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Form **990**

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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A F	or the	2013	alendar year, or tax year beginnin	g 07-01-2013 , 2013, and ending 06-	30-2014			
ВС	neck if a	applicab	C Name of organization NEIGHBORHOOD PROGRESS INC			D Emplo	yer iden	tification number
Га	ldress c	change				34-16	11055	
	ame cha	-	Doing Business As CLEVELAND NEIGHBORHOOD PROGR	ESS				
_	ıtıal reti		Number and street (or P O box if m 11327 SHAKER BOULEVARD NO 500	all is not delivered to street address) Room/s	uıte	E Telepho	ne numb	er
) Te	erminate	ed				(216)	830-27	770
∏ Ar	nended	d return	City or town, state or province, coul CLEVELAND, OH 44104	ntry, and ZIP or foreign postal code		(=== /		
	plicatio	on pendi				G Gross re	eceipts \$	7,085,829
			F Name and address of prir	ncipal officer	H(a) I	s this a group	return f	
			JOEL RATNER	DD NO FOOM		ubordinates?		┌ Yes ┌ No
			11327 SHAKER BOULEVAR CLEVELAND, OH 44104	RD NO 300W	U/h) A			Ev. En.
			·		1	re all subordi ncluded?	nates	Γ Y es Γ No
ī T	ax-exe	mpt stat	ıs	insert no)			a lıst (see instructions)
	V ebsit	te: ► \	/WW NPI-CLE ORG		 H(c) ⁽	Group exempt	ion num	ber ►
<u></u>			on 🔽 Corporation Trust T Associatio		1 (-)			
	m of o		mmary	n Other 🗜	L Year	of formation 19	88 M S	State of legal domicile OH
	1		describe the organization's mission CHEDULE O	on or most significant activities				
e e		<u>JLL J</u>	CHEBGEE G					
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ē	2	Check	this box 🔰 if the organization di	scontinued its operations or disposed	of more th	an 25% of its	net ass	ets
Activities & Governance	l _						1 _ 1	
2 6	1			ing body (Part VI, line 1a)			3	19
Ĕ			· -	of the governing body (Part VI, line 1b	•		4	17
\$	1			calendar year 2013 (Part V, line 2a)			5	29
<u>ع</u>	1			ecessary)			6	19
				art VIII, column (C), line 12			7a	0
	b	Netu	related business taxable income f	rom Form 990-T, line 34	<u> </u>		7b	0
						Prior Year		Current Year
g _i	8		tributions and grants (Part VIII, li		·	14,023,5		5,033,915
Revenue	9			ne 2g)		992,6		1,305,601
3.	10			(A), lines 3, 4, and 7d)	·	-9,2	207	-628,571
ш.	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		71,1	L 3 3	0
	12			(must equal Part VIII, column (A), lir	ne	15,078,1	111	5,710,945
	13			IX, column (A), lines 1-3)		6,468,2		5,967,020
	14			X, column (A), line 4)		0,100,2	0	0
	15			ee benefits (Part IX, column (A), lines	·			<u> </u>
\$	13	5-1		ce benefits (FureTx, column (A), mes		1,784,9	76	2,127,582
Expenses	16a	Pro	essional fundraising fees (Part IX,	column (A), line 11e)			0	0
충	Ь	Tota	fundraising expenses (Part IX, column (D), line 25) ▶ -144,777				
ш	17			lines 11a-11d, 11f-24e)		1,690,2	243	1,424,466
	18			st equal Part IX, column (A), line 25)		9,943,4		9,519,068
	19			18 from line 12		5,134,6	563	-3,808,123
<u>₹</u>						ning of Curre		End of Year
Not Assets or Fund Balances						Year		EIIU OI TEAT
378	20	Tot	l assets (Part X, line 16)			25,220,5	512	21,549,323
2 E	21	Tot	l liabilities (Part X, line 26)		•	12,697,4	138	12,834,372
	1 22	Net	assets or fund balances Subtract	line 21 from line 20		12,523,0	74	8,714,951
黑正	22							
	22 rt 1 1	Si	nature Block					
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Und my k prep	er pen knowle arer h	nalties edge ar nas any	of perjury, I declare that I have exa d belief, it is true, correct, and con knowledge **** nature of officer	amined this return, including accompa		2015-05-14		
Und my k prep	er pen knowle arer h	nalties edge ar nas any	of perjury, I declare that I have exa d belief, it is true, correct, and con knowledge ****	amined this return, including accompa		2015-05-14		
Und my k prep	er pen knowle arer h	nalties edge ar nas any	f perjury, I declare that I have exa d belief, it is true, correct, and con knowledge **** Inature of officer EL RATNER PRESIDENT pe or print name and title Print/Type preparer's name	amined this return, including accompanplete Declaration of preparer (other t		2015-05-14	all infor	mation of which
Und my I prep	er pen knowle arer h	nalties edge ar nas any	of perjury, I declare that I have exact belief, it is true, correct, and con knowledge **** Inature of officer EL RATNER PRESIDENT pe or print name and title Print/Type preparer's name ZACHARY FORTSCH	amined this return, including accompa nplete Declaration of preparer (other t	than officer	2015-05-14 Date Check f self-employed	all infor	mation of which
Und my k prep Sig Her	er pen knowle arer h	nalties edge ar nas any	f perjury, I declare that I have exa d belief, it is true, correct, and con knowledge **** Inature of officer EL RATNER PRESIDENT pe or print name and title Print/Type preparer's name	amined this return, including accompa nplete Declaration of preparer (other t	than officer	2015-05-14 Date Check If	all infor	mation of which

CLEVELAND, OH 441141152

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes ☐ No

Chock Schedule O. Cortans a response or note to any intent this Part II P Breify describe the organization's mission CHOICE AND OPPORTUNITY OUR VISION IS FOR ALL OF CLEVELAND'S NEIGHBOORDOODS TO BE ATTRACTIVE, JUSTICAL COMMUNITIES OF CHOICE AND OPPORTUNITY OUR VISION IS FOR ALL OF CLEVELAND'S NEIGHBOORDOODS TO BE ATTRACTIVE, JUSTICAL COMMUNITY OUR VISION IS FOR ALL OF CLEVELAND'S NEIGHBOORDOODS TO BE ATTRACTIVE, JUSTICAL COMMUNITY OUR VISION IS FOR ALL OF CLEVELAND'S NEIGHBOORDOODS TO BE ATTRACTIVE, JUSTICAL COMMUNITY OUR VISION IS FOR ALL OF CLEVELAND'S NEIGHBOORDOODS TO BE ATTRACTIVE, JUSTICAL COMMUNITY OUR VISION IS FOR ALL OF CLEVELAND'S NEIGHBOORDOODS TO BE ATTRACTIVE, JUSTICAL COMMUNITY OF CLEVELAND TOGETHER, WE GENERATE BIG DEAS, ADVOICATE FOR THEM, JUND THEM, AND PROPORTY THEM. 2. Did the organization undertake any significant program services during the year which were not listed on the profit remains any output of the profit rem	Form	990 (2013)				Page 2
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the proof Form 990 or 990-E2? 1	_	Did the organizati	ion undertake any cianticant n	regree corvices during the year wh	ish were not listed on	
3 Did the organization cases conducting or make significant changes in how it conducts, any program service services? If "Yes," describe these changes on Schedule O 2 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501.(c) year 501.(c) 4.9 and 501.(c) 4.9	2					┌ Yes ┌ No
Services? 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 5011(2)(3) and 501(2)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4 Code		•				
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	4d	· -) (Revenue \$)
	4e	Total program se	ervice expenses ► 8	,992,356		

art IV	Checklist of	Required	Schedules

			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	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f z}$	2	Yes	
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		N o
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	Yes	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
l1	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			
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	Yes	
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		No
c	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		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Νo
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	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	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	14b		No
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
L7	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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Par				_
	Check if Schedule O contains a response or note to any line in this Part V	•	 Yes	. l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 28		1 65	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		שכ		
C	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 any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			140
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	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			
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? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Se	ection 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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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 employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Ť		
	more members of the governing body?	7a		No
	or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			1
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	No
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		No
b 11a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		No
b 11a b 12a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 11a b 12a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No
b 11a b 12a c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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 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	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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 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? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶ J BRIAN GEHMAN 11327 SHAKER BLVD SUITE 500W

CLEVELAND, OH 44104 (216) 830-2770

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

Check if Schedule O contains a response or note to any line in this Part VII $\,\cdot\,\,$. $\,\cdot\,\,$

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

- 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, or 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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h an or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) KAREN GAHL-MILLS	1 00	х		х				0	0	0
SECRETARY (2) ANTHONY BRANCATELLI	1 00									
		х						0	0	0
DIRECTOR (3) THOMAS J COYNE	1 00					-				
		×		х				0	0	0
VICE-CHAIRMAN (4) PAUL CLARK	1 00									
	1 00	x		х				0	0	o
CHAIRMAN (E) EDEDDY COLLED ID	1.00									
(5) FREDDY COLLIER JR	1 00	×						0	0	0
DIRECTOR COLUMN DUD										
(6) CLAUDIA COULTON PHD	1 00	×						0	0	o
DIRECTOR								Ĭ		
(7) LINDA M KANE	1 00	×		х				0	0	0
TREASURER				L .				Ŭ		
(8) ANTHONY R MOORE	1 00	×						0	0	0
DIRECTOR								<u> </u>		
(9) MARK MCDERMOTT	1 00	х						0	0	0
DIRECTOR	1 00	L^			L					
(10) DAVID REYNOLDS	1 00									
DIRECTOR		X						0	0	0
(11) DARYL P RUSH	1 00									
DIRECTOR		X						0	0	0
(12) BYRON WHITE	1 00									
DIRECTOR		X						0	0	O
(13) KEITH BROWN	1 00									
DIRECTOR		×						0	0	0
(14) BRIAN FRIEDMAN	1 00									
DIRECTOR		х						0	0	0
(15) KEN MARBLESTONE	1 00									
		х						0	0	0
DIRECTOR (16) THOMAS STONE	1 00									
		x						0	0	0
DIRECTOR (17) LOU TISLER	1.00									
(17) LOO TISLEK	1 00	X			1			o	0	C
DIRECTOR		I ^				l		_ ~I	٠,	_

