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
▶ Information about Form 990 and its instructions is at *www.IRS.gov/form990*

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014

B Check if applicable
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Doing business as
THE NATIONAL DEVELOPMENT COUNCIL

Number and street (or P O box if mail is not delivered to street address) Room/suite
708 THIRD AVENUE NO 710

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10017

D Employer identification number
13-6532871

E Telephone number
(212) 682-1106

G Gross receipts $ 9,457,380

F Name and address of principal officer
ROBERT W DAVENPORT
708 THIRD AVENUE NO 710
NEW YORK, NY 10017

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW NATIONALDEVELOPMENTCOUNCIL ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1972

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SEE SCHEDULE O

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	90
6	Total number of volunteers (estimate if necessary)	6	7
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	6,289,678	2,881,261
	9	Program service revenue (Part VIII, line 2g)	6,239,618	5,705,203
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	160,214	280,496
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,689,510	8,866,960
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	325,728	16,230
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,410,749	6,864,448
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,069		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	5,635,518	3,770,774
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	13,371,995	10,651,452
	19	Revenue less expenses Subtract line 18 from line 12	-682,485	-1,784,492

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	20,482,571	18,625,910
	21	Total liabilities (Part X, line 26)	6,314,894	9,590,203
	22	Net assets or fund balances Subtract line 21 from line 20	14,167,677	9,035,707

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2015-11-16
Signature of officer Date

ROBERT W DAVENPORT PRESIDENT & CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
STEVEN LAPSKER	STEVEN LAPSKER			P00850484

Firm's name ▶ RSM US LLP — Firm's EIN ▶ 42-0714325

Firm's address ▶ 1185 AVENUE OF THE AMERICAS
NEW YORK, NY 100362602 — Phone no (212) 372-1000

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

SEE SCHEDULE O

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

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

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(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

4a (Code) (Expenses $ 1,164,702 including grants of $) (Revenue $ 1,526,575)

ENCOURAGE AND FOSTER BUSINESS OWNERSHIP BY MEMBERS OF DISADVANTAGED GROUPS SEE SCHEDULE O

4b (Code) (Expenses $ 3,532,427 including grants of $ 16,230) (Revenue $ 2,320,812)

CONDUCT PROGRAMS TO INFORM AND AID COMMUNITIES IN OBTAINING AND UTILIZING GOVERNMENTAL AND OTHER FUNDS FOR SUPPORT OF LOCAL ECONOMIC DEVELOPMENT SEE SCHEDULE O

4c (Code) (Expenses $ 2,183,812 including grants of $) (Revenue $ 1,965,200)

TO PROVIDE HOUSING FOR LOW INCOME INDIVIDUALS AND FAMILIES SEE SCHEDULE O

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 6,880,941

Part 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)?	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		No
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? *If "Yes," complete Schedule C, Part III*	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*	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
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	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	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
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	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
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	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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
15	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
16	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? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		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? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part 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 domestic 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 or for domestic individuals 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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer 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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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), 501(c)(4), and 501(c)(29) 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 "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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)			
a	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
c	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		No
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? *If "Yes," complete Schedule M*	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? *If "Yes," complete Schedule R, Part I*	33		No
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	Yes	
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	47		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	90		
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	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		**3a**		No
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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
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).**				
a	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	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**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		No
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.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		**8**		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		**9b**		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		**14b**		

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 VI . . . ☑

Section 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	**1a** 9			
b	Enter the number of voting members included in line 1a, above, who are independent . . .	**1b** 7			
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**		No
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**		No
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
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	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? *If "Yes," provide the names and addresses in Schedule O* . . .		**9**		No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . .	**10a**		No
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?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . .			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13* . . .	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	**12c**	Yes	
13	Did the organization have a written whistleblower policy? . . .	**13**	Yes	
14	Did the organization have a written document retention and destruction policy? . . .	**14**	Yes	
15	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?			
a	The organization's CEO, Executive Director, or top management official . . .	**15a**	Yes	
b	Other officers or key employees of the organization . . .	**15b**		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . .	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . .	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶NY

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶GERTRUDE SCRIVEN

708 THIRD AVENUE SUITE 710
NEW YORK, NY 10017 (212) 682-1106

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

Check ıf Schedule O contaıns a response or note to any lıne ın this Part VII . . . . ☑

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

1a Complete this table for all persons required to be listed Report compensatıon for the calendar year endıng wıth or wıthın the organızatıon's tax year

- List all of the organization's **current** officers, dırectors, trustees (whether ındıvıduals or organızatıons), regardless of amount of compensatıon Enter -0- ın columns (D), (E), and (F) ıf no compensatıon was paıd
- List all of the organization's **current** key employees, ıf any See ınstructıons for definition of "key employee "
- List the organization's five **current** hıghest compensated employees (other than an officer, dırector, trustee or key employee) who receıved reportable compensatıon (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organızatıon and any related organızatıons
- List all of the organization's **former** officers, key employees, or hıghest compensated employees who receıved more than $100,000 of reportable compensatıon from the organızatıon and any related organızatıons
- List all of the organization's **former directors or trustees** that receıved, ın the capacıty as a former dırector or trustee of the organızatıon, more than $10,000 of reportable compensatıon from the organızatıon and any related organızatıons

Lıst persons ın the followıng order ındıvıdual trustees or dırectors, ınstıtutıonal trustees, officers, key employees, hıghest compensated employees, and former such persons

☐ Check this box ıf neıther the organızatıon nor any related organızatıon compensated any current officer, dırector, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) ROBERT W DAVENPORT PRES/CEO/BD MEMBER	48 50 9 00	X		X				318,796	56,259	15,816
(2) SAMUEL S BEARD CHAIRMAN/BD MEMBER	45 00 1 50	X		X				306,992	10,716	33,843
(3) SETH BONGARTZ BOARD MEMBER	4 70 2 70	X						0	0	0
(4) SAUNDRA JOHNSON HUDSON SECRETARY/BD MEMBER	4 70 2 30	X		X				0	0	0
(5) WILLIAM YOUNG III BOARD MEMBER	3 90 2 10	X						0	0	0
(6) BARRY J LANG BOARD MEMBER	3 10 1 60	X						0	0	0
(7) INDIA PIERCE LEE BOARD MEMBER	3 00 1 50	X						0	0	0
(8) DOUGLAS PONECK TREASURER/BD MEMBER	3 10 1 20	X		X				0	0	0
(9) BURT TAUBER BOARD MEMBER	4 70 1 90	X						0	0	0
(10) GERTRUDE SCRIVEN CFO	47 50 2 50			X				133,856	7,045	17,506
(11) JOHN W DOWNS REGIONAL MANAGER	40 50 4 50				X			208,754	23,194	38,223
(12) THOMAS JACKSON PRODUCT MANAGER	47 00 3 00				X			154,941	9,891	34,403
(13) DANIEL MARSH III SENIOR MANAGER	50 00 5 50				X			235,747	23,317	73,228
(14) JOHN PALYO PRODUCT MANAGER	3 00 47 00				X			12,562	196,798	34,078

