

Neighborhood Development Alliance (NeDA)

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017
Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC		D Employer identification number 41-1658636
	Doing business as		E Telephone number (651) 292-0131
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	481 SOUTH WABASHA		G Gross receipts \$ 1,893,136.
	City or town, state or province, country, and ZIP or foreign postal code SAINT PAUL, MN 55107		
F Name and address of principal officer: KAREN REID SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> 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.NEDAHOME.ORG**

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: **1989** **M** State of legal domicile: **MN**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: NEDA IS A NONPROFIT COMMUNITY DEVELOPMENT CORPORATION WHOSE MISSION IS TO STRENGTHEN THE VITALITY		
	2 Check this box <input type="checkbox"/> 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	6
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	6
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	10
	6 Total number of volunteers (estimate if necessary)	6	0
	7 a 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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,158,098.	Current Year 460,743.
	9 Program service revenue (Part VIII, line 2g)	805,923.	1,424,727.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,535.	7,666.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-130,509.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,839,047.	1,893,136.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		570,160.	597,437.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,983.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		746,427.	890,144.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,316,587.	1,487,581.	
19 Revenue less expenses. Subtract line 18 from line 12	522,460.	405,555.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 5,559,422.	End of Year 5,771,902.
	21 Total liabilities (Part X, line 26)	5,534,183.	5,335,664.
	22 Net assets or fund balances. Subtract line 21 from line 20	25,239.	436,238.

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	Signature of officer		Date	
	KAREN REID, EXECUTIVE DIRECTOR Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name MARC A KOTSONAS	Preparer's signature	Date 12/12/18	Check if self-employed <input type="checkbox"/> PTIN P00544551
	Firm's name ▶ MAHONEY, ULBRICH, CHRISTIANSEN & RUSS P.A.	Firm's EIN ▶ 41-1647057	Phone no. (651) 227-6695	
Firm's address ▶ 10 RIVER PARK PLAZA, SUITE 800		SAINT PAUL, MN 55107		

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 [X]

1 Briefly describe the organization's mission: NEDA IS A NONPROFIT COMMUNITY DEVELOPMENT CORPORATION WHOSE MISSION IS TO STRENGTHEN THE VITALITY OF LOW-INCOME NEIGHBORHOODS WITHIN THE CITY OF ST. PAUL, BY CREATING AND PRESERVING HOUSING AND BUSINESS OPPORTUNITIES FOR RESIDENTS OF ALL INCOME LEVELS. NEDA HAS EXPANDED

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 [X] 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 [X] 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 \$ 749,410. including grants of \$) (Revenue \$ 914,973.)

THE HOUSING SERVICES PROVIDED BY NEDA ARE DESCRIBED BELOW: HOME OWNERSHIP ADVISING SERVICES: NEDA IS A BILINGUAL (SPANISH/ENGLISH) HUD-CERTIFIED COUNSELING AGENCY PROVIDING BI-LINGUAL PRE-PURCHASE, POST-PURCHASE AND FORECLOSURE PREVENTION COUNSELING. OFFERS BILINGUAL CREDIT AND BANKRUPTCY COUNSELING AND BILINGUAL FINANCIAL LITERACY WORKSHOPS. STEWARDSHIP: PROVIDES AND SUPPORTS COMMUNITY ORGANIZING ACTIVITIES, SUCH AS REDEVELOPMENT PLANNING REAL ESTATE DEVELOPMENT: BUILDS NEW AND REHABS SINGLE FAMILY HOMES FOR SALE TO LOW-INCOME BUYERS. ORIGINATES DEFERRED LOANS AND MANAGES SUBSEQUENT REHAB CONSTRUCTION FOR ENERGY EFFICIENT UPGRADES AND CODE COMPLIANCE FOR LOW-INCOME HOMEOWNERS. NEDA ALSO HAS CONTRACTED WITH THE

4b (Code:) (Expenses \$ 601,016. including grants of \$) (Revenue \$ 509,754.)

REAL ESTATE OPERATIONS: THE REAL ESTATE OPERATIONS REPRESENT THE ACTIVITIES OF WABASHA CENTER, REDA LLC AND THE TERRACES, LLC. WABASHA CENTER HOUSES NEDA'S OFFICES AND A CHILD CARE CENTER. REDA OWNS AND OPERATES A COMMERCIAL BUILDING ON THE WEST SIDE AND ADMINISTERS COMMERCIAL DEVELOPMENT LOANS. THE TERRACES, LLC OWNS MCLEAN (24 UNITS) AND WABASHA TERRACE (11 UNITS) APARTMENTS LOCATED IN SAINT PAUL, MINNESOTA. REDA LLC AND THE TERRACES, LLC IS A WHOLLY OWNED SUBSIDIARY OF NEDA.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,350,426.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	X	
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

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

Table with columns for question numbers (1a-14b), sub-questions, and Yes/No columns. Includes entries for Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 501(c)(7), Form 501(c)(12), Form 4947(a)(1), and Form 501(c)(29).

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MN
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [X] Another's website [X] 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:
KAREN REID - 651-292-0131
481 SOUTH WABASHA, ST. PAUL, MN 55107-1142

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOANNETTE CINTRON PRESIDENT	1.00	X		X				0.	0.	0.
(2) HOKAN MILLER SECRETARY	1.00	X		X				0.	0.	0.
(3) RICK GOBELL TREASURER THRU APR 18	1.00	X		X				0.	0.	0.
(4) HEIDI WELCH VICE PRESIDENT	1.00	X		X				0.	0.	0.
(5) GREG GRAMZA BOARD MEMBER	1.00	X						0.	0.	0.
(6) KAREN THOMPSON BOARD MEMBER	1.00	X						0.	0.	0.
(7) THOMAS COLLINS BOARD MEMBER THRU APR 18	1.00	X						0.	0.	0.
(8) AVA LANGSTON KENNEY BOARD MEMBER	1.00	X						0.	0.	0.
(9) KAREN A. REID EXECUTIVE DIRECTOR	40.00			X				64,938.	0.	12,511.

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							64,938.	0.	12,511.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							64,938.	0.	12,511.	

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 **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

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
NONE		

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 **0**

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	359,308.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	101,435.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		460,743.				
Program Service Revenue	2 a	DEVELOPER FEE	Business Code	531110	847,000.	847,000.		
	b	RESIDENTIAL RENTAL INC		531110	405,881.	405,881.		
	c	COMMERCIAL RENTS		531120	82,578.	82,578.		
	d	MANAGEMENT FEES		531310	67,973.	67,973.		
	e	OTHER INCOME		900099	21,295.	21,295.		
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			1,424,727.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			7,666.		7,666.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	(ii) Personal				
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses						
c	Gain or (loss)							
d	Net gain or (loss)							
8 a	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					
9 a	Gross income from gaming activities. See Part IV, line 19	a						
		b	Less: direct expenses	b				
		c	Net income or (loss) from gaming activities					
10 a	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						
11 a							
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See instructions.			1,893,136.	1,424,727.	0.	7,666.	