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo: h ar	chec x, unle n offic- rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount comper from	nated of other nsation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
	/ANESSA L WHITING	1 00	×						О			0
DIREC	CTOR BRIAN M ZIMMERMAN	1 00										
DIREC		1 00	x						О			0
	ROBYN SANDYS	1 00										
DIREC	CTOR		X						0			0
(21) E	BRIAN GEHMAN	32 00			х				110,734	(26,039
CFO		13 00			L^				110,734	,	<u></u>	26,039
(22) J	OEL RATNER	39 00			×				200,000			32,288
PRESI	DENT INDA WARREN	6 00	-									
	INDA WARREN R VICE PRESIDENT	20 00 30 00					x		152,954			12,814
1b	Sub-Total			•			<u> </u>					
c	Total from continuation sheets to Pa	•		•	•				462.600			71 141
d	Total (add lines 1b and 1c) Total number of individuals (including					L	- N		463,688	0		71,141
2	\$100,000 of reportable compensation				eu ai	DOVE	e) wno	rec	erved more than			
											Yes	No
3	Did the organization list any former of on line 1a? <i>If "Yes," complete Schedule</i>			e, key •	, em	nplo [.]	yee, o	r hıg	jhest compensate	d employee		No
4	For any individual listed on line 1a, is organization and related organizations individual									om the	Yes	
5	Did any person listed on line 1a receivervices rendered to the organization								_	ndividual for		No
	ction B. Independent Contrac Complete this table for your five highe		ındana	ndar	t cc	n+	octors	that	t received more +	nan ¢100 000 -f		
1 	complete this table for your five higher compensation from the organization F											
	Name and	(A) business address							Descripti	(B) on of services	(C Comper	
MISTI	CK CONSTRUCTION COMPANY 1300 BRIGHTON		15233						CONSTRUCTION			333,995

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization 1-1

Part V	/111	Statement of Check if Sched	of Revenue ule O contains a res	por	se or note to any lir	ne in this Part VIII			
				,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
- <u>- 2</u>	1a	Federated cam	paigns	1a					
ant	ь	Membership du	ies	1b					
و و	С	Fundraising ev	ents	1c					
iffs,	d	Related organiz	zations	1d	200,733				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grant	s (contributions)	1e	445,638				
ons Sir	f	All other contributi	ons, gifts, grants, and	1f	4,387,544				
tribution Other	-	sımılar amounts n	ot included above						
i i	g	Noncash contributi 1a-1f \$	ons included in lines						
Contand	h	Total. Add line	s 1a-1f		▶	5,033,915			
					Business Code				
Program Serwce Revenue	2a	AFFILIATE REIMBU	JRSEMENTS		531390	662,670	662,670		
æ	b	PROGRAM SERVIC	E REVENUE		531390	355,450	355,450		
9 5 6	С	SUBSIDIARY REIM	BURSEMENTS		531390	287,481	287,481		
Se C	d								
ᇣ	e	<u> </u>							
Po⊈	f	All other progra	am service revenue						
	g	Total. Add line				1,305,601			
	3		ome (including divideration ar amounts)						
	4		stment of tax-exempt bo						
	5	Royalties .		٠,	►				
	63	Gross rents	(ı) Real		(II) Personal				
	6a b	Less rental							
	l c	expenses Rental income							
	d	or (loss) Net rental inco	me or (loss)						
	"	Wee remediation	(i) Securities	İ	(II) Other				
	7a	Gross amount from sales of assets other than inventory			746,313				
	ь	Less cost or other basis and sales expenses			1,374,884				
	С	Gain or (loss)			-628,571				
	d		ss)			-628,571			-628,57
nue	8a	events (not inc	luding						
Other Revenue		of contributions See Part IV, lir	s reported on line 1d ne 18	:) a					
the	b	Less direct ex	penses	ь					
ō	С	Net income or	(loss) from fundraısı	ng e	events 🛌				
	9a		from gaming activitions 19	es a					
	b	Less direct ex	penses	ь					
			(loss) from gamıng a	ıctı	⁄ities 				
	10a	Gross sales of returns and allo	owances .	a					
	b	Less cost of g	oods sold	ь					
	С		(loss) from sales of	ınve	-				
		Mıscellaneou	s Revenue	_	Business Code				
	11a			}					
	b c	-		}					
	d	All other reven		}					
	e	Total. Add line			🕨				
	12		See Instructions			5,710,945	1,305,601		-628,57
	J					3,710,343	1,505,001	į .	1 -020,37

Form 990 (2013)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizat	ıons must comp	olete column (A)	
Check if Schedule O contains a response or note to any line in this	Part IX			
Do not include amounts reported on lines 6h	(4)	(B)	(C)	(D)

	Check if Schedule O contains a response or note to any line in this	Part IX		<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	5,967,020	5,967,020		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	369,060	290,746	58,552	19,762
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	1,304,974	1,068,051	167,043	69,880
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	111,272	87,660	17,654	5,958
9	Other employee benefits	220,736	173,896	35,020	11,820
10	Payroll taxes	121,540	95,501	19,548	6,491
11	Fees for services (non-employees)				
а	Management				
b	Legal	22,950	18,077	3,644	1,229
С	Accounting	38,835	31,800	5,261	1,774
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Schedule O)	233,419	199,333	25,491	8,595
12	Advertising and promotion	45,598	42,892	2,024	682
13	Office expenses	73,696	59,787	10,402	3,507
14	Information technology	73,030	33,737	10,102	3,307
15	Royalties				
16	Occupancy	105,616	84,884	15,504	5,228
17	Travel	91,425	82,161	6,928	2,336
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	, 12	, -	<u> </u>
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	47,415	44,912		2,503
23	Insurance	18,198	15,021	2,376	801
24	Other expenses Itemize expenses not covered 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 O)				
а	PASS-THROUGH INTEREST F	200,732	200,732		
b	CDC SERVICES	126,426	126,426		
С	PLACEMAKING	63,361	63,361		
d	ECONOMIC OPPORTUNITY	61,219	61,219		
e	All other expenses	295,576	278,877	12,488	4,211
25	Total functional expenses. Add lines 1 through 24e	9,519,068	8,992,356	381,935	144,777
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
				Fo.	rm 990 (2013)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in t	hıs Part	X		•	· · · · · · · · · · · · · · · · · · ·
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,618,239	1	2,407,614
	2	Savings and temporary cash investments		•		2	
	3	Pledges and grants receivable, net			8,980,678	3	6,522,572
	4	Accounts receivable, net			42,307	4	18,588
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L		, trustees, key		5	
4ssets	6	Loans and other receivables from other disqualified persons (as section $4958(f)(1)$), persons described in section $4958(c)(3)(1)$ 0 employers and sponsoring organizations of section $501(c)(9)$ 0 beneficiary organizations (see instructions) Complete Part II o	3), and o	contributing v employees'		6	
Š	7	Notes and loans receivable, net			10,085,000	7	9,285,000
1	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			12,810	9	18,300
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1	580,887		-	
	ь	Less accumulated depreciation	10b	136,774	37,017	10c	444,113
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11			1,716,467	13	
	14	Intangible assets		•		14	
	15	Other assets See Part IV, line 11			1,727,994	15	2,853,136
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			25,220,512	16	21,549,323
	17	Accounts payable and accrued expenses			3,062,438	17	2,032,444
	18	Grants payable				18	1,421,667
	19	Deferred revenue				19	95,261
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Sche	dule D			21	
lities	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualif	ors, trus				
lidei. I		persons Complete Part II of Schedule L				22	
\exists	23	Secured mortgages and notes payable to unrelated third parties	5		9,585,000	23	9,285,000
	24	Unsecured notes and loans payable to unrelated third parties			50,000	24	
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Pai					
		D			10.007.100	25	12 22 1 272
	26	Total liabilities. Add lines 17 through 25			12,697,438	26	12,834,372
o d		Organizations that follow SFAS 117 (ASC 958), check here ► [lines 27 through 29, and lines 33 and 34.	√ and co	omplete			i
5	27	Unrestricted net assets		•	2,411,844	27	1,152,943
5 0	28	Temporarily restricted net assets		•	10,111,230	28	7,562,008
3	29	Permanently restricted net assets				29	
ol Fully Balalice		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere ► ┌	and			ı
Ź	30	Capital stock or trust principal, or current funds				30	
Ç Ç	31	Paid-in or capital surplus, or land, building or equipment fund				31	
î	32	Retained earnings, endowment, accumulated income, or other for	unds			32	
Į	33	Total net assets or fund balances			12,523,074	33	8,714,951
<u></u>	34	Total liabilities and net assets/fund balances			25,220,512	34	21,549,323

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				r
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,7	710,945
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,5	519,068
3	Revenue less expenses Subtract line 2 from line 1	3		-3,8	308,123
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		12,	523,074
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8,7	714,951
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ו			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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As Filed Data -

DLN: 93493134042645

OMB No 1545-0047

Public Charity Status and Public Support

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

SCHEDULE A

(Form 990 or 990EZ)