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15) PATRICIA THOMSON REGIONAL MANAGER	47 00 3 30				X			197,255	12,591	42,345
(16) ANN VOGT PRODUCT MANAGER	6 00 49 50				X			28,415	229,900	16,826
(17) KEVIN GREMSE REGIONAL MANAGER	47 00 3 30				X			183,169	11,691	33,203
(18) ANGELA BUTLER PRODUCT MANAGER	43 00 7 00					X		126,128	20,532	18,076
(19) DAVID J TREVISANI PRODUCT MANAGER	5 00 45 00					X		14,863	133,769	35,603
(20) SCOTT RODDE FIELD DIRECTOR	41 50 8 50					X		214,404	18,644	33,123
(21) JOHN LINNER CEF FUND MANAGER	5 00 45 00					X		16,257	146,311	33,604
(22) MATTHEW WEXLER FIELD DIRECTOR	43 70 1 30					X		155,064	4,796	33,703

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	2,307,203	905,454	493,580

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶29

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NATIONAL COMMUNITY STABILIZATION TRUST 910 17TH ST NW STE 1030 WASHINGTON, DC 20006	CONSULTING	206,909
SHALLO GALLUSCIO BIANCHI & FUCITO CPA 21 NORTH SEVENTH STREET HUDSON, NY 12534	ACCOUNTING	147,279
RAPOZA ASSOCIATES 1331 G STREET NW 10TH FLOOR WASHINGTON, DC 20005	CONSULTING	136,009
COPILEVITZ & CANTER 1900 L STREET NW SUITE 215 WASHINGTON, DC 20036	LEGAL	102,762

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 ▶4

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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
Contributions, Gifts, Grants and Other Similar Amounts	**1a**	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d 1,335,981				
	e	Government grants (contributions)	1e 507,280				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,038,000				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ▶		2,881,261			
Program Service Revenue			Business Code				
	2a	PROVIDE TECHNICAL ASST	900099	3,974,831	3,974,831		
	b	CONDUCT TRAINING	900099	1,730,372	1,730,372		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		5,705,203			
Other Revenue	**3**	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		255,729	107,385		148,344
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 615,187				
	b	Less cost or other basis and sales expenses	(i) 590,420				
	c	Gain or (loss)	(i) 24,767				
	d	Net gain or (loss) . . . . ▶		24,767			24,767
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances .	a				
	b	Less cost of goods sold . .	b				
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . ▶					
	12	**Total revenue.** See Instructions . . . . . ▶		8,866,960	5,812,588	0	173,111

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete 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 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	16,230	16,230		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,663,896	1,921,753	742,143	
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	2,450,384	1,755,957	694,427	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	850,662	620,626	230,036	
9 Other employee benefits	620,328	468,976	151,352	
10 Payroll taxes	279,178	209,497	69,681	
11 Fees for services (non-employees)				
a Management				
b Legal	71,145		71,145	
c Accounting	78,490		78,490	
d Lobbying	136,009		136,009	
e Professional fundraising services See Part IV, line 17				
f Investment management fees	9,989	9,989		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	551,492	327,674	222,941	877
12 Advertising and promotion	5,826		5,826	
13 Office expenses	306,134	224,960	81,174	
14 Information technology	37,470	9,016	28,454	
15 Royalties				
16 Occupancy	337,646	246,482	91,164	
17 Travel	831,901	716,600	115,301	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	361,668		361,668	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	37,007		37,007	
23 Insurance	158,292		158,292	
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)				
a TRAINING SITES	254,740	254,740		
b EQUIPMENT RENTAL	180,412	83,287	97,125	
c BAD DEBT	166,594		166,594	
d TRAINING EXPENSE	87,922	285	87,637	
e All other expenses	158,037	14,869	142,976	192
25 **Total functional expenses.** Add lines 1 through 24e	10,651,452	6,880,941	3,769,442	1,069
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)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		245,906	1	453,758
	2	Savings and temporary cash investments		1,252,388	2	1,100,031
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		615,872	4	1,052,044
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		8,256,198	7	8,169,668
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		45,021	9	84,245
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 793,761			
	b	Less accumulated depreciation	10b 685,629	115,545	10c	108,132
	11	Investments—publicly traded securities		2,663,262	11	2,856,944
	12	Investments—other securities See Part IV, line 11		645,000	12	425,000
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		6,643,379	15	4,376,088
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		20,482,571	16	18,625,910
Liabilities	17	Accounts payable and accrued expenses		275,290	17	361,967
	18	Grants payable			18	
	19	Deferred revenue			19	203,563
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		6,039,604	25	9,024,673
	26	**Total liabilities.** Add lines 17 through 25		6,314,894	26	9,590,203
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		14,167,677	27	8,244,264
	28	Temporarily restricted net assets			28	791,443
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		14,167,677	33	9,035,707
	34	Total liabilities and net assets/fund balances		20,482,571	34	18,625,910

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,866,960
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,651,452
3	Revenue less expenses Subtract line 2 from line 1	3	-1,784,492
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,167,677
5	Net unrealized gains (losses) on investments	5	-185,370
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1,568,332
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-4,730,440
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	9,035,707

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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 reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☐ 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Employer identification number
13-6532871

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ____________

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section (see instructions))	**(iv)** Is the organization listed in your governing document?		**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
			Yes	**No**		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) | 12 |

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) | 14 |

15 Public support percentage for 2013 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2013.** 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—2014.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2013.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	5,986,432	11,578,609	7,506,514	6,289,678	2,881,261	34,242,494
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	5,755,923	7,082,460	7,794,193	6,239,618	5,705,203	32,577,397
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	11,742,355	18,661,069	15,300,707	12,529,296	8,586,464	66,819,891
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b						0
8 **Public support** (Subtract line 7c from line 6)						66,819,891

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6	11,742,355	18,661,069	15,300,707	12,529,296	8,586,464	66,819,891
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	59,641	65,040	369,441	160,214	255,729	910,065
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	59,641	65,040	369,441	160,214	255,729	910,065
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)		1,300				1,300
13 **Total support.** (Add lines 9, 10c, 11, and 12)	11,801,996	18,727,409	15,670,148	12,689,510	8,842,193	67,731,256

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	98 650 %
16	Public support percentage from 2013 Schedule A, Part III, line 15	16	99 000 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f))	17	1 340 %
18	Investment income percentage from **2013** Schedule A, Part III, line 17	18	1 000 %

19a **33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2013.** 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 ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.* . . .	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990) .*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*	10b		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	11c		

