEN.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES THE FOLLOWING DOCUMENTS AVAILABLE TO THE PUBLIC AS THEY ARE REQUESTED:

- CONFLICT OF INTEREST POLICY

FINANCIAL STATEMENTS

132212 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

<u> Schedule O (Form 990 or</u>		Page 2
iame of the organization		Employer identification number 06-1368627
GOVERNING I	OCCUMENTS	
		
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