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 ...				
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	77,449.	65,831.	10,843.	775.
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	409,316.	348,867.	53,890.	6,559.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,857.	8,378.	1,268.	211.
9 Other employee benefits	65,942.	56,228.	8,708.	1,006.
10 Payroll taxes	34,873.	29,712.	4,631.	530.
11 Fees for services (non-employees):				
a Management				
b Legal	475.	100.	375.	
c Accounting	9,065.		9,065.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	48,018.	44,974.	2,364.	680.
12 Advertising and promotion	8,400.	8,400.		
13 Office expenses	26,575.	22,642.	3,529.	404.
14 Information technology	13,188.		13,188.	
15 Royalties				
16 Occupancy	399,991.	390,222.	8,766.	1,003.
17 Travel	4,924.	4,924.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,480.	2,480.		
20 Interest	46,330.	45,227.	990.	113.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	183,288.	178,672.	4,142.	474.
23 Insurance	40,084.	37,865.	1,991.	228.
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 HOME REHAB PROJECT COST	91,835.	91,835.		
b BAD DEBTS	9,884.	9,884.		
c DUES AND EDUCATION	3,884.	3,884.		
d MISCELLANEOUS	1,723.	301.	1,422.	
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	1,487,581.	1,350,426.	125,172.	11,983.
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	34,076.	1	68,479.
	2 Savings and temporary cash investments	908,107.	2	603,867.
	3 Pledges and grants receivable, net	113,334.	3	28,000.
	4 Accounts receivable, net	54,445.	4	985,121.
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	26,034.	9	30,620.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,256,319.		
	b Less: accumulated depreciation	10b 1,837,490.		
		3,868,911.	10c	3,418,829.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	525,312.	13	591,215.
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	29,203.	15	45,771.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,559,422.	16	5,771,902.	
Liabilities	17 Accounts payable and accrued expenses	46,216.	17	28,883.
	18 Grants payable		18	
	19 Deferred revenue	104,625.	19	198,121.
	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	5,354,050.	23	5,087,890.
	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	29,292.	25	20,770.
	26 Total liabilities. Add lines 17 through 25	5,534,183.	26	5,335,664.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-401,002.	27	97,284.
	28 Temporarily restricted net assets	426,241.	28	338,954.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	25,239.	33	436,238.	
34 Total liabilities and net assets/fund balances	5,559,422.	34	5,771,902.	

Part XI Reconciliation 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	1,893,136.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,487,581.
3	Revenue less expenses. Subtract line 2 from line 1	3	405,555.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,239.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	5,444.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	436,238.

Part XII Financial Statements and Reporting

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

- 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? _____
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? _____
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? _____
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? _____
- 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 _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC	Employer identification number 41-1658636
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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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 above (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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	631,500.	823,957.	367,065.	1158098.	460,743.	3441363.
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	12,000.	12,000.	14,000.			38,000.
4 Total. Add lines 1 through 3	643,500.	835,957.	381,065.	1158098.	460,743.	3479363.
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)						432,140.
6 Public support. Subtract line 5 from line 4.						3047223.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	643,500.	835,957.	381,065.	1158098.	460,743.	3479363.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,260.	5,606.	3,558.	5,535.	7,666.	26,625.
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						3505988.
12 Gross receipts from related activities, etc. (see instructions)					12	3,788,395.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	86.91 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	78.83 %
16a 33 1/3% support test - 2017. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2017. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2016. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. 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 - 2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

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? <i>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.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
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? <i>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.</i>		
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? <i>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.</i>		
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? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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 (explain in Part VI.) **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):		
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		(A) Prior Year	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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

NEIGHBORHOOD DEVELOPMENT ALLIANCE INC

Employer identification number

41-1658636

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC	Employer identification number 41-1658636
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 172,162.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 95,005.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC	Employer identification number 41-1658636
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC	Employer identification number 41-1658636
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC Employer identification number 41-1658636

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form for Part II Conservation Easements. Includes checkboxes for purposes of easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, and acquired after 7/25/06), and questions about monitoring, expenses, and reporting.

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and assets, and a table for revenue and assets included.

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" on 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 on Part XIII

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

	(a) Current year	(b) Prior year	(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 on 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" on line 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" on 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		233,000.		233,000.
b Buildings		4,705,100.	1,642,687.	3,062,413.
c Leasehold improvements				
d Equipment		129,332.	123,607.	5,725.
e Other		188,887.	71,196.	117,691.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,418,829.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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
(1) INVESTMENT IN 72 CESAR		
(2) CHAVEZ LP	325,000.	COST
(3) HOUSING LOANS RECEIVABLE	266,215.	END-OF-YEAR MARKET VALUE
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	591,215.	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SECURITY DEPOSITS	20,770.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	20,770.

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" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
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
3	Subtract line 2e from line 1		3
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
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
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
3	Subtract line 2e from line 1		3
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
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

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.

PART X, LINE 2:

NEDA IS CLASSIFIED AS A TAX-EXEMPT ORGANIZATION UNDER MINNESOTA STATUTE 290.05 AND SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM PRIVATE FOUNDATION STATUS UNDER SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE, EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM BUSINESSES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSE. MANAGEMENT BELIEVES NEDA DID NOT HAVE ANY UNCERTAIN INCOME TAX POSITIONS OR UNRELATED BUSINESS INCOME IN 2018 OR 2017.

THE TERRACES, LLC, NEDA CENTRO DE FINANZAS, AND REDA, LLC ARE WHOLLY OWNED LLC'S AND ARE THEREFORE DISREGARDED FOR TAX PURPOSES AND INCLUDED IN THE RETURN OF NEDA.

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

NEIGHBORHOOD DEVELOPMENT ALLIANCE INC

Employer identification number

41-1658636

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

OF LOW-INCOME NEIGHBORHOODS WITHIN THE CITY OF ST. PAUL, BY CREATING
AND PRESERVING HOUSING AND BUSINESS OPPORTUNITIES FOR RESIDENTS OF ALL
INCOME LEVELS. NEDA HAS EXPANDED THAT MISSION TO SERVE THE 7-COUNTY
METRO AREA - WITH A FOCUS IN MINNEAPOLIS AND ST. PAUL - IN REGARDS TO
ITS HOMEOWNERSHIP COUNSELING AND FINANCIAL COUNSELING PROGRAMS.