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

		Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

		Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

		Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

a ☐ The organization satisfied the Activities Test Complete **line 2** below

b ☐ The organization is the parent of each of its supported organizations Complete **line 3** below

c ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

		Yes	No
2 Activities Test **Answer (a) and (b) below.**			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3 Parent of Supported Organizations **Answer (a) and (b) below.**			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*	**3a**		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	**3b**		

Part V – Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	**1**		
2	Recoveries of prior-year distributions	**2**		
3	Other gross income (see instructions)	**3**		
4	Add lines 1 through 3	**4**		
5	Depreciation and depletion	**5**		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7	Other expenses (see instructions)	**7**		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	**8**		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	**1**		
a	Average monthly value of securities	**1a**		
b	Average monthly cash balances	**1b**		
c	Fair market value of other non-exempt-use assets	**1c**		
d	**Total** (add lines 1a, 1b, and 1c)	**1d**		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI) ____________			
2	Acquisition indebtedness applicable to non-exempt use assets	**2**		
3	Subtract line 2 from line 1d	**3**		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	**4**		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6	Multiply line 5 by 035	**6**		
7	Recoveries of prior-year distributions	**7**		
8	**Minimum Asset Amount** (add line 7 to line 6)	**8**		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	**1**		
2	Enter 85% of line 1	**2**		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**		
4	Enter greater of line 2 or line 3	**4**		
5	Income tax imposed in prior year	**5**		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009. . . . . . . ____________			
b From 2010. . . . . . . ____________			
c From 2011. . . . . . . ____________			
d From 2012. . . . . . . ____________			
e From 2013. . . . . . . ____________			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 $ ____________			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2015.** Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010. . . . . . . ____________			
b From 2011. . . . . . . ____________			
c From 2012. . . . . . . ____________			
d From 2013. . . . . . . ____________			
e From 2014. . . . . . . ____________			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493320031505

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

OMB No 1545-0047
2014
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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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC	13-6532871

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	136,009	
c	Total lobbying expenditures (add lines 1a and 1b)	136,009	
d	Other exempt purpose expenditures	10,515,443	
e	Total exempt purpose expenditures (add lines 1c and 1d)	10,651,452	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	682,573	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	170,643	
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2011	**(b)** 2012	**(c)** 2013	**(d)** 2014	**(e)** Total
2a	Lobbying nontaxable amount	777,835	946,060	818,600	682,573	3,225,068
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,837,602
c	Total lobbying expenditures	108,309	137,156	155,663	136,009	537,137
d	Grassroots nontaxable amount	194,459	236,515	204,650	170,643	806,267
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,209,401
f	Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a) Yes	(a) No	(b) Amount
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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, 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).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	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	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation

Part IV **Supplemental Information *(continued)***

Return Reference	Explanation

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Employer identification number
13-6532871

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance					
b	Contributions					
c	Net investment earnings, gains, and losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		29,436	10,915	18,521
d Equipment		764,325	674,714	89,611
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . . . ▶				108,132

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation 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. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or 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 answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DEPOSITS	22,476
(2) ADVANCE RECEIVABLE - GROW AMERICA FUND	381,640
(3) OTHER ADVANCES RECEIVABLE	53,248
(4) GRANTS RECEIVABLE - AFFILIATE	483,935
(5) ADVANCE RECEIVABLE - NDC HEDC	3,313,494
(6) ADVANCE RECEIVABLE - OTHER 501(C)(3) AFFILIATES	72,552
(7) ADVANCE RECEIVABLE - NDC SUPPORT I	48,743
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	4,376,088

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
PROJECTED NON QUAL PENSION PLAN LIAB	2,559,237
PROJECTED DEFINED BENEFIT PENSION	6,465,436
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	9,024,673

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	8,901,590
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	34,630		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	34,630
3	Subtract line **2e** from line **1**			3	8,866,960
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	8,866,960

Part XII **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	10,651,452
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	10,651,452
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	10,651,452

Part XIII **Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE TO BE A SECTION 501(C)(3) CHARITABLE ORGANIZATION EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE (THE IRC) THE ORGANIZATION HAS BEEN CLASSIFIED AS A PUBLICLY SUPPORTED ORGANIZATION AND NOT AS A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) OF THE IRC AND QUALIFIES FOR THE MAXIMUM CHARITABLE CONTRIBUTION DEDUCTION BY DONORS AS A NOT-FOR-PROFIT ORGANIZATION, THE ORGANIZATION IS SUBJECT TO TAXES ON UNRELATED BUSINESS INCOME MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT OR DISCLOSURE TO THE FINANCIAL STATEMENTS WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U S FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2011, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Employer identification number
13-6532871

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
(1) NDC SUPPORT I INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10007	13-4156877	501(C)(3)	16,230				TO SUPPORT ITS OPERATIONS

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

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 0

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	**Explanation**
PART I, LINE 2	PROCEDURES FOR MONITORING THE USE OF THE GRANT THE ORGANIZATION MONITORS THE USE OF GRANT FUNDS BY REQUIRING THE GRANTEE TO PROVIDE PERIODIC REPORTS THAT DESCRIBE THE USE OF THE GRANT FUNDS

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.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Employer identification number
13-6532871

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**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-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred in prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table								

Part III 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 4B	NDC HAS ESTABLISHED A NONQUALIFIED DEFERRED COMPENSATION PLAN FOR THE BENEFIT OF ITS EMPLOYEES THE NONQUALIFIED DEFERRED COMPENSATION PLAN IS DEFINED IN SECTION 457(F) OF THE INTERNAL REVENUE CODE THE AMOUNTS REFLECTED AS 'NONQUALIFED' IN PART I, LINE 4 REPRESENT CONTRIBUTIONS MADE TO THIS NONQUALIFIED DEFERRED COMPENSATION PLAN DURING THE YEAR BY THE ORGANIZATION FOR THE BENEFIT OF THESE RESPECTIVE EMPLOYEES *SEE SCHEDULE O FOR ADDITIONAL INFORMATION REGARDING THIS PLAN