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. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Name of the organization NEIGHBORHOOD PROGRESS INC **Employer identification number**

f g h (i) Nan suppo organiz	check this because following per (i) A person and (iii) beloe (ii) A family (iii) A 35% Provide the contect (ii)	ox et 17, 200 esons? who direc w, the gov member o controlled following ii	erved a written de 6, has the organication of the farmer o	zation accep ontrols, eith e supported bed in (i) abo n described	er alone or torganization ove? In (i) or (ii) and organization over the contraction over the	or contributi together with n? above?	on from any persons des notify zation if your	e II, or Type	e III support 11g 11g 11g the tion in ganized	Yes (ii) (iii) (vii) Ar mon			
g	check this b Since Augus following per (i) A person and (iii) belo (iii) A family (iii) A 35%	ox t 17, 200 sons? who direc w, the gov member o controlled	6, has the organi tly or indirectly o rerning body of th if a person descri entity of a perso	zation accep ontrols, eith e supported bed in (i) abo n described	oted any gift er alone or i organization ove? in (i) or (ii) i	or contributi together with n? above?	on from any	e II, or Type	e III support) 11g 11g	Yes	zation,		
g	check this b Since Augus following per (i) A person and (iii) belo (iii) A family (iii) A 35%	ox t 17, 200 sons? who direc w, the gov member o controlled	6, has the organi tly or indirectly o rerning body of th if a person descri entity of a perso	zation accep ontrols, eith e supported bed in (i) abo n described	oted any gift er alone or i organization ove? in (i) or (ii) i	or contributi together with n? above?	on from any	e II, or Type	e III support) 11g 11g	Yes	zation,		
	check this b Since Augus following per (i) A person and (iii) belo	ox st 17, 200 sons? who direc w, the gov	6, has the organi tly or indirectly c erning body of th	zation accep ontrols, eith e supported	oted any gift er alone or t organization	or contributi	on from any	e II, or Type	e III support)	Yes	zation,		
	check this b Since Augus following per (i) A person	ox t 17, 200 sons? who direc	6, has the organi	zation accep	oted any gift er alone or t	or contributi	on from any	e II, or Type	e III support	Ing organi	zation,		
	check this b Since Augus following per	ox t 17, 200 sons?	6, has the organı	zation accep	oted any gift	or contributi	on from any	e II, or Type	e III support	ıng organı	zation,		
f			eived a written de	etermination	from the IR	S that it is a	Type I, Typ						
										`	1)01		
еГ	• –	undation	•	_	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or								
11	one or more the box that	publicly s describes	ized and operated upported organiza the type of supp Type II c	ations descri o <u>rti</u> ng organi	ibed in sect ization and (ion 509(a)(1 complete line) or section s 11e th <u>ro</u> u	509(a)(2) S gh 11h	See section 5	509(a)(3).	Check		
10	An organiza	ion organı	zed and operated	rated exclusively to test for public safety See section 509(a)(4).									
			investment inco zation after June						tax) from bu	ısınesses			
	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of												
9	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross								ss				
7 マ 8 「	described in	section 1	ormally receives 70(b)(1)(A)(vi). scribed in sectio n	(Complete P	art II)		-	ental unit or	from the gen	eral public			
6 _			al government or										
	section 170(b)(1)(A)((iv). (Complete P	art II)									
5	An organizat	ion operat	ted for the benefit	t of a college	or universi	ty owned or o	perated by a	a governmer	ntal unit desc	ribed in			
4	hospital's na		ganization operat and state	ed in conjun	ction with a	hospital desi	cribed in sec	tion 1/0(b)	(1)(A)(III). E	nter the			
3			atıve hospıtal se						/4\/ 4 \/**\				
2			section 170(b)(1				4=4(1)(4)						
	•		of churches, or as				ection 170(l	o)(1)(A)(i).					
1		-	oundation becaus	=		= :	-	-					
_	ization is not a							art.) See ı	nstructions				
_		or rubii	c cildinty Sta			: must comi	alete this r	art \ Soo i	nstructions				

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 10,440,934 1,753,293 3,971,944 14,023,550 5,033,915 35,223,636 include any "unusual grants ") 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 10,440,934 1,753,293 3,971,944 14,023,550 5.033.915 35,223,636 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 12,175,934 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 23,047,702 from line 4 Section B. Total Support Calendar year (or fiscal year (c) 2011 **(e)** 2013 (a) 2009 **(b)** 2010 (d) 2012 (f) Total beginning in) 🟲 5,033,915 1,753,293 3,971,944 14,023,550 Amounts from line 4 10,440,934 35,223,636 Gross income from interest, dividends, payments received on securities loans, rents, royalties 555,352 233,529 196,579 42,675 1,028,135 and income from similar sources 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 26,346 23,842 46,183 15,175 111,546 capital assets (Explain in Part IV) 11 Total support (Add lines 7 36,363,317 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 63 380 % Public support percentage for 2012 Schedule A, Part II, line 14 15 72 890 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. 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 qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or 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 b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_							
5							
	the organization without charge						
6	Total. Add lines 1 through 5						
7a							
	•						
ь	Amounts included on lines 2 and 3						
	received from other than						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
		() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	I (e) 2013	l (f) lotal
	in) ►	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
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) Section B. Total Support Calendar year (or fiscal year beginning in) 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 \$11 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 1 Net income from unrelated business is regularly carried on 120 Other income Do not included gain or loss from the sale of capital assets (Explain in Part 11v) 13 Total support. (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here 5 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))		nization,					
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013 Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test						
Return Reference	Explanation					
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER INCOME - 2010 AMOUNT \$ 26,346 2011 AMOUNT \$ 23,842 2012 AMOUNT \$ 46,183 2013 AMOUNT \$ 15,175					

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493134042645

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

If the organization answered "Yes" to Form 990 Part IV. Line 5 (Proxy Tax) or Form 990-F7, Part V. line 35c (Proxy Tax), then

	me of the organization IGHBORHOOD PROGRESS INC			Employer ide	ntification number
	ISTIBOTO TO TROUBLESS INC			34-1611055	;
Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 52	7 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1		e tax incurred by the organization			\$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under sectio	n 4955 ►	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt und	er section 501(c), except section 50	01(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	o other organization	s for section 527 ►	\$
3	Total exempt function expend	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b ►	¢
4	Did the filing organization file	Form 1120-POL for this year?			↑ —
5	organization made payments amount of political contributio	nd employer identification number For each organization listed, entens rs received that were promptly ar political action committee (PAC)	r the amount paid fr nd directly delivered	om the filing organization's I to a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).	(a	a)		(b)	
For e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Α	moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		l			
а	Volunteers?		No			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	1		
С	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		No			
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	O ther activities?	Yes				75
j	Total Add lines 1c through 1i		•			75
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
Ь	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	046	\			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5),	or se	ctio	n
	501(0).			T	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		ŀ	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		Ī	3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
Ь	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group rt II-B, line 1 Also, complete this part for any additional information	o list),	Part I	[-A, lu	ne 2,	and
	Return Reference Explanation					
PAR	T II-B, LINE 1 \$25 FOR STATE LOBBYING, \$25 FOR LEGISLATIVE AGENT REGISTS	RATIO	N, ANI	D \$25	FOR	
	LOBBYIST INITIAL REGISTRATION VERIFICATION					

201104410 0 (101111 330 01 330 12) 2013		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493134042645

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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. ► Information about Schedule D (Form 990)

Open to Public

nal Revenue Service	ructions is at <u>www.rrs.gov/rorin990</u> .			Inspect	ion
ame of the organization EIGHBORHOOD PROGRESS INC		Emp	loyer ident if ica	tion numbe	- <u></u>
		<u>3</u> 4-:	1611055		
art I Organizations Maintaining Donor		unds	or Accounts	. Complet	e if th
organization answered "Yes" to Form	·		(L) []	- L L	
Total number at end of year	(a) Donor advised funds		(b) Funds and o	otner accou	nts
Aggregate contributions to (during year)					
Aggregate contributions to (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor ac	typeore in writing that the accets held in do	nor advi	sed		
funds are the organization's property, subject to th	ne organization's exclusive legal control?			☐ Yes	┌ No
Did the organization inform all grantees, donors, as used only for charitable purposes and not for the b conferring impermissible private benefit?				┌ Yes	┌ No
rt II Conservation Easements. Complet	te if the organization answered "Yes" i	to Forn	n 990, Part IV	/, line 7.	
Purpose(s) of conservation easements held by the Preservation of land for public use (e g , recrea Protection of natural habitat Preservation of open space					
Complete lines 2a through 2d if the organization heasement on the last day of the tax year	eld a qualified conservation contribution in	the forn	n of a conservat	tion	
			Held at the	End of the	Year
Total number of conservation easements		2a			
Total acreage restricted by conservation easemer		2b			
Number of conservation easements on a certified	• •	2c			
Number of conservation easements included in (c) historic structure listed in the National Register	acquired after 8/17/06, and not on a	2d			
Number of conservation easements modified, trans the tax year -	sferred, released, extinguished, or terminat	ed by th	ne organization	during	
Number of states where property subject to conse	rvation easement is located 🕨				
Does the organization have a written policy regard enforcement of the conservation easements it hold	ing the periodic monitoring, inspection, han		violations, and	┌ Yes	┌ No
Staff and volunteer hours devoted to monitoring, in	nspecting, and enforcing conservation ease	ments c	luring the year		
A mount of expenses incurred in monitoring, inspec	cting, and enforcing conservation easement	s during	g the year		
Does each conservation easement reported on line and section 170(h)(4)(B)(II)?	e 2(d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)	┌ Yes	┌ No
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation eas	of the footnote to the organization's financia				
rt III Organizations Maintaining Collect Complete of the organization answere	ions of Art, Historical Treasures,	or Otl	her Similar <i>i</i>	Assets.	
If the organization elected, as permitted under SF, works of art, historical treasures, or other similar a service, provide, in Part XIII, the text of the footnotes.	assets held for public exhibition, education,	orrese	arch in furthera		
If the organization elected, as permitted under SF, works of art, historical treasures, or other similar a service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenue assets held for public exhibition, education,	statem	ent and balance		ıc
(i) Revenues included in Form 990, Part VIII, line	2 1		► \$		
(ii) Assets included in Form 990, Part X					
If the organization received or held works of art, hi following amounts required to be reported under SI					
Revenues included in Form 990, Part VIII, line 1	·		▶- 		
			· · ·		
Assets included in Form 990, Part X			▶ \$		