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

THAT MISSION TO SERVE THE 7-COUNTY METRO AREA - WITH A FOCUS IN
MINNEAPOLIS AND ST. PAUL - IN REGARDS TO ITS HOMEOWNERSHIP COUNSELING
AND FINANCIAL LITERACY PROGRAMS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CITY OF ST. PAUL TO MANAGE SINGLE FAMILY REHAB PROJECTS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE BOARD REVIEWS THE 990 BEFORE FILING. IF THE 990 IS NOT COMPLETED AT
THE TIME THE BOARD REVIEWS THE AUDIT, THE EXECUTIVE DIRECTOR REVIEWS THE
990 BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

NEDA HAS SPECIFIC PROGRAMS AND POLICIES IN PLACE THAT REQUIRE DISCLOSURE OF
CONFLICT OF INTEREST AND THE ORGANIZATION PRECLUDES SELLING PROPERTY TO
RELATED INDIVIDUALS.

FORM 990, PART VI, SECTION B, LINE 15A:

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization NEIGHBORHOOD DEVELOPMENT ALLIANCE INC	Employer identification number 41-1658636
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THE BOARD OF DIRECTORS DOES A REVIEW WHICH INCLUDES INTERVIEWS WITH STAFF,
PUBLIC AND PRIVATE PARTNERS ON THE PERFORMANCE AND KNOWLEDGE OF THE
EXECUTIVE DIRECTOR.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON
REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSS ON SALE OF BUILDING	-59,234.
BUILDING DEBT FORGIVEN	64,678.
TOTAL TO FORM 990, PART XI, LINE 9	5,444.

**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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: **NEIGHBORHOOD DEVELOPMENT ALLIANCE INC**
Employer identification number: **41-1658636**

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
THE TERRACES, LLC - 41-1658636 481 SOUTH WABASHA SAINT PAUL, MN 55107	REAL ESTATE	MINNESOTA	411,311.	3,786,389.	NEDA
REDA LLC - 47-4055355 481 SOUTH WABASHA SAINT PAUL, MN 55107	COMMUNITY DEVELOPMENT	MINNESOTA	32,444.	16,179.	NEDA
NEDA HOME LLC - 47-4024340 481 SOUTH WABASHA SAINT PAUL, MN 55107	COMMUNITY DEVELOPMENT	MINNESOTA			NEDA
NEDA CENTRO DE FINANZAS LLC - 81-1418655 481 SOUTH WABASHA SAINT PAUL, MN 55107	COMMUNITY DEVELOPMENT	MINNESOTA	581.	35,490.	NEDA

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

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

Schedule R (Form 990) 2017

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) Disproportionate 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	
BLUFF HOMES, LLC - 41-1883291 7610 LYNDAL AVENUE S, STE 200 RICHFIELD, MN 55423	REAL ESTATE	MN	NATIONAL EQUITY FUND 1996 LIMITED PARTNERSHIP	REAL ESTATE	239.	307,024.		X	N/A		X	50.00%
BLUFF HOMES LIMITED PARTNERSHIP - 41-1883293, 7610 LYNDAL AVENUE S, STE 200, RICHFIELD, MN 55423	REAL ESTATE	MN	N/A	N/A	N/A	N/A	N/A		N/A		N/A	N/A
72 CESAR CHAVEZ LLLP - 81-0733438, 481 WABASHA STREET SOUTH, SAINT PAUL, MN 55107	REAL ESTATE	MN	N/A	N/A	N/A	N/A	N/A		N/A		N/A	N/A

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	No
NEDA 72 CESAR CHAVEZ LLC - 81-3635700 481 OUTH WABASHA SAINT PAUL, MN 55107	COMMUNITY DEVELOPMENT	MN	NEDA	C CORP	0.	250,063.	100%		X

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.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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) 72 CESAR CHAVEZ LLP	B	75,000.	COST
(2) 72 CESAR CHAVEZ LLP	L	897,000.	COST
(3)			
(4)			
(5)			
(6)			

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

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

(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 sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate 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.

PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:

NAME OF RELATED ORGANIZATION:

BLUFF HOMES, LLC

DIRECT CONTROLLING ENTITY: NATIONAL EQUITY FUND 1996 LIMITED PARTNERSHIP

Neighborhood Development Alliance
Balance Sheet
As of 6/30/2018

	Current Period
Assets	
Cash Accounts	
Drake Checking 3011305	8,244.54
Drake Savings OP 700-116-9	141,056.76
Drake Savings DES 700-123-1	96,446.43
Drake Bank 7008527	5,028.02
Other	50.00
Total Cash Accounts	250,825.75
Receivables	
Accounts Receivable	0.00
Grants Receivable	0.00
Account Receivable Customer	52,159.11
Development Fee Receivable	968,000.00
Other	0.00
Total Receivables	1,020,159.11
Credit Builder Loans	
Let's Save	1,550.00
Total Credit Builder Loans	1,550.00
PrePaid Expenses	18,216.70
Real Estate Investment	
Development in Progress-Real Estate	45,771.05
MURL Investment	251,156.59
CNHS Investment	6,661.07
NeDA Centro Investment	13,200.00
NeDA Investment in 72 Cesar Chavez	325,100.00
Other	0.00
Total Real Estate Investment	641,888.71
Property and Equipment	
Land	75,000.00
Building	544,975.71
Equipment	40,619.47
Furniture & Fixtures	1,575.00
Land Improvements	48,264.00
Accumulated Depreciation	(385,831.23)
Accumulated Depreciation-Equipment	(37,217.99)
Accumulated Depreciation-Furniture & Fixtures	(1,575.00)
Accumulated Depreciation Land Improvements	(9,126.55)
Total Property and Equipment	276,683.41
Total Assets	2,209,323.68
Liabilities	
Accounts Payable	
Recoverable Grant Payable-LISC	15,000.00
Other	8,507.60
Total Accounts Payable	23,507.60
Accrued Payroll and Related	14,077.09
Fiscal Agent Liability	
Fiscal Agent Liability	0.00
232 Baker escrow taxes & Insurance	1,089.81
157 Winifred St escrow taxes & Insurance	(5,547.63)
Repayment Home Rehab & Dev Funds City programs	7,920.00

Neighborhood Development Alliance
Balance Sheet
As of 6/30/2018

	<u>Current Period</u>
Other	0.00
Total Fiscal Agent Liability	3,462.18
Notes Payable	
Private Construction & Purchase Loans	0.00
DBNHS Loan 72 Cesar Chavez	50,000.00
Other	0.00
Total Notes Payable	50,000.00
Deferred Revenue	
157 Winifred deferred Revenue	48,832.17
72 Cesar Chavez deferred development fee revenue	121,000.00
Other	24,497.40
Total Deferred Revenue	194,329.57
Long-term Debt	
CNHS Loan 232 Baker	22,100.00
CNHS Loan	6,661.07
Long-Term Debt City of St Pau III	17,913.81
Long Term Debt Dayton's Bluff	6,200.00
Drake Loan 5054003	148,199.08
Other	0.00
Total Long-term Debt	201,073.96
Total Liabilities	486,450.40
Net Assets	
	1,722,873.28
Total Net Assets	1,722,873.28
Total Liability and Fund Balance	2,209,323.68