Additional Data

Software ID:
Software Version:
EIN: 13-6532871
Name: NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B)(i) Base Compensation	(B)(ii) Bonus & incentive compensation	(B)(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
1 ROBERT W DAVENPORT, PRES/CEO/BD MEMBER	(i)	317,220	0	1,576	0	13,442	332,238	0
	(ii)	55,980	0	279	0	2,374	58,633	0
1 SAMUEL S BEARD, CHAIRMAN/BD MEMBER	(i)	305,201	0	1,791	0	32,702	339,694	0
	(ii)	10,653	0	63	0	1,141	11,857	0
2 GERTRUDE SCRIVEN, CFO	(i)	130,959	0	2,897	0	16,633	150,489	0
	(ii)	6,894	0	151	0	873	7,918	0
3 JOHN W DOWNS, REGIONAL MANAGER	(i)	206,010	0	2,744	4,050	30,351	243,155	0
	(ii)	22,890	0	304	450	3,372	27,016	0
4 THOMAS JACKSON, PRODUCT MANAGER	(i)	153,972	0	969	0	32,339	187,280	0
	(ii)	9,828	0	63	0	2,064	11,955	0
5 DANIEL MARSH III, SENIOR MANAGER	(i)	234,306	0	1,441	35,586	31,051	302,384	0
	(ii)	23,174	0	143	3,519	3,072	29,908	0
6 JOHN PALYO, PRODUCT MANAGER	(i)	12,540	0	22	0	2,044	14,606	0
	(ii)	196,460	0	338	0	32,034	228,832	0
7 PATRICIA THOMSON, REGIONAL MANAGER	(i)	195,767	0	1,488	8,217	31,585	237,057	0
	(ii)	12,495	0	96	525	2,018	15,134	0
8 ANN VOGT, PRODUCT MANAGER	(i)	28,301	0	114	0	1,850	30,265	0
	(ii)	228,982	0	918	0	14,976	244,876	0
9 KEVIN GREMSE, REGIONAL MANAGER	(i)	182,830	0	339	0	31,211	214,380	0
	(ii)	11,670	0	21	0	1,992	13,683	0
10 ANGELA BUTLER, PRODUCT MANAGER	(i)	125,818	0	310	0	15,544	141,672	0
	(ii)	20,482	0	50	0	2,532	23,064	0
11 DAVID J TREVISANI, PRODUCT MANAGER	(i)	14,760	0	103	0	3,560	18,423	0
	(ii)	132,840	0	929	0	32,043	165,812	0
12 SCOTT RODDE, FIELD DIRECTOR	(i)	211,600	0	2,804	0	30,473	244,877	0
	(ii)	18,400	0	244	0	2,650	21,294	0
13 JOHN LINNER, CEF FUND MANAGER	(i)	15,952	0	305	0	3,360	19,617	0
	(ii)	143,568	0	2,743	0	30,244	176,555	0
14 MATTHEW WEXLER, FIELD DIRECTOR	(i)	154,715	0	349	0	32,692	187,756	0
	(ii)	4,785	0	11	0	1,011	5,807	0

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Employer identification number
13-6532871

Return Reference	Explanation
FORM 990, PART I, LINE 1	THE MISSION OF THE NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT DBA THE NATIONAL DEVELOPMENT COUNCIL IS TO CREATE ECONOMIC OPPORTUNITY, AFFORDABLE HOUSING AND TO STRENGTHEN COMMUNITIES IN UNDERSERVED AREAS ACROSS THE UNITED STATES

Return Reference	Explanation
FORM 990, PART III, LINE 1	THE THREE PRIMARY EXEMPT PURPOSES OF THE NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT DBA THE NATIONAL DEVELOPMENT COUNCIL ARE TO - ENCOURAGE AND FOSTER BUSINESS OWNERSHIP BY MEMBERS OF DISADVANTAGED GROUPS - CONDUCT PROGRAMS TO INFORM AND AID COMMUNITIES IN OBTAINING AND UTILITIZING GOVERNMENTAL AND OTHER FUNDS FOR SUPPORT OF LOCAL ECONOMIC DEVELOPMENT - PROVIDE HOUSING FOR LOW INCOME PERSONS

Return Reference	Explanation
FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT	ENCOURAGE AND FOSTER BUSINESS OWNERSHIP BY MEMBERS OF DISADVANTAGED GROUPS THROUGH NDC'S SMALL BUSINESS LENDING UNIT, WE HAVE FOSTERED MORE THAN 500 SMALL BUSINESSES OWNED BY DISADVANTAGED INDIVIDUALS ACROSS THE NATION BY PROVIDING LOANS AND BUSINESS COUNSELING LOANS TOTAL OVER $200 MILLION AT VERY LOW INTEREST RATES AND ATTRACTIVE TERMS THE BUSINESS COUNSELING IS PROVIDED AT NO COST TO THE SMALL BUSINESSES OVER THE LAST SEVERAL YEARS, OUR SMALL BUSINESS LOAN FUND HAS RECEIVED NATIONAL RECOGNITION FROM A VARIETY OF INSTITUTIONS - JPMORGAN CHASE AWARDED NDC'S SMALL BUSINESS LENDING UNIT A $2 3 MILLION GRANT TO MAKE SMALL BUSINESS LOANS IN DISTRESSED AND UNDERSERVED COMMUNITIES ACROSS THE COUNTRY WORKING WITH LOCAL COMMUNITY CDFIS AND CDCS, NDC PROVIDES TA AND FINANCE TRAINING TO THE LOCAL ECONOMIC DEVELOPMENT ORGANIZATIONS, AND USES NDC'S GROW AMERICA FUND TO MAKE LOANS TO SMALL BUSINESSES WHO INVEST IN THEIR COMMUNITIES AND CREATE JOBS TO DATE, FINANCING UNDER THE CHASE PROGRAM HAS RESULTED IN $33 MILLION IN TOTAL FINANCING TO 41 SMALL BUSINESSES WHO HAVE CREATED OR RETAINED 1500 JOBS - EDA HAS MADE A $850,000 CREDIT FACILITY AVAILABLE AT A 0% RATE OF INTEREST TO MAKE LOANS TO DISADVANTAGED BUSINESSES IN DISTRESSED COMMUNITIES IN WASHINGTON STATE - USDA HAS MADE A $750,000 CREDIT FACILITY AVAILABLE TO US FOR 30 YEARS AT 1% RATE OF INTEREST TO MAKE LOANS TO DISADVANTAGED BUSINESSES IN RURAL AREAS OF AMERICA HERE ARE EXAMPLES OF DISADVANTAGED BUSINESSES THAT NDC'S SMALL BUSINESS LOAN FUND HAS RECENTLY ASSISTED - IN NYC, WE ASSISTED AN IMMIGRANT OWNED, HISPANIC MANUFACTURER OF ARTISAN EMPANADAS TO PURCHASE A BUILDING TO HOUSE ITS COMMERCIAL PRODUCTION FOR ITS CATERING OPERATION AND ITS RETAIL LOCATIONS (FOOD TRUCKS AND KIOSKS IN PUBLIC SPACES) THIS ASSISTANCE RESULTED IN THE CREATION OF TWENTY FIVE NEW JOBS - IN ONE OF CINCINNATI'S MORE CHALLENGED NEIGHBORHOODS, WE HELPED AN IMMIGRANT, AFRICAN-AMERICAN OWNED FAMILY CONVENIENCE STORE ACQUIRE AND RENOVATE ITS BUILDING - IN LONG BEACH, CA, WE ASSISTED A WOMAN OWNED BUSINESS THAT IS A FULL SERVICE MARKETING AND ADVERTISING AGENCY SPECIALIZING IN BRAND DEVELOPMENT, CUSTOMER PROFILING, INTERNET MARKETING, MEDIA PLANNING, EVENT MARKETING, NON-TRADITIONAL MARKETING AND AFFINITY GROUP MARKETING TO RECEIVE A PERMANENT WORKING CAPITAL LOAN TO FUND ITS GROWING RECEIVABLES THE PROJECT WILL CREATE SIX NEW JOBS ALLOWING THE COMPANY TO EMPLOY A TOTAL OF TWENTY-TWO INDIVIDUALS