Part	TIT Organizations Maintaining Col	lections of Art,	HIST	tori	cai i	reasu	res, or c	tne	r Similiar As	ssets	(continued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	eck	any of	the follo	owing that	are a	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or exch	nange prog	rams			
b	Scholarly research		e	Γ	Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and explai	n how	the	y furth	er the o	rganızatıoı	n's ex	empt purpose	ın	
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t	o be maintained as i	part o	fthe	organ	ızatıon':	s collectio	n?		┌ Yes	
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answere	ed "Y	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X^{γ}	an or other interme	diary	for c	ontribi	utions o	or other as:	setsı	not	┌ Yes	i
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follow	ıng t	able						
							-		Aı	mount	
С	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							☐ Yes	⊢ No
_ь	If "Yes," explain the arrangement in Part XII										<u>. </u>
Pa	rt V Endowment Funds. Complete i	f the organization (a)Current year		wer Prior					t IV, line 10. Three years back	(-)[r years back
1a	Beginning of year balance	(a)Current year	(D)	Prior	year	B (C)IV	vo years bac	K (a)	Three years back	(e) Fou	r years back
b	Contributions							+			
c	Net investment earnings, gains, and losses							+			
•								_			
d	Grants or scholarships							_			
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balanc	e (line	e 1 a	. colum	nn (a)) h	neld as				
a	Board designated or quasi-endowment	,	- (5	,	(=//.					
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%									
3a	Are there endowment funds not in the posses	•	ition t	hat	are hel	d and a	dministere	d for	the		
	organization by									Y	es No
	(i) unrelated organizations			•				•	3a	-	
_	(ii) related organizations								3a		
	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	•						•	3	b	
4 Date	t VI Land, Buildings, and Equipme					n answ	ered 'Ve	s' to	Form 990 P	art IV	line
I GII	11a. See Form 990, Part X, line 1		110 01	gai	124110	ii alisw	rerea re.	, (0	101111 330, 1	arciv,	iiiic
	Description of property) Cost o	or other stment)	(b)Cost or basis (oth		(c) Accumulate depreciation	ed (d)) Book value
1a	Land										
b	Buildings		-							\bot	
	Leasehold improvements						21	3,316	12,	597	200,619
	Equipment						36	7,571	124,	077	243,494
	Other										
Tota	I. Add lines 1a through 1e (Column (d) must ea	gual Form 000 Part Y	/1						🕨		444,113

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
	-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Co	emplote if the organizati	Lon answored 'Ves' to Form 990 Part IV June 11s
See Form 990, Part X, line 13.	ompiete ii the organizati	ion answered fes to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 9'	
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 9'	(b) Book value
Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 9'	
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 9'	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 9'	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 9'	(b) Book value
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Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 9'	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 9'	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description (1) RELATED PARTY RECEIVABLE	n answered 'Yes' to Form 9	(b) Book value 2,853,136
Part IX Other Assets. Complete if the organization (a) Description (1) RELATED PARTY RECEIVABLE Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization	n answered 'Yes' to Form 9	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of the	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of the	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability (a) Description of liability	n answered 'Yes' to Form 9 iption 5.) anization answered 'Yes'	(b) Book value 2,853,136

PART XII, LINE 2D - OTHER

PART XII, LINE 4B - OTHER

ADJUSTMENTS

ADJUSTMENTS

Part		Revenue per Audited Financial Statements With Revenue pswered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete ıf
1		ther support per audited financial statements	1	5,059,519
2	· -	but not on Form 990, Part VIII, line 12		, ,
а		estments 2a		
b	-	f facilities 2b		
c		nts		
d		I) 2d 283,550		
e	Add lines 2a through 2d		2e	283,550
3	_		3	4,775,969
4		990, Part VIII, line 12, but not on line 1		. , ,
а		ncluded on Form 990, Part VIII, line 7b . 4a		
b	·	I) 4b 934,976		
c			4c	934,976
5		and 4c. (This must equal Form 990, Part I, line 12)	5	5,710,945
		Expenses per Audited Financial Statements With Expenses	per	
		answered 'Yes' to Form 990, Part IV, line 12a.		<u>'</u>
1	Total expenses and losses p	per audited financial statements	1	8,867,642
2	A mounts included on line 1	but not on Form 990, Part IX, line 25		
а	Donated services and use o	f facilities		
b	Prior year adjustments .			
c	Other losses			
d	Other (Describe in Part XIII	[) 2d 283,550		
e	Add lines 2a through 2d .		2e	283,550
3	Subtract line ${f 2e}$ from line ${f 1}$		3	8,584,092
4	A mounts included on Form 9	990, Part IX, line 25, but not on line 1:		
а	Investment expenses not in	cluded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII	[) 4b 934,976		
c	Add lines 4a and 4b		4c	934,976
5	Total expenses Add lines 3	and 4c. (This must equal Form 990, Part I, line 18)	5	9,519,068
Part	XIII Supplemental I	nformation		
	/, line 4, Part X, line 2, Part 2	for Part II, lines 3 , 5 , and 9 , Part III, lines 1 a and 4 , Part IV, lines 1 b and 2 b XI, lines 2 d and 4 b, and Part XII, lines 2 d and 4 b. Also complete this part to		de any addıtıonal
	Return Reference	Explanation		
PART)	(, LINE 2	THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) PROVID UNCERTAIN INCOME TAX POSITIONS SHOULD BE RECOGNIZED, MAND PRESENTED IN THE FINANCIAL STATEMENTS THIS REQUIRES TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURS ORGANIZATION'S TAX RETURNS TO DETERMINE WHETHER THE TALIKELY-THAN-NOT OF BEING SUSTAINED WHEN CHALLENGED OR APPLICABLE TAX AUTHORITY TAX POSITIONS NOT DEEMED TO METHAN-NOT THRESHOLD WOULD BE RECORDED AS A TAX BENEFIT (LIABILITY IN THE CURRENT YEAR FOR THE YEAR ENDED JUNE 30, DETERMINED THERE ARE NO UNCERTAIN TAX POSITIONS	EASU 5 THE 5E OF X POS WHEN EET T OR EX	RED, DISCLOSED EVALUATION OF PREPARING THE SITIONS ARE MORE- EXAMINED BY THE THE MORE-LIKELY- PENSE AND
PART >	KI, LINE 2D - OTHER	IMPUTED INTEREST 283,550		
ADJUS	TMENTS			
	(I, LINE 4B - OTHER TMENTS	AFFILIATE REIMBURSEMENTS 662,670 SUBSIDIARY REIMBURSEM	ENTS	272,306

AFFILIATE REIMBURSEMENTS 662,670 SUBSIDIARY REIMBURSEMENTS 272,306

IMPUTED INTEREST 283,550

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493134042645

2013

OMB No 1545-0047

Schedule I (Form 990)

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

Department of the Treasury	Complet	_	answered "Yes," to Forn Attach to Form 990	n 990, Part IV, line 21 or	22.	0	pen to Public
Internal Revenue Service	► Information		orm 990) and its instruct	ions is at <u>www.i<i>rs.gov /</i></u>	<u>form990</u> .		Inspection
Name of the organization						Employer identificati	on number
NEIGHBORHOOD PROGRESS INC	-					34-1611055	
Part I General Informat	tion on Grants and	Assistance				•	
Does the organization mainta the selection criteria used toDescribe in Part IV the organ	award the grants or ass	ıstance?					✓ Yes ┌
Part II Grants and Other Form 990, Part IV,			rganizations in the more than \$5,000. Pa				es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .

Enter total number of other organizations listed in the line 1 table

17

П	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV, line 22.
	Part III can be duplicated if additional space is needed.	

4						
(a)Type of grant or assistan		lumber of cipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental 1	Information.	Provide the inf	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.

rait 20 Supplemental 1	normation Provide the information required in Fart 1, line 2, Fart 111, column (b), and any other additional information.
Return Reference	Explanation
	A CONTRACT IS EXECUTED BETWEEN NPI AND EACH OF THE CDCS CONTAINING STIPULATIONS AND CONDITIONS THE CDC MUST MEET NPI STAFF MEET PERIODICALLY WITH CDC STAFF, TYPICALLY OUARTERLY TWO TIMES A YEAR, WRITTEN REPORTS ARE REQUIRED FROM
	THE CDCS

Schedule I (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 34-1611055

Name: NEIGHBORHOOD PROGRESS INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUCKEYE SHAKER SQUARE DEVELOPMENT CORPORATION 11802 BUCKEYE ROAD CLEVELAND,OH 44120	34-1097181	501(C)(3)	575,885				OPERATING AND PROGRAM SUPPORT

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAND ASSEMBLY FOR NEIGHBORHOOD DEVELOPMENT 11327 SHAKER BLVD SUITE 500W CLEVELAND,OH 44104	42-1735958		25,000				OPERATING AND PROGRAM SUPPORT

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
FAMICOS FOUNDATION 1325 ANSEL ROAD CLEVELAND,OH 44106	34-1053534	501(C)(3)	231,000				OPERATING AND PROGRAM SUPPORT	