Neighborhood Development Alliance
Balance Sheet
As of 9/30/2018

	Current Period	Beginning Year Balance
Assets		
Cash Accounts		
Drake Checking 3011305	15,557.08	8,244.54
Drake Savings OP 700-116-9	934,690.21	141,056.76
Drake Savings DES 700-123-1	84,192.22	96,446.43
Drake Bank 7008527	5,031.18	5,028.02
Other	50.00	50.00
Total Cash Accounts	1,039,520.69	250,825.75
Receivables		
Accounts Receivable	0.00	0.00
Grants Receivable	0.00	0.00
Account Receivable Customer	20,750.48	52,159.11
Development Fee Receivable	0.00	968,000.00
Other	0.00	0.00
Total Receivables	20,750.48	1,020,159.11
Credit Builder Loans		
Let's Save	1,550.00	1,550.00
Total Credit Builder Loans	1,550.00	1,550.00
PrePaid Expenses		
PrePaid Expenses	18,216.70	18,216.70
Real Estate Investment		
Development in Progress-Real Estate	45,771.05	45,771.05
MURL Investment	249,464.71	251,156.59
CNHS Investment	6,661.07	6,661.07
NeDA Centro Investment	13,200.00	13,200.00
NeDA Investment in 72 Cesar Chavez	325,100.00	325,100.00
Other	0.00	0.00
Total Real Estate Investment	640,196.83	641,888.71
Property and Equipment		
Land	75,000.00	75,000.00
Building	544,975.71	544,975.71
Equipment	40,619.47	40,619.47
Furniture & Fixtures	1,575.00	1,575.00
Land Improvements	48,264.00	48,264.00
Accumulated Depreciation	(385,831.23)	(385,831.23)
Accumulated Depreciation-Equipment	(37,217.99)	(37,217.99)
Accumulated Depreciation-Furniture & Fixtures	(1,575.00)	(1,575.00)
Accumulated Depreciation Land Improvements	(9,126.55)	(9,126.55)
Total Property and Equipment	276,683.41	276,683.41
Total Assets	1,996,918.11	2,209,323.68
Liabilities		
Accounts Payable		
Recoverable Grant Payable-LISC	15,000.00	15,000.00
Other	17,077.45	7,962.60
Total Accounts Payable	32,077.45	22,962.60
Accrued Payroll and Related		
Accrued Payroll and Related	14,077.09	14,077.09
Fiscal Agent Liability		
Fiscal Agent Liability	0.00	0.00
232 Baker escrow taxes & Insurance	343.89	1,089.81
157 Winifred St escrow taxes & Insurance	(5,082.59)	(5,547.63)

Neighborhood Development Alliance
Balance Sheet
As of 9/30/2018

	Current Period	Beginning Year Balance
Repayment Home Rehab & Dev Funds City programs	7,920.00	7,920.00
Other	<u>(182.80)</u>	<u>0.00</u>
Total Fiscal Agent Liability	2,998.50	3,462.18
Notes Payable		
Private Construction & Purchase Loans	0.00	0.00
DBNHS Loan 72 Cesar Chavez	0.00	50,000.00
Other	<u>0.00</u>	<u>0.00</u>
Total Notes Payable	0.00	50,000.00
Deferred Revenue		
157 Winifred deferred Revenue	48,832.17	48,832.17
Other	<u>24,497.40</u>	<u>145,497.40</u>
Total Deferred Revenue	73,329.57	194,329.57
Long-term Debt		
CNHS Loan 232 Baker	22,100.00	22,100.00
CNHS Loan	6,661.07	6,661.07
Long-Term Debt City of St.Paul II	0.00	0.00
Long-Term Debt City of St Pau III	16,757.58	17,913.81
Long Term Debt Dayton's Bluff	6,200.00	6,200.00
Drake Loan 5054003	144,131.18	148,199.08
Other	<u>0.00</u>	<u>0.00</u>
Total Long-term Debt	195,849.83	201,073.96
Total Liabilities	318,332.44	485,905.40
Net Assets		
	<u>1,678,585.67</u>	<u>1,723,418.28</u>
Total Net Assets	1,678,585.67	1,723,418.28
Total Liability and Fund Balance	1,996,918.11	2,209,323.68

GAIL MERRIAM

gmerriam@nedahome.org 651.292.0131

RELEVANT WORK EXPERIENCE

NEIGHBORHOOD DEVELOPMENT ALLIANCE, Saint Paul, Minnesota

Real Estate Development Manager

1996 to Present

- ◆ Assistant Project Manager for the construction of a 40 unit affordable rental building in West Side neighborhood.
- ◆ Acted as General Contractor for 2016 construction of Energy Star Version 3.1 single family home.
- ◆ Energy retrofit of NeDA offices: lighting, insulation, HVAC system.
- ◆ New construction projects of over 36 Energy Star & LEED homes from conception to completion and sale. Coordinate communication between architects, contractors, Neighborhood Energy Consortium Rater, Neighborhood Groups, and YouthBuild students to enhance the community aspect of neighborhood development work.
- ◆ Oversaw City of St. Paul 2008-2014 NSP Housing Rehab Program by directly managing the rehabilitation of 8 vacant homes. Maximized sustainability of homes through energy audits and green materials to achieve Enterprise Green Community certification while adhering to HUD and HRA standards.
- ◆ Played key role in securing CIB (Saint Paul Capital Improvement Budget), ISP (Invest Saint Paul) funding with an emphasis on Energy Efficiency for residential and commercial loan programs. Created program and application guidelines. Managed spending, draws and compliance reporting to City.
- ◆ Renovated over 175 homes (vacant and occupied) using diverse cross section funding sources including NSP, NHRP, CDBG, HOME, MHFA, and corporate sponsors. Managed all aspects of project including due diligence and acquisition, scope writing and estimating, financing and draws to completion.
- ◆ Prepared and underwrote 50 homeowner applications for home improvement mortgage loans and grants with homeowners and contracts with builders to successfully manage expectations for new projects.