Return Reference	Explanation
FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT	INFORM AND AID COMMUNITIES IN OBTAINING AND UTILIZING GOVERNMENTAL FUNDS FOR SUPPORT OF LOCAL ECONOMIC DEVELOPMENT NDC CONDUCTS TRAINING AND PROVIDES COUNSELING AND TECHNICAL ASSISTANCE TO DISADVANTAGED COMMUNITIES FOR SUPPORT OF LOCAL ECONOMIC DEVELOPMENT DURING THE YEAR, NDC WORKED WITH MORE THAN 100 COMMUNITIES PROVIDING TECHNICAL ASSISTANCE AND GUIDANCE IN CARRYING OUT ECONOMIC AND COMMUNITY DEVELOPMENT STRATEGIES, PROGRAMS AND PROJECTS AND IN DEVELOPING PUBLIC FACILITIES THROUGH THESE SERVICES, NDC ACHIEVED FINANCING FOR PROJECTS AND PROGRAMS, WITH GOVERNMENT AND PRIVATE SECTOR FUNDS, IN EXCESS OF $750 MILLION A SAMPLE OF THE PROJECTS FOR WHICH NDC IS PROVIDING TECHNICAL ASSISTANCE AND TRAINING AROUND THE COUNTRY INCLUDE - IN 2014, NDC TRAINING DELIVERED A TOTAL OF 410 DAYS OF TRAINING TO 3,549 STUDENTS DRAWN FROM NONPROFIT COMMUNITY DEVELOPMENT CORPORATIONS, COMMUNITY DEVELOPMENT FINANCE INSTITUTIONS, STATE AND LOCAL GOVERNMENTS, COMMUNITY FOUNDATIONS AND OTHER ORGANIZATIONS WORKING IN ECONOMIC, HOUSING AND COMMUNITY DEVELOPMENT IN ADDITION TO NDC'S NATIONALLY RESPECTED CERTIFICATION TRAINING FOR HOUSING AND ECONOMIC DEVELOPMENT FINANCE PROFESSIONALS, NEW COURSES WERE DEVELOPED ON BEHALF OF THE NATIONAL TRUST FOR HISTORIC PRESERVATION TO BUILD NEW DEVELOPMENT FINANCE SKILLS FOR HISTORIC CONSERVATORS, THE USDA TO ENHANCE STAFF UNDERWRITING SKILLS FOR CRITICAL RURAL COMMUNITY FACILITIES, INCLUDING HOSPITALS AND PUBLIC SAFETY BUILDINGS, AND, THE CONNECTICUT HOUSING FINANCE AUTHORITY TO SUPPORT THE SKILLS OF NONPROFITS WORKING TO PRESERVE AFFORDABLE HOUSING IN THE STATE - NDC HAS WORKED WITH THE CITY OF SALT LAKE, THE COUNTY OF SALT LAKE, THE CITY OF OGDEN, A DIVERSE GROUP OF STAKEHOLDERS IN SALT LAKE'S LOW INCOME COMMUNITIES, AND LOCAL BANKS AND FOUNDATIONS INCLUDING AMERICAN EXPRESS, THE UTAH FOUNDATION, NEIGHBORWORKS, AND MORGAN STANLEY TO CREATE A COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION (CDFI) WHOSE MISSION IS TO CREATE ECONOMIC OPPORTUNITY FOR LOW INCOME RESIDENTS BY STIMULATING INVESTMENT AND CREATING JOBS FOR THE UNEMPLOYED NDC HAS BEEN PROVIDING TA, TRAINING, AND CAPACITY BUILDING SERVICES, MAKING SMALL BUSINESS LOANS THROUGH OUR GROW AMERICA FUND, STRUCTURING AFFORDABLE HOUSING PROJECTS, AND OFFERING DEVELOPMENT SERVICES - WORKING WITH MIAMI-DADE COUNTY'S PUBLIC-PRIVATE PARTNERSHIP FOR ECONOMIC DEVELOPMENT (THE BEACON COUNCIL), NDC IS PROVIDING TA TO BEACON COUNCIL TO CREATE A COUNTY-WIDE WEBSITE FOR ECONOMIC DEVELOPMENT, CAPITAL ACCESS, AND JOB CREATION THE SITE OFFERS A WEB-BASED PLATFORM THAT ASSISTS DISADVANTAGED SMALL BUSINESSES TO IDENTIFY ALL SOURCES OF CAPITAL, SERVICE PROVIDERS (E G , SBDCS), MICRO FINANCING, CROWDFUNDING, LOANS AND INVESTMENTS - IN NEW YORK CITY, NDC PROVIDED TA TO THE CITY OF NEW YORK (NYCEDC), THE OFFICE OF BROOKLYN BOROUGH PRESIDENT, THE KINGS THEATER REDEVELOPMENT CORPORATION, AND THE FLATBUSH AVENUE BUSINESS DISTRICT TO STRUCTURE AND APPLY FOR FINANCING FOR THE $95 MILLION RENOVATION OF THE ICONIC AND HISTORIC KINGS THEATER IN EAST FLATBUSH (ORIGINALLY OPENED IN 1929) THE PROJECT IS ENHANCING ECONOMIC DEVELOPMENT OF THIS LOW INCOME NEIGHBORHOOD THROUGH EXTENSIVE JOB CREATION, PROVIDING A WIDE VARIETY OF CULTURAL EVENTS THAT SERVE THE VIBRANT AND DIVERSE NEIGHBORHOODS OF CENTRAL BROOKLYN, AND RESTORING AND RETURNING THIS LONG ABANDONED BUILDING (CLOSED SINCE 1979) TO PRODUCTIVE AND ECONOMIC REUSE - THROUGH A PARTNERSHIP WITH THE NATIONAL ASSOCIATION OF COMMUNITY ECONOMIC DEVELOPMENT AGENCIES, NDC PROVIDES TECHNICAL ASSISTANCE, TRAINING AND FINANCIAL SUPPORT TO FLEDGLING, LOCAL NONPROFIT ECONOMIC DEVELOPMENT ORGANIZATIONS