Form 990,Schedule I, Pai	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
DETROIT SHOREWAY COMMUNITY DEVELOPMENT ORGANIZATION (DSCDO) 6516 DETROIT AVENUE CLEVELAND,OH 44102	23-7376130	501(C)(3)	281,000				OPERATING AND PROGRAM SUPPORT		

orm 990,Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
OHIO CITY NEAR WEST DEVELOPMENT CORPORATION (OCNWDC) 2525 MARKET AVE SUITE A CLEVELAND,OH 44113	34-1372076	501(C)(3)	196,000				OPERATING AND PROGRAM SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
SLAVIC VILLAGE DEVELOPMENT CORPORATION 5620 BROADWAY CLEVELAND,OH 44127	34-1344279	501(C)(3)	180,000				OPERATING AND PROGRAM SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
TREMONT WEST DEVELOPMENT CORPORATION (TWDC) 2406 PROFESSOR STREET CLEVELAND,OH 44113	23-7029247	501(C)(3)	190,000				OPERATING AND PROGRAM SUPPORT	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
FAIRFAX RENAISSANCE DEVELOPMENT CORPORATION 8111 QUINCY AVENUE SUITE 100 CLEVELAND,OH 44104	34-1706856	501(C)(3)	35,000				OPERATING AND PROGRAM SUPPORT	

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
BURTEN BELL CARR DEVELOPMENT CORPORATION (BBCDI) 3226 E 93RD ST CLEVELAND,OH 44104	34-1657533	501(C)(3)	295,000				OPERATING AND PROGRAM SUPPORT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NORTHEAST SHORES DEVELOPMENT CORPORATION (NESDC) 317 E 156TH ST CLEVELAND,OH 44110	34-1361219	501(C)(3)	196,000				OPERATING AND PROGRAM SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
STL HOUSING LLC 1956 W 25TH ST SUITE 200 CLEVELAND,OH 44113	57-1151167		71,569				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ENTERPRISE COMMUNITY PARTNERS (ECP) 10227 WINCOPIN CIRCLE SUITE 500 COLUMBIA,MD 21044	52-1231931	501(C)(3)	80,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ARBOR PARK PLACE 11327 SHAKER BLVD SUITE 500W CLEVELAND,OH 44104	84-1628498		10,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GLENVILLE DEVELOPMENT CORPORATION 10640 ST CLAIR AVE CLEVELAND,OH 44108	34-1307536	501(C)(3)	100,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KAMM'S CORNER DEVELOPMENT CORP 17407 LORAIN AVE SUITE 200 CLEVELAND,OH 44111	34-1254542	501(C)(3)	101,000				OPERATING AND PROGRAM SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MOUNT PLEASANT NOW (MPN) 13815 KINSMAN ROAD CLEVELAND,OH 44120	34-1599720	501(C)(3)	10,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ST CLAIR SUPERIOR DEVELOPMENT 4205 ST CLAIR AVE CLEVELAND,OH 44103	34-1238020	501(C)(3)	71,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
STOCKYARD AREA REDEVELOPMENT 3167 FULTON ROAD 303 CLEVELAND,OH 44109	23-7376130		90,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WESTERN RESERVE LAND CONSERVANCY THRIVING COMMUNITIES INSTITUTE 2012 W 25TH STREET SUITE 504 CLEVELAND,OH 44113	34-1571233	501(C)(3)	10,000				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NEW VILLAGE CORPORATION 11327 SHAKER BLVD SUITE 500W CLEVELAND,OH 44104	34-1653986	501(C)(3)	2,997,980				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Pai	Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VILLAGE CAPITAL CORPORATION 11327 SHAKER BLVD SUITE 500W CLEVELAND,OH 44104	34-1704488	501(C)(3)	419,586				OPERATING AND PROGRAM SUPPORT			

Form 990,Schedule I, Pa	Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
SAINT LUKE'S PHASE III LLC 11327 SHAKER BLVD SUITE 500W CLEVELAND,OH 44104	61-1717963		54,000				OPERATING AND PROGRAM SUPPORT				

<u>Form 990,Schedule I, Pa</u>	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OPPORTUNITY HOUSING CLEVELAND LLC 2999 PAYNE AVENUE CLEVELAND,OH 44114	26-3246341		-255,000				REFUND OF GRANT AWARDED FOR OPERATING AND PROGRAM SUPPORT			

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DLN: 93493134042645

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization NEIGHBORHOOD PROGRESS INC **Employer identification number**

34-1611055

Pa	rt I Questions Regarding Compensation		·			
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des			1b		
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Exec			2		
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all the used by a related organization to establish compensation	at appl	y Do not check any boxes for methods			
	Compensation committee	Γ	Written employment contract			
	Independent compensation consultant	Γ	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, P or a related organization	art VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymen	nt?	4a		Νo
b	Participate in, or receive payment from, a supplemen	tal non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	st comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a		Νo
ь	Any related organization?			5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de			7	Yes	
8	Were any amounts reported in Form 990, Part VII, pa					
	subject to the initial contract exception described in	Regula	itions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)JOEL RATNER PRESIDENT	(i) (ii)	180,000 0	20,000 0	0	14,000 0	18,288 0	232,288	0	
(2)LINDA WARREN SENIOR VICE PRESIDENT	(i) (ii)	146,954 0	6,000 0	0	10,707 0	2,107 0	165,768	0	

Schedule J (Form 990) 2013

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 7	THE BONUSES AWARDED TO JOEL RATNER AND LINDA WARREN WERE DISCRETIONARY

Schedule J (Form 990) 2013

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DLN: 93493134042645

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the or NEIGHBORHOOD P							E	mploy	er ident	tificatio	n numbe	er
					(3) and section		organı	zatıoı				
Comp	olete if the o	rganızatıon a			90, Part IV, line	25a or 25b,	or Form	990-	EZ, Par	t V , lıne	40b	
1 (a) Nam	e of dısqualı	fied person			n disqualified	(c) Des	cription	of tra	nsactioi	n L	(d) Cor	rected?
			perso	on and organ	ızatıon						Yes	No
												-
4958 .					r dısqualıfıed pe		the year	r unde	rsectio	nI		
3 Enterthe a	amount of ta	x, ıf any, on l	ine 2, above, r	reimbursed t	by the organizat	ion			F \$			
Part II Lo	ans to an	d/or Fron	n Intereste	d Derson	<u> </u>							
Co	mplete if the	organization	n answered "Y	es" on Form	990-EZ, Part \ , line 5, 6, or 22		Form 9	90, P	art IV , l	ine 26,	or ıf the	
(a) Name of	(b)	(c)	(d) Loan		(e)Original	(f)Balance	(g) In		(h)		(i)Wr	itten
interested person	Relationsh with organizati	nıp Purpose Ioan		he	principal amount	due	defaul		A pprov by board or commi		agreer	
			То	From	\dashv		Yes	No	Yes	No	Yes	No
				1			†		1	+	1	1
											_	
											_	
											_	
											_	
										1	_	
Tatal						l			1		_	
Total		P S		Tetovoct	od Dorgona							
					ed Persons. n Form 990, P	art IV line	27					
(a) Name of Ir			nship between		unt of assistanc) Durna		
perso		interested	nsnip between person and the nization		unt of assistanc	e (d) Typ	e 01 a55	istant	.e (e	:) Purpo:	se oi ass	sistance
		-				•						
												
				+								
				+								

Business Transactions Complete if the organizati			ne 28a. 28b. or 28c.			
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization' revenues?		
				Yes	No	
See Additional Data Table						

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Schedule L (Form 990 or 990-EZ) 2013

Software ID: **Software Version:**

EIN: 34-1611055

Name: NEIGHBORHOOD PROGRESS INC

Form 990, Schedule L, Part IV -	Business Transaction		ested Persons			
(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
	organization			Yes	No	
(1) MARK MCDERMOTT	DIRECTOR	381,528	VP FOR OHIO OF ENTERPRISE COMMUNITY PARTNERS CLEVELAND NEIGHBORHOOD PROGRESS PROVIDED \$93,100 OF GRANTS TO AND RECEIVED FEDERAL FUNDING GRANTS FROM ENTERPRISE COMMUNITY PARTNERS IN THE AMOUNT OF \$288,428		No	
(2) PAUL CLARK	DIRECTOR		REGIONAL PRESIDENT OF NORTHERN OHIO FOR PNC FINANCIAL SERVICES GROUP PNC FOUNDATION HAS MADE GRANTS TO CLEVELAND NEIGHBORHOOD PROGRESS AND ITS AFFILIATE VILLAGE CAPITAL CORPORATION		No	
(3) DAVID REYNOLDS	DIRECTOR		MANAGING DIRECTOR OF PRIVATE WEALTH AT JP MORGAN CHASE WHICH PROVIDES GRANTS TO NEIGHBORHOOD PROGRESS		No	
(4) FREDDY COLLIER	DIRECTOR		FREDDY COLLIER HOLDS AN EXECUTIVE POSITION WITH THE CITY OF CLEVELAND CLEVELAND NEIGHBORHOOD PROGRESS RECEIVES GRANTS FROM AND HAS CONTRACTUAL ENGAGEMENTS WITH THE CITY WHICH BRING REVENUE TO NEIGHBORHOOD PROGRESS		Νο	
(5) BRIAN FRIEDMAN	DIRECTOR	210,410	BRIAN FRIEDMAN IS THE EXECUTIVE DIRECTOR OF NORTHEAST SHORES DEVELOPMENT CORPORATION DURING THE FISCAL YEAR, CLEVELAND NEIGHBORHOOD PROGRESS MADE PAYMENTS TOTALING \$210,410 TO NORTHEAST SHORES DEVELOPMENT CORPORATION, PRIMARILY IN THE FORM OF GRANTS		No	
(6) DARYL RUSH	DIRECTOR		DARYL RUSH HOLDS AN EXECUTIVE POSITION WITH THE CITY OF CLEVELAND CLEVELAND NEIGHBORHOOD PROGRESS RECEIVES GRANTS FROM AND HAS CONTRACTUAL ENGAGEMENTS WITH THE CITY WHICH BRING REVENUE TO NEIGHBORHOOD PROGRESS		No	
(7) ANTHONY BRANCATELLI	DIRECTOR		THE HONORABLE ANTHONY BRANCATELLI IS A COUNCILMAN FOR THE CITY OF CLEVELAND CLEVELAND NEIGHBORHOOD PROGRESS RECEIVES GRANTS FROM AND HAS CONTRACTUAL ENGAGEMENTS WITH THE CITY WHICH BRING REVENUE TO NEIGHBORHOOD PROGRESS		Νο	