East Side Neighborhood Development Company (ESNDC)

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017

Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the **2017** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.		D Employer identification number 41-1367503
	Doing business as		E Telephone number (651) 288-8746
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 891,330.
	965 PAYNE AVENUE	200	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code SAINT PAUL, MN 55130		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
F Name and address of principal officer: JOHN VAUGHN SAME AS C ABOVE		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.ESNDC.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1979
M State of legal domicile: MN			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO CREATE WEALTH AND WELL-BEING IN A THRIVING AND ENGAGED MULTI-CULTURAL NEIGHBORHOOD.		
	2 Check this box <input type="checkbox"/> 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	9
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	4
	6 Total number of volunteers (estimate if necessary)	6	25
	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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 721,664.	Current Year 618,204.
	9 Program service revenue (Part VIII, line 2g)	338,452.	270,069.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,217.	3,057.
	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)	1,062,333.	891,330.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		281,798.	254,745.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 23,450.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,008,317.	874,145.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,290,115.	1,128,890.	
19 Revenue less expenses. Subtract line 18 from line 12	-227,782.	-237,560.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2,018,366.	End of Year 1,935,075.
	21 Total liabilities (Part X, line 26)	695,629.	813,353.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,322,737.	1,121,722.

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	Signature of officer	Date			
	JOHN VAUGHN, EXECUTIVE DIRECTOR Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name LANCE J. BROCK	Preparer's signature <i>Lance J Brock</i>	Date 11/15/18	Check if self-employed <input type="checkbox"/>	PTIN P01919631
	Firm's name ▶ MAHONEY, ULBRICH, CHRISTIANSEN & RUSS P.A.	Firm's EIN ▶ 41-1647057	Phone no. (651) 227-6695		
Firm's address ▶ 10 RIVER PARK PLAZA, SUITE 800 SAINT PAUL, MN 55107					

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 [X]

1 Briefly describe the organization's mission: TO FOSTER A SAFE, DIVERSE AND THRIVING NEIGHBORHOOD BY ENGAGING THE COMMUNITY TO CREATE HEALTHY, AFFORDABLE HOUSING AND SUPPORT COMMERCIAL DEVELOPMENT.

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 [X] No

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

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 \$ 445,561. including grants of \$) (Revenue \$) HOUSING DEVELOPMENT - ESNDK CONDUCTS A NUMBER OF OUTREACH, EDUCATIONAL AND LEADERSHIP BUILDING ACTIVITIES THAT CONTRIBUTE TO SAFER AND HEALTHIER AFFORDABLE HOUSING. ESNDK FOCUSES ON LEAD IN HOUSING. IN 2017, PARTNERING WITH RAMSEY COUNTY HEALTH, ESNDK COMPLETED 70 LEAD WINDOW REPLACEMENT HOME REHABS. ESNDK ALSO WORKED WITH A DEVELOPMENT PARTNER TO PURCHASE FOUR TAX FORFEIT PROPERTIES, REHAB THEM, THEN SELL THEM AT AFFORDABLE PRICES.

4b (Code:) (Expenses \$ 225,114. including grants of \$) (Revenue \$ 62,554.) ECONOMIC DEVELOPMENT - IN 2017, ESNDK PROVIDED 25 LOCAL SMALL BUSINESSES WITH FREE TECHNICAL ASSISTANCE VIA THE RAMSEY COUNTY FUNDED BIZAWARE PROGRAM. ESNDK COMPLETED TWO COMMERCIAL REHAB PROJECTS IN 2017 AND AT YEAR'S END HAD ANOTHER THREE UNDER CONSTRUCTION. THESE ARE FUNDED BY CDBG DOLLARS FROM THE CITY OF ST. PAUL. 294,000 OF CDBG FUNDING FOR THESE LEVERAGED \$3.4 MILLION OF PRIVATE INVESTMENT AND CREATED 72 NEW JOBS. ESNDK CONTINUED TO OWN AND OPERATE THE OLD SWEDISH BANK BUILDING - A 10,000 SF THREE-STORY HISTORIC BUILDING THAT IS THE CORNERSTONE OF THE PAYNE AVENUE COMMERCIAL COORIDOR.

4c (Code:) (Expenses \$ 192,135. including grants of \$) (Revenue \$ 79,359.) THE OLD SWEDISH BANK BUILDING, LLC - THIS LLC WAS FORMED TO ACQUIRE, REHABILITATE, AND OWN THE COMMERCIAL USE BUILDING (BANK BUILDING) LOCATED AT 965 PAYNE AVENUE, SAINT PAUL, MINNESOTA. THE FORMER BANK BUILDING HAD LEASES WITH THREE ENTITIES IN 2017 ESNDK ITSELF, LUTHERAN SOCIAL SERVICES, AND MERRICK COMMUNITY SERVICES.

4d Other program services (Describe in Schedule O.) (Expenses \$ 150,752. including grants of \$) (Revenue \$ 128,156.)

4e Total program service expenses 1,013,562.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b <i>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</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

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		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
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)?		X
4b	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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	N/A	
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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; b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed - MN
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [] Own website [] Another's website [X] 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: JAKE YANG - 651-202-3719 6230 10TH ST N STE. 330, OAKDALE, MN 55128

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MIKE LAFAVE PRESIDENT	2.00	X		X				0.	0.	0.
(2) REBECCA NELSON DIRECTOR	1.00	X						0.	0.	0.
(3) TERRI THAO DIRECTOR	1.00	X						0.	0.	0.
(4) CHRIS CRUTCHFIELD VICE PRESIDENT	1.00	X						0.	0.	0.
(5) JIM JONES TREASURER	1.00	X		X				0.	0.	0.
(6) PETER VANG DIRECTOR	1.00	X						0.	0.	0.
(7) NIETTA PRESLEY DIRECTOR	1.00	X						0.	0.	0.
(8) ALFREDA FLOWERS SECRETARY	1.00	X		X				0.	0.	0.
(9) ERICA SAATHOFF DIRECTOR	1.00	X						0.	0.	0.
(10) JOHN VAUGHN EXECUTIVE DIRECTOR	40.00			X				56,604.	0.	8,248.

EAST SIDE NEIGHBORHOOD DEVELOPMENT
COMPANY, INC.

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 line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							56,604.	0.	8,248.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							56,604.	0.	8,248.	

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

	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		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>
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		<input checked="" type="checkbox"/>

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
NONE		

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

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	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	517,194.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	101,010.					
	g Noncash contributions included in lines 1a-1f: \$							
	h Total. Add lines 1a-1f			618,204.				
Program Service Revenue	2 a FISCAL SPONSORSHIP REV	Business Code	900099	120,163.	120,163.			
	b RENTAL INCOME		900099	79,359.	79,359.			
	c BROKERAGE COMMISSION		900099	41,160.	41,160.			
	d FEE FOR SERVICE		900099	21,394.	21,394.			
	e MISCELLANEOUS REVENUE		900099	7,993.	7,993.			
	f All other program service revenue							
	g Total. Add lines 2a-2f			270,069.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			3,057.			3,057.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	(i) Real	(ii) Personal					
		b Less: rental expenses						
		c Rental income or (loss)						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		b Less: cost or other basis and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)						
	8 a 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						
	9 a Gross income from gaming activities. See Part IV, line 19	a						
b Less: direct expenses		b						
c Net income or (loss) from gaming activities								
10 a 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					
11 a _____								
b _____								
c _____								
d All other revenue								
e Total. Add lines 11a-11d								
12 Total revenue. See instructions				891,330.	270,069.	0.	3,057.	