Return Reference	Explanation
FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT	TO PROVIDE HOUSING FOR LOW INCOME PERSONS NDC CONDUCTS TRAINING AND PROVIDES COUNSELING AND TECHNICAL ASSISTANCE TO DISADVANTAGED COMMUNITIES AND NONPROFIT ORGANIZATIONS IN SUPPORT OF PROVIDING HOUSING FOR LOW INCOME PERSONS DURING THE YEAR, NDC WORKED WITH MORE THAN 100 COMMUNITIES AND NONPROFIT ORGANIZATIONS AND PROVIDED TRAINING TO MORE THAN 1,800 PRACTITIONERS IN HOUSING DEVELOPMENT FOR LOW INCOME PERSONS AND IN LOW INCOME COMMUNITIES OUR TECHNICAL ASSISTANCE PROVIDED TO NONPROFIT SERVICE PROVIDERS AND COMMUNITY ORGANIZATIONS AND THROUGH NDC'S NONPROFIT HOUSING AFFILIATE AND LOW INCOME HOUSING FUND SPURRED INVESTMENT THAT RESULTED IN PUBLIC AND PRIVATE SECTOR FINANCING TOTALING MORE THAN $100 MILLION, CREATING OR REHABILITATING 900 HOUSING UNITS FOR LOW INCOME PERSONS, FAMILIES, THE ELDERLY, AND PERSONS WITH SPECIAL NEEDS THROUGH OUR HOUSING DEVELOPMENT AFFILIATE, NDC HAS DEVELOPED OVER 8,500 UNITS OF HOUSING FOR LOW INCOME AND DISADVANTAGED PERSONS PARTNERING WITH COMMUNITIES AND/OR LOCAL NOT-FOR-PROFITS WE INITIALLY EVALUATE THE ROLE THAT WE SHOULD PLAY, WE IDENTIFY THE DEVELOPMENT TEAM, DESIGN THE PROJECT AND STRUCTURE THE FINANCING MORE THAN 75% OF OUR PROJECTS ARE UNDERTAKEN WITH NOT-FOR-PROFIT PARTNERS AND OVER 35% OF OUR PROJECTS ARE LOCATED IN RURAL AREAS ACROSS THE COUNTRY WHILE THE MAJORITY OF OUR PROJECTS INVOLVE NEW CONSTRUCTION, WE HAVE COMPLETED NUMEROUS REHABILITATIONS AND HISTORIC REHABILITATIONS A SAMPLE OF SOME OF OUR PROJECTS THAT WE ARE WORKING ON OR HAVE COMPLETED OVER THE LAST SEVERAL YEARS INCLUDE - WORKING WITH THE STATE OF CONNECTICUT HOUSING FINANCE AGENCY AND THE CONNECTICUT DEPARTMENT OF HOUSING, NDC IS MANAGING THE CONNECTICUT HOUSING ACADEMY WHICH PROVIDES TRAINING, TECHNICAL ASSISTANCE, AND FINANCING UNDER THE STATE'S AFFORDABLE HOUSING PRESERVATION PROGRAM, DESIGNED TO KEEP AFFORDABLE HOUSING UNITS THAT HAVE COMPLETED THEIR REGULATORY COMPLIANCE PERIODS FROM BECOMING MARKET RATE HOUSING - WORKED WITH SUFFOLK COUNTY, NY, IN THE LOW INCOME AFRICAN-AMERICAN COMMUNITY (WYANDANCH) TO PLAN, STRUCTURE AND FINANCE A TRANSIT ORIENTED DEVELOPMENT CALLED WYANDANCH RISING, THE FIRST SIGNIFICANT NEW CONSTRUCTION IN WYANDANCH IN 30 YEARS THE MIXED USE LEED PROJECT IS A NATIONAL MODEL FOR INCLUSION STEPS AWAY FROM THE LONG ISLAND RAILROAD AND A REGIONAL TRANSPORTATION HUB, THE PROJECT CONSISTS OF 170 UNITS OF MIXED INCOME HOUSING (30% AFFORDABLE FOR LOW INCOME, 20% WORK FORCE HOUSING) OFFERING AFFORDABLE LIVING APARTMENTS TO LOW INCOME RESIDENTS, 40,000 SQUARE FEET OF SHOPS AND RETAIL SPACE TO OFFER SERVICES AND CREATE JOBS, A COMMUNITY CENTER, A GREEN MARKET, PUBLIC PLAZA AND GREEN SPACE, AND AN ELECTRIC VEHICLE RECHARGING CENTER - IN MADISON COUNTY IL, NDC HAS BEEN ASSISTING THE LOCAL HOUSING AUTHORITY SINCE 2007 TO BUILD THEIR CAPACITY TO OWN, MANAGE, AND DEVELOP QUALITY MIXED FINANCE MULTI-FAMILY HOUSING IN MADISON COUNTY THE PARTNERSHIP BETWEEN NDC AND THE PHA HAS ENABLED THE PHA TO PROVIDE QUALITY, SUSTAINABLE AFFORDABLE HOUSING FOR FAMILIES, CHILDREN, SENIORS AND THE DISABLED THIS PARTNERSHIP HAS RESULTED IN THE DEVELOPMENT OF 231 UNITS OF QUALITY AFFORDABLE HOUSING IN MADISON COUNTY OVER THE LAST TEN YEARS IN 2014, NDC PROVIDED ASSISTANCE FOR THE MAY APARTMENTS THIS PROJECT INVOLVED THE ACQUISITION OF 46 UNITS OF ELDERLY/DISABLED HOUSING, REHAB OF THESE UNITS AND CONSTRUCTION OF 24 NEW UNITS ON THE SITE USING LIHTC, RHF FUNDS, STATE AND LOCAL HOME FUNDS, AND A STATE ENERGY EFFICIENCY GRANT NDC ASSISTED WITH THE LIHTC APPLICATION, HUD EVIDENTIARY DOCUMENTS, CONSTRUCTION FINANCING, SELECTION OF AN ARCHITECT AND EQUITY PARTNER, NEGOTIATION OF PARTNERSHIP DOCUMENTS, BIDDING OF THE PROJECT, BUDGETING, CLOSING, AND CONSTRUCTION NDC WILL CONTINUE TO PROVIDE TECHNICAL ASSISTANCE THROUGH THE FINALIZATION OF THE COST CERTIFICATION AND THE ISSUANCE OF THE 8609S - OVER THE PAST SEVERAL YEARS, NDC HAS PROVIDED PROJECT TECHNICAL ASSISTANCE AND FINANCING TO NEIGHBORS OF WATERTOWN AND THE WATERTOWN LOCAL DEVELOPMENT COMPANY TO ASSIST THEM TO ACQUIRE AND REHABILITATE THREE LONG ABANDONED HISTORIC DOWNTOWN AND NEIGHBORHOOD MIXED USE STRUCTURES IN THE RURAL COMMUNITY OF WATERTOWN AS A RESULT, THE COMMUNITY RAISED AND INVESTED $25 MILLION OF INVESTMENT CAPITAL CREATING 83 UNITS OF LOW INCOME AND HOMELESS HOUSING AND 13,000 SQUARE FEET OF COMMERCIAL SPACE ONE OF THE PROPERTIES, THE FRANKLIN BUILDING, WAS A FINALIST FOR THE TIMOTHY ANDERSON AWARD FOR EXCELLENCE IN HISTORIC RENOVATION - WORKING WITH MORGAN STANLEY, THE KRESGE FOUNDATION AND THE LOCAL INITIATIVES SUPPORT CORPORATION UNDER A PROGRAM ENTITLED "HEALTHY FUTURES," NDC IS WORKING TO BRING TOGETHER AFFORDABLE HOUSING AND MEDICAL SERVICES PROVIDED BY FEDERALLY QUALIFIED HEALTH CARE CENTERS - WORKING WITH THE NATIONAL RURAL HOUSING COALITION, NDC PROVIDES TECHNICAL ASSISTANCE AND FINANCIAL SUPPORT TO RURAL HOUSING ORGANIZATIONS ACROSS THE NATION