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As Filed Data -

DLN: 93493134042645

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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

2013

Name of the organization
NEIGHBORHOOD PROGRESS INC

Employer identification number

34-1611055

PORMISSO, PART I, PAGE 1, YOF CALVELAND NIGHERORDO PROGRESS IS A LOCAL COMMUNITY DEVELOPMENT FUNDING INTERMEDIARY WITH O'VER TWENTY-FIVE YEARS OF EXPERIENCE INVESTING IN COMMUNITY REVITALLATION WORK IN THE CITY OF CALVELAND NIGHERORDORY IN THE RESIDIA ON COMMUNITY REVITALLATION WORK IN THE CITY THE COLLY LOCAL INTERMEDIARY IN THE RESIDIA AND IS PROUD TO BE NATIONALLY HIGH-LICATION AS A LEADER FOR ENAGRING IN BEST PREVIOUS AND IS PROUD TO BE NATIONALLY HIGH-LICATION AS A LEADER FOR ENAGRING IN BEST PREVIOUS AND IS PROUD TO BE NATIONALLY HIGH-LICATION AS A LEADER FOR ENAGRING IN BEST PREVIOUS AND IS PROUD TO BE NATIONALLY HIGH-LICATION AS A LEADER FOR ENAGRING IN BEST PREVIOUS AND IS PROUD TO BE NATIONALLY HIGH-LICATION AS A LEADER FOR ENAGRING IN BEST PREVIOUS AND IS PROUD TO BE NATIONALLY HIGH-LICATION AS A LEADER FOR ENAGRING AS CERTAIN THE PROPRIET OF THE PROPRIET BEST BY THE PROGRAMMING THE CREAN PRIVATE THE PROGRAMMING ASCENDAL IS INTERDED TO ADDRESS THE MOST CRITICAL ISSUES CONFRONTING THE E HIRE COMMUNITY DEVELOPMENT SYSTEM THE CREANIZATION PROVIDES PROGRAMS AND SERVICES TO IMP LEMENT ROGREDOR PROVIDERS TO EXPAND THE STAKEHOLDERS IN COMMUNITY REVITALEZATION, INCREAS E ASSESTS FOR RESIDENTS AND DERBASES THROUGHOUT THE STAKEHOLDERS IN COMMUNITY REVITALEZATION, INCREAS E ASSESTS FOR RESIDENTS AND DERBASES THROUGHOUT THE RESION WORKING IN PARTITIONED HIP WITH HOMMANTY DEVELOPMENT CORPORATIONS, LOCAL FOUNDATIONS, IN THE BUSINESS COMMUNITY, AND SHE DIVERSORY DEPLOYMENT CORPORATIONS, LOCAL FOUNDATIONS, IN THE BUSINESS COMMUNITY, AND SHE WORKING IN PARTITIONED AS BETTER UNALITY OF LIFE CLEVELAND NIGHBEOFROD PROCRESS MAINTAINS AN INDEPEDDATE BOARD OF TRUSTESS WITH REPRESENTATIVES OF FACH MAJOR SECTORS THE EXPENSION FOUNDATION A BETTER UNALITY OF LIFE CLEVELAND NIGHBEOFROD PROCRESS MAINTAINS AN INDEPEDDATE BOARD OF TRUSTESS WITH REPRESENTATIVES OF FACH MAJOR SECTORS THE CITY AND SECTORS THE CONTRACT OF THE ADDRESS AND SECTORS INFERDATION AND ADDRESS AND SECTORS INFERDATION AND ADDRESS AND SECTORS INFERDATION AND AD	Return Reference	Explanation	
IMPROVING SERV ICE DELIVERY THE NEW STRUCTURE REFLECTS A GREATER EMPHASIS ON STRATEGIES TO INCREASE ECON OMIC OPPORTUNITY AS A VITAL COMPONENT OF OUR PLACE	Verel elice	PART I, PAGE 1,	WITH OVER TWENTY-FIVE YEARS OF EXPERIENCE INVESTING IN COMMUNITY REVITALIZATION WORK IN THE CITY OF CLEVELAND NEIGHBORHOOD PROGRESS WAS POLDED IN 1988 AND SERVES A LINGUE FUNCTION AS THE ONLY LOCAL INTERMEDIARY IN THE REGION AND IS PROUD TO BE NATIONALLY HIGHLIGHTED AS A LEADER FOR BY REAGHT AND THE REGION AND IS PROUD TO BE NATIONALLY HIGHLIGHTED AS A LEADER FOR ENGAGEMENT FROM THE ADDRESS LEADERS IN OFFICE TO MARSHAL THE RES OURCES OF CLEVELAND'S PROTECTION OF WAS ESTABLISHED BY PHILANTH-FORC AND BUSINESS LEADERS IN OFFICE TO MARSHAL THE RES OURCES OF CLEVELAND'S PUBLIC AND PRIVATE SECTORS TO COUNTER TRENDS OF DISNVESTMENT THAT I MARSHAL THE REALTH AND LIVABILITY OF CLEVELAND'S NEGLECOPY TO MARSHAL THE RES OURCES OF CLEVELAND'S NEGLECOPY OF MARSHAL THE RES OURCES OF CLEVELAND'S RUBLIC AND PRIVATE SECTORS TO MORE THE PART THAT I MARSHALL THE PART THE PART THE PART THAT I MARSHALL THE PART

Return Reference	Explanation	
	FORM 990, PART I, PAGE 1, LINE 1	MAKING APPROACH, WHICH IS SUPPORTED BY A COMPREHENSIVE CDC SERVICES PLATFORM, THE FOUNDATI ON OF COMMUNITY DEVELOPMENT SINCE THE LAUNCH OF THE NEW ORGANIZATION IN FY2014, CLEVELAND NEIGHBORHOOD PROGRESS HAS CONTINUED TO CAPITALIZE ON THE MOMENTUM GENERATED BY THE MERGER, DEVELOPING AND IMPLEMENTING HIGH-QUALITY PROGRAMMING THAT WILL RESULT IN INCREASED OPPOR TUNITIES FOR CLEVELAND RESIDENTS

Return Reference	Explanation	
Reference	FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS, CONT	COAL 2 MORE CLEVELANDERS LIVING IN VIBRANT NEGHBORHOODS PLACEMAKING PLACEMAKING PUTS THE IMPORTANCE OF A HEALTHY AND LIVIELY NEGHBORHOOD AT THE FOREFRONT OF THE DESIGNAND DEVELOPMENT PROCESS (LEVELAND NEGHBORHOOD AT THE FOREFRONT OF THE DESIGNAND DEVELOPMENT PROCESS (LEVELAND NEGHBORHOOD PROGRESS PROMOTES HEALTH, WELL-BENG, AND HAPPINES SO OF CLEVELAND SUPPORTS THROUGH THE CREATION OF PLACES AND SPACES THAT RESPOND TO COMMUNITY NEEDS AND BINCOURAGE AND SUSTAIN A POSITIVE QUALITY OF LEVE RE-IMAGINING CLEVELAND BY PORTED BY A STRONG, CITYWIDE PUBLIC NON-PROFIT PARTNERSHIP, AND A BROAD BASE OF RESIDENTS, RE-IMAGINING CLEVELAND IS A VACANT LAND REUSE INITIATIVE THAT CREATES SUSTAINABLE SOLUTIONS TO VACANCY WHILE BUILDING A MOVEMENT OF SOLDARRY AND STEWARDSHIP IN AN EFFORT TO BUSINESTHAT MORE CLEVELAND BY AND A DEPOSITIVE OF WISPART MEGHBORHOODS. THE RE-IMAGINING CLEVELAND BY INTERCENTIAL TO SUSTAIN THE SERVING CLEVELAND BY INTERCENT SERVING SERVING CLEVELAND BY INTERCENT SERVING
		MULTIGENERA TIONAL COMMUNITY THE NEARLY \$63 MILLION RENOVATIO

Return Reference	Explanation	
LINE SEF	JE 4A, PROGRAM RVICE COMPLISHMENTS, DNT	N OF THE 85 YEAR-OLD HOSPITAL HAS BEEN PARSED INTO THREE SEGMENTS THE FIRST TWO PHASES IN CLUDE 137 UNITS OF AFFORDABLE APARTMENTS FOR SENIORS PHASES I AND II ARE NOW FULLY OWNED, FUNDED, AND AT 100% OCCUPANCY CLEVELAND NEIGHBORHOOD PROGRESS IS THE OWNER AND DEVELOPER OF PHASE III, WHICH INCLUDES APPROXIMATELY 65,000 SQUARE FEET OF LEASABLE (84,161 GSF), T RANSIT-ORIENTED COMMERCIAL SPACE PHASE III OF THE PROJECT IS NEARING COMPLETION, AND IS THE HOME TO A DYNAMIC MIX OF FULLY-OPERATIONAL TENANTS. THE INTERGENERATIONAL SCHOOL, AN AW ARD-WINNING AND NATIONALLY-RECOGNIZED MEMBER OF THE CMSD-SPONSORED BREAKTHROUGH CHARTER SC HOOL NETWORK, AND THE CLEVELAND BOYS & GIRLS CLUB BEGAN OPERATIONS IN 2013, WITH THE NOVEM BER EARLY CHILDHOOD LEARNING CENTER FOLLOWING CLOSELY BEHIND. IN MARCH OF 2014, THE SAINT LUKES FOUNDATION MOVED THEIR HEADQUARTERS INTO THE EAST WING PENTHOUSE, RETURNING TO THEIR NAMESAKE. CLEVELAND NEIGHBORHOOD PROGRESS STAFF ORCHESTRATES THEIR CITY-WIDE COMMUNITY D EVELOPMENT WORK OUT OF THEIR NEW OFFICES ON THE FIFTH FLOOR CAPABLE OF PROVIDING MUCH-NEE DED SERVICE AND PROGRAMS, THIS TENANT COMBINATION IS A MISSION-PERFECT FIT FOR THE BUCKEYE -SHAKER COMMUNITY. THE COMPLETION OF THE HEALTHY ACTIVE LIVING CENTER MARKS THE END OF THE PHASE III RENOVATION ONCE THE CROWN JEWEL OF THE HISTORIC COMMUNITY LANDMARK, THE DESIGN PARTNERS REIMAGINED THE POTENTIAL OF THE FORMER PRENTISS AUDITORIUM AND SET FORTH TO CREA TE A GRAND MULTIPURPOSE SPACE THAT WILL SERVE THE RESIDENTS OF SAINT LUKES MANOR, THE STU DENTS OF THE INTERGENERATIONAL SCHOOL, AND THE BUCKEYE COMMUNITY AS A GYM, CAFETERIA, AND AUDITORIUM DURING THE SCHOOL YEAR, THE HEALTHY ACTIVE LIVING CENTER WILL SERVE THE RESIDENTS OF ACTIVITIES SPACE, AND A STATE-OF-THE-ART GYMNASIUM, IDEAL FOR FITNESS AND RECREATION ALDOTHONALLY, SAINT LUKES MANOR TENANTS AND BUCKEYE-SHAKER AR EA RESIDENTS WILL HAVE ACCESS TO THE HEALTHY ACTIVE LIVING CENTER FOR EDUCATIONAL AND RECR EATIONAL PROGRAMMING ON A FIRST COME, FIRST SERVE BASIS