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COMPANY, INC.

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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				
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	64,852.	27,696.	23,943.	13,213.
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	158,320.	128,471.	25,338.	4,511.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	14,780.	12,514.	465.	1,801.
10 Payroll taxes	16,793.	12,135.	3,345.	1,313.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	10,050.	10,050.		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	71,074.	56,493.	13,974.	607.
12 Advertising and promotion				
13 Office expenses	15,040.	8,554.	5,894.	592.
14 Information technology				
15 Royalties				
16 Occupancy	61,785.	60,289.	1,074.	422.
17 Travel	1,140.		1,140.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	60.		60.	
20 Interest	30,534.	17,939.	12,595.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	85,550.	85,550.		
23 Insurance	13,401.	10,488.	2,092.	821.
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 CONSTRUCTION COSTS	416,105.	416,105.		
b FISCAL SPONSORSHIP EXPE	120,163.	120,163.		
c BROKERAGE COMMISSION	40,859.	40,859.		
d MISCELLANEOUS EXPENSES	4,495.	2,367.	1,958.	170.
e All other expenses	3,889.	3,889.		
25 Total functional expenses. Add lines 1 through 24e	1,128,890.	1,013,562.	91,878.	23,450.
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)

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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	113,319.	1	48,713.
	2	Savings and temporary cash investments	11,593.	2	131,998.
	3	Pledges and grants receivable, net	113,090.	3	91,989.
	4	Accounts receivable, net	55,965.	4	5,000.
	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 instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net	23,733.	7	42,191.
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,022.	9	1,090.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,587,007.		
	b	Less: accumulated depreciation	10b 972,913.	10c	1,614,094.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,018,366.	16	1,935,075.	
Liabilities	17	Accounts payable and accrued expenses	104,744.	17	185,964.
	18	Grants payable		18	
	19	Deferred revenue		19	5,139.
	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	550,410.	23	540,175.
	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	40,475.	25	82,075.
	26	Total liabilities. Add lines 17 through 25	695,629.	26	813,353.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,176,232.	27	1,026,225.
	28	Temporarily restricted net assets	146,505.	28	95,497.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	1,322,737.	33	1,121,722.	
34	Total liabilities and net assets/fund balances	2,018,366.	34	1,935,075.	

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Part XI Reconciliation 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	891,330.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,128,890.
3	Revenue less expenses. Subtract line 2 from line 1	3	-237,560.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,322,737.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	36,545.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,121,722.

Part XII Financial Statements and Reporting

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

- 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? _____
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? _____
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? _____
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? _____
- 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 _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization **EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.** Employer identification number **41-1367503**

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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 above (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						

EAST SIDE NEIGHBORHOOD DEVELOPMENT

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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	253,166.	535,425.	570,383.	721,664.	618,204.	2698842.
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	253,166.	535,425.	570,383.	721,664.	618,204.	2698842.
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)						401,846.
6 Public support. Subtract line 5 from line 4.						2296996.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	253,166.	535,425.	570,383.	721,664.	618,204.	2698842.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	7,055.	1,995.	4,775.	2,220.	3,057.	19,102.
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						2717944.
12 Gross receipts from related activities, etc. (see instructions)					12	1,686,531.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	84.51	%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	76.84	%
16a 33 1/3% support test - 2017. 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	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2016. 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	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2017. 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	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2016. 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	<input type="checkbox"/>		
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	<input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. 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 - 2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
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? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		
11c		

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? <i>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.</i>		
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? <i>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.</i>		
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)? <i>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).</i>		
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
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? <i>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.</i>		
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? <i>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.</i>		
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? <i>Provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

EAST SIDE NEIGHBORHOOD DEVELOPMENT

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 (explain in Part VI.) 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):		
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		(A) Prior Year	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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

EAST SIDE NEIGHBORHOOD DEVELOPMENT

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
- ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

**EAST SIDE NEIGHBORHOOD DEVELOPMENT
COMPANY, INC.**

Employer identification number

41-1367503

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.	Employer identification number 41-1367503
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 224,822.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 162,124.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.	Employer identification number 41-1367503
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.	Employer identification number 41-1367503
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC. Employer identification number 41-1367503

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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 (2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register), 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, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 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 on 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 on 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" on 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 on Part XIII

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

	(a) Current year	(b) Prior year	(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 on 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" on line 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" on 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		26,490.		26,490.
b Buildings		2,433,395.	847,812.	1,585,583.
c Leasehold improvements		125,447.	123,426.	2,021.
d Equipment		1,675.	1,675.	0.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 1,614,094.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LINE OF CREDIT	79,000.
(3) TENANT SECURITY DEPOSITS	3,075.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	82,075.

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" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
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
3	Subtract line 2e from line 1		3
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
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
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
3	Subtract line 2e from line 1		3
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
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

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.

PART X, LINE 2:

ESNDC IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSE. FOR 2017, ESNDC HAS NO UNRELATED BUSINESS TAXABLE INCOME.

ESNDC BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE ORGANIZATION WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AND LIABILITIES IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED.

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

EAST SIDE NEIGHBORHOOD DEVELOPMENT
COMPANY, INC.

Employer identification number
41-1367503

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

FISCAL SPONSORSHIP - IN 2017, ESND SUCCESSFULLY COMPLETED ITS FISCAL
SPONSORSHIP OF THE MONTESSORI AMERICAN INDIAN CHILDCARE CENTER

(MAICC), WHICH OBTAINED ITS OWN TAX EXEMPT STATUS. THE MISSION OF MAICC

IS TO ADDRESS THE EARLY CHILDHOOD NEEDS AND THE ACADEMIC ACHIEVEMENT

GAP OF AMERICAN INDIAN CHILDREN THROUGH REVITALIZING LANGUAGE AND

REINFORCING INDIGENOUS CULTURES.

EXPENSES \$ 124,766. INCLUDING GRANTS OF \$ 0. REVENUE \$ 120,163.

OTHER PROGRAM SERVICE EXPENSES.

EXPENSES \$ 18,937. INCLUDING GRANTS OF \$ 0. REVENUE \$ 7,993.

EAST SIDE PRIDE EXTERIOR MAINTENANCE COMPANY, LLC - THIS LLC WAS FORMED

TO PROMOTE THE IMPROVEMENT OF THE PHYSICAL ENVIRONMENT AND TO PROVIDE

ADDITIONAL JOB OPPORTUNITIES TO INDIVIDUALS LIVING IN THE PAYNE-ARCADE

AREA. THIS SOCIAL ENTERPRISE TRANSITIONED IN 2017 WHEN IT BECAME AN

INDEPENDENT LOCAL BUSINESS.