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 WAS PREPARED BY OUTSIDE TAX PREPARERS IN CONSULTATION WITH MANAGEMENT AND AUDITORS A DRAFT OF THE FULL FORM 990 WAS PROVIDED TO THE ENTIRE BOARD FOR REVIEW A COMPLETE COPY OF THE FINAL FORM 990 WAS PROVIDED TO THE ORGANIZATION'S ENTIRE BOARD BEFORE IT WAS FILED WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL MEMBERS OF THE NDC BOARD OF DIRECTORS AND EXECUTIVE EMPLOYEES ARE REQUIRED TO ANNUALLY EXECUTE A CONFLICT OF INTEREST AND COMPENSATION GUIDELINES ACKNOWLEDGEMENT STATING THAT THEY HAVE RECEIVED, READ AND UNDERSTAND, AND AGREE TO COMPLY WITH THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES REQUIRE BOARD MEMBERS AND EXECUTIVE EMPLOYEES TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST IMMEDIATELY THE CHAIRPERSON OF THE BOARD WILL UPON NOTIFICATION OF SUCH AN EVENT APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION VIOLATIONS OF THE CONFLICT OF INTEREST POLICY CAN RESULT IN APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION ALSO ALL BOARD MEMBERS BY EXECUTING THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES ACKNOWLEDGE THAT THEY SHARE THE RESPONSIBILITY OF NDC AND NDC SUPPORT I TO REMAIN FAITHFUL TO THE ORGANIZATIONS' CHARITABLE PURPOSES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD OF DIRECTORS OF NDC HAS A STANDING COMPENSATION REVIEW COMMITTEE, THE MEMBERS OF WHICH ARE ALL INDEPENDENT DIRECTORS THE COMMITTEE ENGAGES A THIRD PARTY INDEPENDENT CONSULTANT TO REVIEW THE COMPENSATION OF THE PRESIDENT EVERY TWO YEARS THE COMMITTEE REVIEWS AND DISCUSSES THE FINDINGS AT A SPECIAL SESSION WITH ALL BOARD MEMBERS PRESENT EXCEPT THE PRESIDENT

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	NDC VOLUNTARILY MAKES AVAILABLE ITS GOVERNING DOCUMENTS, FORM 1023, AND 990 AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D) FORM 990 IS AVAILABLE ON WWW GUIDESTAR ORG

Return Reference	Explanation
FORM 990, PART VII, SECTION A	CHAIRMAN COMPENSATION AND IN-KIND GRANT NDC HAS MADE AN IN-KIND GRANT TO THE JEFFERSON AWARDS FOR PUBLIC SERVICE (JAPS) AT THE BEHEST OF THE NDC BOARD OF DIRECTORS, NDC'S CHAIRMAN SAMUEL BEARD HAS BEEN ASKED TO WORK AS THE CHIEF EXECUTIVE OF JAPS JAPS IS A 501(C)(3) PUBLIC CHARITY THAT HONORS AND PROMOTES COMMUNITY LEADERSHIP AND ACHIEVEMENTS IN PUBLIC SERVICE AND SHARES COMPARABLE GOALS OF NDC THROUGH ITS MISSION, JAPS PROMOTES AND EMPOWERS MINORITIES AND LOW-INCOME COMMUNITY RESIDENTS TO BECOME COMMUNITY LEADERS THEREBY ADVANCING THE MISSION OF NDC TO CREATE ECONOMIC OPPORTUNITY AND PROVIDING TRAINING IN LOW-INCOME COMMUNITIES

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN FUNDED STATUS OF NON-QUALIFIED PENSION PLANS -58,358 CHANGE IN FUNDED STATUS OF QUALIFIED PENSION PLANS -4,672,082

Return Reference	Explanation
FORM 990, PART XI, LINE 8	PRIOR PERIOD ADJUSTMENT DUE TO OVERSTATEMENT OF NON-QUALIFIED PENSION LIABILITY

Return Reference	Explanation
FORM 990, PART VII, SECTION A & SCHEDULE J, PART II	NDC SERVES AS THE COMMON PAYMASTER FOR NDC, NDC SUPPORT I, INC , NDC HOUSING AND ECONOMIC DEVELOPMENT CORPORATION (HEDC) AND GROW AMERICA FUND, INC (GAF) AS COMMON PAYMASTER, NDC HAS ALLOCATED EMPLOYEES' SALARIES AND BENEFITS BETWEEN THESE ORGANIZATIONS BASED ON HOURS WORKED BY EMPLOYEES FOR THE RESPECTIVE ORGANIZATIONS BOARD MEMBERS ARE COMPENSATED FOR THEIR SERVICE FOR RELATED ORGANIZATIONS, NOT FOR THEIR SERVICE AS A BOARD MEMBER OF NDC NDC HAS ESTABLISHED BOTH A QUALIFIED PENSION PLAN AND A NONQUALIFIED DEFERRED COMPENSATION PLAN FOR THE BENEFIT OF ITS EMPLOYEES THE NONQUALIFIED DEFERRED COMPENSATION PLAN IS DEFINED IN SECTION 457(F) OF THE INTERNAL REVENUE CODE THE BENEFITS UNDER THE NONQUALIFIED PENSION PLAN ARE GENERALLY NOT VESTED UNTIL COMPLETION OF SUBSTANTIAL REQUIREMENTS HOWEVER, THE BENEFITS UNDER THIS NONQUALIFIED DEFERRED COMPENSATION PLAN BECOME TAXABLE TO THE INDIVIDUAL UPON VESTING, EVEN THOUGH THE BENEFIT MAY NOT BE PAYABLE UNTIL A LATER YEAR OR YEARS THE TAXABLE AMOUNT IS THE RESPECTIVE INDIVIDUAL'S LUMP SUM EQUIVALENT OF THE DEFERRED BENEFIT DURING 2014 THE FOLLOWING INDIVIDUALS RECEIVED THEIR BENEFIT UNDER THE NDC 457(F) NON QUALIFIED DEFERRED COMPENSATION PLAN - JOHN DOWNS RECEIVED $4,050 - DANIEL MARSH III RECEIVED $39,105 - PATRICIA THOMSON RECEIVED $8,742