Return Reference	Explanation
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS, CONT	COAL 3. INCREASED OPPORTUNITIES FOR MORE CLEVELAND RESIDENTS TO HAVE THE EDUCATION, SKILLS, KNOWLEDGE AND EXPERIENCE TO THRIVE. ECONOMIC OPPORTUNITY. CLEVELAND NICIOHEOR PROCRESS SUPPORTS THE BUILDING BLOCKS OF OUR COMMUNITIES PEOPLE. WE ARE IMPLEMENTING PROGRAMS AND SERVICES TO CULTIVATE COMMUNITY. LEADERS AND ENCAGEMENT WE ARE DEDICATED TO PROVIDING THE MEANS FOR CLEVELAND'S RESIDENTS TO RECEIVE QUALITY EDUCATIONS, TO BE ENGAGED IN MEANINGPUL AND CAINFUL PRIVATE COMMUNITY. LEADERS AND ENCAGEMENT WE ARE DEDICATED TO PROVIDING THE MEANS FOR CLEVELAND'S RESIDENTS TO RECEIVE QUALITY EDUCATIONS, TO BE ENGAGED IN MEANINGPUL AND CAINFUL PRIVATE COMMUNITY. FINANCIAL CENTERS THE COMMUNITY FINANCIAL CENTERS THE COMMUNITY FINANCIAL RESIDENTS OF CLEVELAND CPC IS BASED ON THE MODEL DEVELOPED BY BLOOMBET THE COMMUNITY FINANCIAL RESIDENTS OF CLEVELAND CPC IS BASED ON THE MODEL DEVELOPED BY BLOOMBET THE PHALANTHROPIES AND CITES FOR FINANCIAL EMPOWERMENT. COMMUNITY FINANCIAL CENTERS HAS ADAPTED THIS MODEL TO MEET THE PARTICULAR PREEDS OF CLEVELANDERS. CPC IS NOT SIMPLY A PROCRAM, RATHER, IT IS A COALITION OF PARTINES THAT USE COMMON CURRICULUM, TRAINING, AND TRACKING SOFTWARE TO CREATE AND MEASURE MEANINGPUL OUTCOMES FOR OUR OFTEN OVERLAPPING CLIENTS. CPC LEVERAGES THE COLLECTIVE STRENGTHS OF PUBLIC, RIVATE THAN THOROUGH SUBMINESS. CHIEVE STRENGTHS OF PUBLIC, RIVATE THAN THAN THOROUGH SUBMINESS. CHIEVE STRENGTHS OF PUBLIC, RIVATE THAN THAN THAN THE PORT OF THE PUBLIC PROCREMS THAT REDUCE VULNERABILITY TO PREDATORY LENDING PRACTICES AND FINANCIAL SERVICES - FINANCIAL EDUCATION AND BUDGETING INSTRUCTION FOR MANAGING DEBT AND IMPROVING CREDIT FOR ENHANCED FINANCIAL EDUCATION AND BUDGETING INSTRUCTION FOR MANAGING DEBT AND IMPROVING CREDIT FOR ENHANCED FINANCIAL EDUCATION AND BUDGETING INSTRUCTION FOR MANAGING DEBT AND IMPROVING CREDIT FOR ENHANCED FINANCIAL EXCIVITY - VULNERABILITY TO PREDATORY LENDING PRACTICES AND FINANCIAL SERVICES - FINANCIAL EXCIVITY - VULNERABLILITY OF THE PUBLIC LIENT REPERRALS TO CAREER SERVICES TAY PEPR

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	THOMAS COYNE IS BROTHER OF TERRY COYNE, AN UNPAID TRUSTEE OF AFFILIATED ORGANZATION, VILLAGE CAPITAL CORPORATION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE ARTICLES OF INCOPORATION WERE MODIFIED ON JUNE 5, 2013 TO ACCOMODATE THE MERGER OF CLEVELAND NEIGHBORHOOD PROGRESS (CNP) WITH TWO OTHER ENTITIES, CLEVELAND NEIGHBORHOOD DEVELOPMENT COALITION AND LIVECLEVELAND, EFFECTIVE JULY 1, 2013 THE CODE OF REGULATIONS WAS AMENDED ON DECEMBER 12, 2013 THE TERM "TRUSTEE" WAS REPLACED WITH "DIRECTOR" THE MEETING QUORUM WAS CHANGED FROM ONE HALF TO ONE THIRD DUE TO THE EXPANDED NUMBER OF BOARD MEMBERS THE EXECUTIVE COMMITTEE, THE FINANCE AND AUDIT COMMITTEE, AND THE GOVERNANCE COMMITTEE (FORMERLY CALLED THE NOMINATING COMMITTEE) WERE LIMITED TO SEVEN MEMBERS EACH THE SCOPE OF DUTIES OF THE GOVERNANCE COMMITTEE WAS EXPANDED TO INCLUDE NOMINATING NEW DIRECTORS, NOMINATING OFFICERS, ESTABLISHING STANDARDS AND EXPECTATIONS FOR THE DIRECTORS, AND ORIENTING NEW DIRECTORS THE NEIGHBORHOOD PLANNING COMMITTEE REPLACED AND EXPANDED THE WORK OF THE PROGRAMS COMMITTEE. THE NEIGHBORHOOD PLANNING COMMITTEE OVERSEES ALL ASPECTS OF CNP'S PROGRAMS AND GUIDES THE DEVELOPMENT OF A PLATFORM FOR ACTION TO ADDRESS NEIGHBORHOOD AND COMMUNITY DEVELOPMENT CORPORATION CONCERNS THE LANGUAGE CONCERNING CONFLICTS OF INTEREST HAS BEEN EXPANDED TO CLEARLY SPELL OUT THE REQUIREMENT THAT THE BOARD ENACT A CONFLICT OF INTEREST POLICY AND HAVE ITS DIRECTORS SIGN A STATEMENT REGARDING CONFLICTS ON AN ANNUAL BASIS

Return Reference	Explanation
•	THE ORGANIZATION'S BOARD OF DIRECTORS APPROVES ALL CHANGES TO GOVERNING DOCUMENTS OF THE AFFILIATES IT CONTROLS THE BOARD OF DIRECTORS IS REGULARLY UPDATED ON THE ACTIVITIES OF ITS AFFILIATES THIS POLICY ALSO APPLIES TO NPIFS LLC, A DISREGARDED ENTITY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS PREPARED BY A PROFESSIONAL TAX FIRM, REVIEWED BY THE CHIEF FINANCIAL OFFICER AND REVIEWED AND SIGNED BY THE PRESIDENT OF NPI A COPY OF FORM 990 IS PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING THIS POLICY ALSO APPLIES TO NPIFS LLC, A DISREGARDED ENTITY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION MAINTAINS A WRITTEN CONFLICT OF INTEREST POLICY IF THE POSSIBILITY OF A CONFLICT OF INTEREST EXISTS, STAFF ARE REQUIRED TO DISCLOSE THE DETAILS OF THE SITUATION TO THEIR SUPERVISOR AND BOARD MEMBERS SHALL RECUSE THEMSELVES FROM VOTING ANNUALLY EACH TRUSTEE AS WELL AS SENIOR STAFF MEMBERS MUST COMPLETE AND SIGN A CONFLICT OF INTEREST QUESTIONNAIRE DISCLOSING IN WRITING ANY POTENTIAL CONFLICTS OF INTEREST SUCH ANNUAL STATEMENTS AND ANY OTHER DISCLOSURES OF A POSSIBILITY OF A CONFLICT OF INTEREST SHALL BE MANTAINED BY THE OFFICE MANAGER TO VERIFY THIS CONFLICT OF INTEREST POLICY HAS BEEN FOLLOWED THIS POLICY ALSO APPLIES TO NPIFS LLC, A DISREGARDED ENTITY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION OF THE ORGANIZATIONS PRESIDENT AND CEO IS DETERMINED BY THE BOARD OF DIRECTORS, WHO ARE LOCAL BUSINESS LEADERS FAMILIAR WITH COMPARABILITY OF COMPENSATION LEVELS FOR EXECUTIVES IN THE GEOGRAPHIC REGION AND DRAW UPON VAST BUSINESS EXPERTISE. THE SALARIES OF KEY EMPLOYEES IN THE ORGANIZATION ARE DETERMINED BY THE PRESIDENT AND CEO, AND ARE COMMENSURATE WITH THE SIZE OF THE ORGANIZATION AS WELL AS THE LEVEL AND SCOPE OF RESPONSIBILITY. COMPARABILITY DATA HAS BEEN USED FOR CONFIRMING COMPENSATION LEVELS OF CERTAIN STAFF. ALL EMPLOYEES OF NPIFS LLC, A DISREGARDED ENTITY, ARE ALSO EMPLOYEES OF NEIGHBORHOOD PROGRESS, INC. EMPLOYEES ARE PAID SOLELY BY NEIGHBORHOOD PROGRESS, INC.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF TIME AS SET FORTH IN IRC SECTION 6104(D)