EXPENSES \$ 7,049. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE AND THE FULL BOARD ANNUALLY REVIEW AND APPROVE THE

PREPARED FORM 990 PRIOR TO SUBMITTAL.

FORM 990, PART VI, SECTION B, LINE 12C:

DIRECTORS ALL SIGN CONFLICT OF INTEREST FORMS ANNUALLY. EACH BOARD MEETING

BEGINS WITH A CALL FOR DIRECTORS TO DISCLOSE AND CONFLICTS, WHICH MINUTES

Name of the organization EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.	Employer identification number 41-1367503
---	---

REFLECT.

FORM 990, PART VI, SECTION B, LINE 15A:

AN ANNUAL REVIEW IS CONDUCTED BY THE BOARD CHAIR. IT IS REVIEWED AND APPROVED FIRST BY THE EXECUTIVE COMMITTEE THEN BY THE BOARD

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT OPEN TO PUBLIC INSPECTION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

RECOVERY OF ALLOWANCE	36,545.
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FORM 990, PART XII

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**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.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY, INC.

Employer identification number
41-1367503

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
EAST SIDE NEIGHBORHOOD DEV. CO. REAL ESTATE BROKERAGE, LLC - 46-0801160, 965 PAYNE AVENUE, ST. PAUL, MN 55130	IMPROVING THE EAST SIDE'S HOUSING MARKET	MINNESOTA	41,519.	3,806.	EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY
EAST SIDE PRIDE EXTERIOR MAINTENANCE COMPANY, LLC - 46-4716687, 965 PAYNE AVENUE, ST. PAUL, MN 55130	PROMOTE PHYSICAL IMPROVEMENT OF THE PHYSICAL ENVIRONMENT	MINNESOTA	3,531.	0.	EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY
OLD SWEDISH BANK BUILDING, LLC - 26-1563493 663 UNIVERSITY AVENUE, SUITE 200 ST. PAUL, MN 55104	AFFORDABLE COMMERCIAL UNITS	MINNESOTA	114,594.	1,649,055.	EAST SIDE NEIGHBORHOOD DEVELOPMENT COMPANY

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

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) Disproportionate 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			

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	No

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

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

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.				
(1)	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

East Side Neighborhood Development Company Balance Sheet

As of December 31, 2018
East Side Neighborhood Company
Comparative Statement of Financial Position (Balance Sheet)
For the Twelve Months Ending December 31, 2018

	Dec 31, 18	Dec 31, 17	\$ Change
ASSETS			
Current Assets			
Checking/Savings			
1001 · US Bank Checking 0319	8,487.69	34,155.88	-25,668.19
1005 · Top Line Credit Union - CC	253.31	0.00	253.31
1131 · Sunrise Brokerage 7913	289.31	123,306.26	-123,016.95
1132 · Sunrise Banks (9329)	500.08	0.00	500.08
Total Checking/Savings	9,530.39	157,462.14	-147,931.75
Accounts Receivable			
11000 · Accounts Receivable(1)	130,298.28	93,182.75	37,115.53
Total Accounts Receivable	130,298.28	93,182.75	37,115.53
Other Current Assets			
1300 · Prepaid Expenses	5,380.53	1,089.58	4,290.95
1400 · Accounts Receivable	0.00	3,806.20	-3,806.20
1700 · Transfers from OSB	-76,631.92	-76,631.92	0.00
Total Other Current Assets	-71,251.39	-71,736.14	484.75
Total Current Assets	68,577.28	178,908.75	-110,331.47
Other Assets			
1410 · Allowance for Doubtful Account	-3,669.00	-3,669.00	0.00
1450 · Notes Receivable	118,373.74	125,860.13	-7,486.39
1451 · Allowance for Notes Receivable	-242,694.00	-242,694.00	0.00
1452 · Foregivable Note Receivable	242,694.00	242,694.00	0.00
1600 · Investment in Old Swedish Bank	0.00	1,180,319.08	-1,180,319.08
Total Other Assets	114,704.74	1,302,510.21	-1,187,805.47
TOTAL ASSETS	183,282.02	1,481,418.96	-1,298,136.94
LIABILITIES & EQUITY			
Liabilities			
Current Liabilities			
Accounts Payable			
2000 · Accounts Payable	25,968.03	26,560.66	-592.63
Total Accounts Payable	25,968.03	26,560.66	-592.63
Other Current Liabilities			
2100 · Brokerage Earnest Money	0.00	127,700.00	-127,700.00
2140 · Accrued Salaries & Payroll Tax	14,863.87	9,067.95	5,795.92
2145 · Flex Plan 125 Payable	0.00	2,451.90	-2,451.90
2156 · Fiscal Agency Payable	0.00	5,750.00	-5,750.00
2190 · Accrued PTO	12,335.10	13,058.46	-723.36
2200 · Other Payables	0.00	11,712.00	-11,712.00
2250 · Line of Credit	79,000.00	79,000.00	0.00
2310 · Current Portion of LTD	0.00	28,251.00	-28,251.00
2600 · Suspense	15,171.26	0.00	15,171.26
2800 · Deferred Revenue	0.00	500.00	-500.00

East Side Neighborhood Development Company

Balance Sheet

As of December 31, 2018

	Dec 31, 18	Dec 31, 17	\$ Change
Total Other Current Liabilities	121,370.23	277,491.31	-156,121.08
Total Current Liabilities	147,338.26	304,051.97	-156,713.71
Long Term Liabilities			
2300 · Loan Payable	48,762.25	46,172.99	2,589.26
2305 · Allowance for Imputed Interest	-1,198.41	-1,198.41	0.00
2350 · Note Payable Sisters of St J	60,000.00	40,000.00	20,000.00
Total Long Term Liabilities	107,563.84	84,974.58	22,589.26
Total Liabilities	254,902.10	389,026.55	-134,124.45
Equity			
3000 · Fund Balance Unrestricted	0.00	0.00	0.00
3001 · Net Assets CC Acquisition	0.00	0.00	0.00
3200 · Unrestricted Net Assets	-175,162.86	1,193,812.01	-1,368,974.87
32000 · Retained Earnings	0.00	0.00	0.00
3300 · Temp Restricted Net Assets	108,830.01	95,497.00	13,333.01
Net Income	-5,287.23	-196,916.60	191,629.37
Total Equity	-71,620.08	1,092,392.41	-1,164,012.49
TOTAL LIABILITIES & EQUITY	183,282.02	1,481,418.96	-1,298,136.94

East Side Neighborhood Development Company
Balance Sheet

As of December 31, 2018
East Side
Comparative Statement
For the Twelve Months

ASSETS

Current Assets

Checking/Savings

- 1001 · US Bank Checking 0319
- 1005 · Top Line Credit Union - CC
- 1131 · Sunrise Brokerage 7913
- 1132 · Sunrise Banks (9329)