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

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.
▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Employer identification number
13-6532871

Part I **Identification of Disregarded Entities** Complete 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

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) GROW AMERICA FUND INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 13-3641265	SEE ATTACHED	DE	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL	Yes	
(2) NDC SUPPORT I INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 13-4156877	SEE ATTACHED	VA	501(C)(3)	LINE 11A, I	NATIONAL DEVELOPMENT COUNCIL	Yes	
(3) NDC HOUSING & ECONOMIC DEV CORP 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 11-2933129	SEE ATTACHED	VA	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL	Yes	
(4) NDC HOUSING & ECONOMIC DEVELOPMENT CORP - GROUP 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 91-1884698	ASSIST GOV/HOUSING	VA	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No
(5) YONKERS LARKIN GARAGE INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 80-0730609	ASSIST GOV	NY	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No
(6) NICKERSON AREA PROPERTIES 1218 3RD AVENUE SUITE 1403 SEATTLE, WA 98101 30-0099064	ASSIST GOV	WA	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No
(7) KINGSBOROUGH HOUSING DEVELOPMENT FUND 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 14-1734500	HOUSING	NY	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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.

(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 512 (b)(13) controlled entity? Yes	(i) No
(1) COMMUNITY DEV GROUP KENTUCKY INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 13-3555220	BLDG MGMT	KY	NDC	C	-3,591	8,339	100 000 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p	Yes	
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NDC HOUSING AND ECONOMIC DEVELOPMENT CORPORATION	C	200,000	FMV
(2) NDC HOUSING AND ECONOMIC DEVELOPMENT CORPORATION	Q	7,050,000	FMV
(3) NDC SUPPORT I	C	1,050,000	FMV
(4) NDC GROW AMERICA FUND INC	Q	3,241,161	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

(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) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation
SCHEDULE R - PART II, ADDITIONAL INFORMATION	NDC HOUSING AND ECONOMIC DEVELOPMENT CORPORATION'S (HEDC'S) THREE PRIMARY EXEMPT PURPOSES (ACTIVITIES) ARE A) TO CONSTRUCT NEW LOW INCOME HOUSING AND TO DEVELOP, MANAGE, OPERATE, PROMOTE, FUND, AND SUPPORT EXISTING LOW INCOME HOUSING FOR PERSONS OF LIMITED FINANCIAL MEANS, HANDICAPPED PERSONS, ELDERLY PERSONS, AND OTHER PERSONS NEED OF SAFE, ADEQUATE AFFORDABLE HOUSING AND TO ASSIST IN THE ALLEVIATION OF HOUSING SHORTAGES IN THE U S B) TO ASSIST IN THE ERECTION AND MAINTENANCE OF PUBLIC BUILDINGS, MONUMENTS, FACILITIES OR WORK TO LESSEN THE BURDEN OF GOVERNMENT AND TO PROMOTE SOCIAL WELFARE C) TO INITIATE AND CARRY OUT ACTIVITIES TO STIMULATE ECONOMIC DEVELOPMENT IN THE ECONOMICALLY DEPRESSED AREAS OF THE U S NDC SUPPORT I, INC IS ORGANIZED AND OPERATED, SUPPORVISED OR CONTROLLED BY (AS DEFINED BY SECTION 509(A)(3) OF THE INTERNAL REVENUE CODE OF THE REGULATION THEREUNDER), AND EXCLUSIVELY FOR THE BENEFIT OF, OR TO PERFORM FUNCTIONS OF, OR TO CARRY OUT THE CHARITABLE PURPOSE OF NATIONAL COUCIL FOR COMMUNITY DEVELOPEMT, INC DBA NATIONAL DEVELOPMENT COUNCIL (NDC), A CHARITABLE ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A PUBLICLY SUPPORTED ORGANIZATION DESCRIBED IN SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE NDC SUPPORT I, INC IS ORGANIZED AND OPERATED, SUPPORVISED OR CONTROLLED BY (AS DEFINED BY SECTION 509(A)(3) OF THE INTERNAL REVENUE CODE OF THE REGULATION THEREUNDER), AND EXCLUSIVELY FOR THE BENEFIT OF, OR TO PERFORM FUNCTIONS OF, OR TO CARRY OUT THE CHARITABLE PURPOSE OF NATIONAL COUCIL FOR COMMUNITY DEVELOPEMT, INC DBA NATIONAL DEVELOPMENT COUNCIL (NDC), A CHARITABLE ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A PUBLICLY SUPPORTED ORGANIZATION DESCRIBED IN SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE GROW AMERICA FUND, INC GROW AMERICA FUND, INC IS A CHARITABLE ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A PUBLICLY SUPPORTED ORGANIZATION AS DESCRIBED IN SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE GROW AMERICA FUND, INC IS A CERTIFIED COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION ITS PRIMARY ACTIVITY IS TO MAKE LOANS TO SMALL BUSINESSES LOCATED IN ECONOMICALLY DEPRESSED AREAS THAT DO NOT HAVE ACCESS TO TRADITIONAL COMMERICAL LENDERS IT IS A DELAWARE NONSTOCK, NONPROFIT CORPORATION, IN WHICH NDC IS THE CORPORATION'S SOLE VOTING MEMBER

Additional Data

Software ID:
Software Version:
EIN: 13-6532871
Name: NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) GROW AMERICA FUND INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 13-3641265	SEE ATTACHED	DE	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL	Yes	
(1) NDC SUPPORT I INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 13-4156877	SEE ATTACHED	VA	501(C)(3)	LINE 11A, I	NATIONAL DEVELOPMENT COUNCIL	Yes	
(2) NDC HOUSING & ECONOMIC DEV CORP 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 11-2933129	SEE ATTACHED	VA	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL	Yes	
(3) NDC HOUSING & ECONOMIC DEVELOPMENT CORP - GROUP 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 91-1884698	ASSIST GOV/HOUSING	VA	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No
(4) YONKERS LARKIN GARAGE INC 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 80-0730609	ASSIST GOV	NY	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No
(5) NICKERSON AREA PROPERTIES 1218 3RD AVENUE SUITE 1403 SEATTLE, WA 98101 30-0099064	ASSIST GOV	WA	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No
(6) KINGSBOROUGH HOUSING DEVELOPMENT FUND 708 THIRD AVENUE SUITE 710 NEW YORK, NY 10017 14-1734500	HOUSING	NY	501(C)(3)	LINE 9	NATIONAL DEVELOPMENT COUNCIL		No