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	AUDIT OVERSIGHT - NPI'S AUDIT COMMITTEE ASSUMES OVERSIGHT OF THE AUDIT AND RECOMMENDS TO THE FULL NPI BOARD APPROVAL OF THE SELECTION OF THE INDEPENDENT ACCOUNTANT AND ALSO RECOMMENDS TO THE FULL NPI BOARD APPROVAL OF THE FINAL AUDIT REPORTS THIS PROCESS DID NOT CHANGE FROM PRIOR YEAR

Return Reference	Explanation
VI, SECTION B,	ORGANIZATION INVESTED IN PARTNERSHIPS - THE ORGANIZATION INVESTED IN SEVERAL PARTNERSHIPS THE ORGANIZATION ALSO CONTRIBUTED FUNDING TO STL HOUSING LLC, A PARTNERSHIP BETWEEN AFFILIATE NEW VILLAGE CORPORATION AND BUCKEYE AREA DEVELOPMENT CORPORATION (BOTH TAX-EXEMPT, 501(C)(3) ORGANIZATIONS) IN ORDER TO FURTHER THE ORGANIZATION'S MISSION

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

DLN: 93493134042645

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2013

Related Organizations and Unrelated Partnerships ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization NEIGHBORHOOD PROGRESS INC

(Form 990)

SCHEDULE R

Employer identification number
34-1611055

Part I Identification of Disregarded Entities Con	mplete if the organization	answered "Yes"	on Form 990,	Part IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) NPIFS LLC 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104	REAL ESTATE RENTAL AND SALES TO COMBAT BLIGHT	ОН	15,184	1,095,217	NEIGHBORHOOD PROGRESS INC	_	
27-1243843							
							_
Part II Identification of Related Tax-Exempt Orgon more related tax-exempt organizations during			answered "Yes		Part IV, line 34 because it h	ad one	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec	tion (e) Public charity st (if section 501(c)		(g) Section 5: (b)(13) controlle entity?	512 8) ed
(1) NEW VILLAGE CORP 11327 SHAKER BLVD SUITE 500W	REAL ESTATE DEVELOPMENT TO COMBAT BLIGHT	ОН	501 (C)(3)	LINE 7	NEIGHBORHOOD PROGRESS INC	Yes N	No No
CLEVELAND, OH 44104 34-1653986							
(2) VILLAGE CAPITAL CORP 11327 SHAKER BLVD SUITE 500W	LENDING FOR COMMUNITY DEVELOPMENT	ОН	501 (C)(3)	LINE 11A, I	NEIGHBORHOOD PROGRESS INC		No
CLEVELAND, OH 44104 34-1704488							_
						\vdash	_
							_
							_

Cat No 50135Y

Part III

Identification of Related Organizations Taxable as a Partnership Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because It had one or more related organizations treated as a partnership during the tax year.

because it flad offe of filore related organizati						 					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	or .	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)		allocati	prtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	eral or laging tner?	(k) Percentage ownership
		 '	<u> </u>	·	<u>'</u>	 Yes	No		Yes		4
(1) FRIES AND SCHUELE LTD 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 34-1947105	RESIDENTIAL REAL ESTATE TO COMBAT BLIGHT	L OH	NEIGHBORHOOD PROGRESS INC	EXCLUDED			No		Yes		99 500 %
(2) ARBOR PARK PLACE LLC 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 84-1628498	RETAIL REAL ESTATE TO COMBAT BLIGHT		NEW VILLAGE CORP				No			No	99 250 %
(3) STL HOUSING LLC 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 57-1151167	RESIDENTIAL REAL ESTATE TO COMBAT BLIGHT	L OH	NEW VILLAGE CORP	N/A			No			No	50 000 %
(4) OPPORTUNITY HOUSING CLEVELAND 2999 PAYNE AVE CLEVELAND, OH 44114 26-3246341	RESIDENTIAL REAL ESTATE TO COMBAT BLIGHT	L OH	NEW VILLAGE CORP	EXCLUDED			No			No	50 000 %
(5) SAINT LUKE'S PHASE III LLC 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 61-1717963	RETAIL REAL ESTATE TO COMBAT BLIGHT	ОН	STL GRP-E CORP	EXCLUDED			No			No	100 000 %
(6) SAINT LUKE'S PHASE III MASTER TENANT LLC 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 46-3194268	RETAIL REAL ESTATE TO COMBAT BLIGHT	ОН	NEW VILLAGE CORP	EXCLUDED			No			No	100 000 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.										
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i Section (b)(contro entr	n 512 13) olled	
								Yes	No	
(1) ST LUKE'S POINTE HOMEOWNERS' ASSOCIATION 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 20-8546912	HOMEOWNERS' ASSOCIATION	ОН	STL HOUSING LLC	С			87 000 %		No	
(2) STL GP-1 CORP 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 27-4725064	DEVELOPING QUALITY AFFORDABLE HOUSING	ОН	STL HOUSING LLC	С	590,011	2,173,034	100 000 %		No	
(3) STL GP-2 CORP 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 46-0730923	DEVELOPING QUALITY AFFORDABLE HOUSING	ОН	STL DEVELOPMENT LLC	С			100 000 %		No	
(4) CLEVELAND HOUSING RENEWAL PROJECT 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104	REAL ESTATE ACTIVITIES TO COMBAT BLIGHT	ОН	LAND ASSEMBLY FOR NEIGHBORHOOD	С			100 000 %		No	
(5) STL GP-3 CORP 11327 SHAKER BLVD SUITE 500W CLEVELAND, OH 44104 46-3194152	RETAIL REAL ESTATE TO COMBAT BLIGHT	ОН	STL DEVELOPMENT LLC	c	398,531	482,521	100 000 %		No	

(6) SAINT LUKE'S PHASE III LLC

cneat	ne k (F01111 990) 2013					Рас	ge 3
Part	Transactions With Related Organizations Complete if the o	organization answered "	Yes" on Form 990, Part I	V, line 34, 35b, or 36.			
١	lote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	e				Yes	No
1 Dur	ing the tax year, did the orgranization engage in any of the following transactions	s with one or more related o	organizations listed in Parts	II-IV?			
a l	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled e	entity		Ī	.a		No
Ь	Gift, grant, or capital contribution to related organization(s)			1	.b	Yes	
c (Gift, grant, or capital contribution from related organization(s)			[1	lc		No
d I	oans or loan guarantees to or for related organization(s)			1	.d	Yes	
e I	oans or loan guarantees by related organization(s)			1	e	Yes	
f [Dividends from related organization(s)			t	.f		No
	Sale of assets to related organization(s)			1	.g		No
_	Purchase of assets from related organization(s)			L	.h		No
	xchange of assets with related organization(s)			<u> </u>	Li		No
j L	ease of facilities, equipment, or other assets to related organization(s)			Ţ	lj		No
k I	ease of facilities, equipment, or other assets from related organization(s)			[1	.k		No
I P	erformance of services or membership or fundraising solicitations for related org	ganızatıon(s)		ا_:	u		No
m P	erformance of services or membership or fundraising solicitations by related org	ganızatıon(s)		<u>[</u> 2	lm		No
n S	haring of facilities, equipment, mailing lists, or other assets with related organiza	ration(s)		[:	1n		No
o :	Sharing of paid employees with related organization(s)			[1	.0		No
p	Reimbursement paid to related organization(s) for expenses			1	.p		No
-	Reimbursement paid by related organization(s) for expenses			<u> </u>	.q		No
7	termination in the part of the control of the contr				†		
r	ther transfer of cash or property to related organization(s)			7	lr		No
s (Other transfer of cash or property from related organization(s)			Į	s		No
2 I	f the answer to any of the above is "Yes," see the instructions for information on	n who must complete this lir	ne, including covered relation	 nships and transaction thresholds			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount invo	lved		

	type (a-s)		· · · · · · · · · · · · · · · · · · ·
(1) STL HOUSING LLC	В	71,569	FMV
(2) FRIES AND SCHUELE LTD	D	50,000	FMV
(3) STL HOUSING LLC	Е	51,569	FMV
(4) NEW VILLAGE CORP	В	2,997,980	FMV
(5) VILLAGE CAPITAL CORP	В	419,586	FMV

54,000 FMV

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

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

revenue) that was not a related organization. See instructions i																	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) (f) Are all partners section tota 501(c)(3) incor organizations?		(g) Share of end-of-year assets	(g) Share of id-of-year assets (h) Disproprtions allocations		(h) f Disproprtional ear allocations?				(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No					
												1					
													_				
			<u> </u>				l					<u> </u>					

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 34-1611055

Name: NEIGHBORHOOD PROGRESS INC

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

· · · · · · · · · · · · · · · · · · ·			
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
STL HOUSING LLC	В	71,569	FMV
FRIES AND SCHUELE LTD	D	50,000	FMV
STL HOUSING LLC	E	51,569	FMV
NEW VILLAGE CORP	В	2,997,980	FMV
VILLAGE CAPITAL CORP	В	419,586	FMV
SAINT LUKE'S PHASE III LLC	В	54,000	FMV