Total Checking/Savings

Accounts Receivable

- 11000 · Accounts Receivable(1)

Total Accounts Receivable

Other Current Assets

- 1300 · Prepaid Expenses
- 1400 · Accounts Receivable
- 1700 · Transfers from OSB

Total Other Current Assets

Total Current Assets

Other Assets

- 1410 · Allowance for Doubtful Account
- 1450 · Notes Receivable
- 1451 · Allowance for Notes Receivable
- 1452 · Foregivable Note Receivable
- 1600 · Investment in Old Swedish Bank

Total Other Assets

TOTAL ASSETS

LIABILITIES & EQUITY

Liabilities

Current Liabilities

Accounts Payable

- 2000 · Accounts Payable

Total Accounts Payable

Other Current Liabilities

- 2100 · Brokerage Earnest Money
- 2140 · Accrued Salaries & Payroll Tax
- 2145 · Flex Plan 125 Payable
- 2156 · Fiscal Agency Payable
- 2190 · Accrued PTO
- 2200 · Other Payables
- 2250 · Line of Credit
- 2310 · Current Portion of LTD
- 2600 · Suspense
- 2800 · Deferred Revenue

East Side Neighborhood Development Company

Balance Sheet

As of December 31, 2018

Total Other Current Liabilities

Total Current Liabilities

Long Term Liabilities

2300 · Loan Payable

2305 · Allowance for Imputed Interest

2350 · Note Payable Sisters of St J

Total Long Term Liabilities

Total Liabilities

Equity

3000 · Fund Balance Unrestricted

3001 · Net Assets CC Acquisition

3200 · Unrestricted Net Assets

32000 · Retained Earnings

3300 · Temp Restricted Net Assets

Net Income

Total Equity

TOTAL LIABILITIES & EQUITY

ANNE DEJOY

2257 E. Maryland Ave.

Saint Paul, MN 55119

Cell: 651-226-3056

Email: adejoy@esndc.org

SENIOR MANAGEMENT EXECUTIVE

Director of Commercial Development at East Side Neighborhood Development Company

PROFESSIONAL PROFILE

- More than twenty-five years' experience in managing complex organizations holding executive positions related to community development and economic development initiatives
- Solution-oriented with strong leadership skills

Objective Executive-level position in the field of community development

Qualifications Experience in planning and directing community-based economic development programs, marketing and branding strategies, small business development, international diplomacy and public relations

Organized problem solver; detail-oriented; motivated by active community networking

Strong leadership and management skills, solution-oriented, creative approaches to strategic initiatives and promotional events

Employment January 2005–Present ESNDC, Inc. Saint Paul, MN **Director of Commercial Development**

Job Duties: Department Director - Oversight of the economic development programs for the East Side Neighborhood Development Co. (ESNDC): (1) Commercial real estate projects; (2) Technical assistance to small businesses in areas of business development, finance, marketing, management, expansions and regulatory matters; (3) Work plan and budget development; (4) Commercial Corridor Revitalization, property inventory and business recruitment strategies; (5) Manage HUD-CDBG and Neighborhood Star public funds as a subrecipient organization. Work in partnership with the Payne Arcade Business Association for the Business Recruitment, Retention and Expansion Strategies. Staff supervision and budget oversight.

Acting Executive Director from Oct-Dec 2006.

Director of Housing & Community Development from 2008-2010.

2004-2005 Strategic Initiatives Saint Paul, MN
Consultant

Scope of Service: Consultant and advisor to several clients including, ESNDC, Public Art St. Paul and Capital City Partnership in areas of marketing, small business technical assistance, strategic planning, event planning and securing sponsorships for the Payne Arcade Harvest Festival, the International Stone Carving Symposium, and various other projects.

1999–2004 Mayor's Office Saint Paul, MN
Assistant to the Mayor

Job Duties: Community liaison for the Mayor of St. Paul. Coordinated several City government projects including: *The National Mayor's Forum* with the Urban Land Institute, Saint Paul's Arts, Culture and Entertainment Plan, Saint Paul's Sister Cities International Program and others. Related duties involved

representing the Mayor at community meetings and public appearances. Facilitating effective communication between the Mayor and district councils, faith-based organizations and various ethnic groups relating to community issues. Assisted with speech writing, advised staff and the Mayor about protocol while visiting international dignitaries.

1992–1999 WIND, Inc. Saint Paul, MN
Consultant

Job Duties: Contracted by Western Initiatives for Neighborhood Development (WIND) to provide technical assistance and training to staff of the Central Avenue Mainstreet Program (CAMP) and West Broadway Area Coalition. Consulted with staff in program development, volunteer recruitment, financial management, festival planning and other related work for their “mainstreet revitalization” programs. Conducted planning sessions for the Board of Directors and developed the Strategic Plan.

1992–1999 REDA, Inc. Saint Paul, MN **Executive Director**

Job Duties: Directed operations for the Riverview Economic Development Association (REDA), a nonprofit community development corporation. Responsibilities including hiring and supervising personnel, financial management, program development and implementation, fund development, public relations and other related duties. Initiated strategic planning, program evaluation methods and fundraising activities with the Board of Directors. Produced the annual Cinco de Mayo Festival and parade that draws upwards of 70,000 people. Established media relations, drafted press releases and maintained on-going communication with various media outlets.

Education

Marketing Art and Design
Middlesex County College
New Jersey

Professional Training

- ❖ Certificate in Economic Development Strategies issued by the U.S. Dept. of Housing & Urban Development (HUD)
- ❖ Site-based Management Training with Saint Paul Public Schools
- ❖ Minnesota Festivals and Event Management Training
- ❖ National Development Council (NDC) Course: Economic Development and Real Estate Finance
- ❖ Recipient, of a Leadership Initiatives in Neighborhoods (LIN) Grant
- ❖ Proclamation by the Governor of Minnesota for serving on the Economic Development Committee for the Chicano Latino Affairs Council

Recognition

Recognition award from the Riverview Economic Development Association

Civic Engagement

Boards and Committees:

- ❖ Saint Paul Planning Commission
- ❖ West Side Citizens Organization (District 3 Community Council)
- ❖ West Side Community Health Clinic – La Clinica
- ❖ Saint Paul Community Development Agenda
- ❖ Metropolitan Regional Arts Council
- ❖ Public Art Saint Paul
- ❖ Saint Paul Riverfront Corporation
- ❖ Neighborhood Justice Center
- ❖ Nagasaki-St. Paul Sister City Committee
- ❖ Manzanillo-St. Paul Sister City Partnership
- ❖ Payne Arcade Business Association
- ❖ Advisory Committee for St. Paul Port Authority - Beacon Bluff Development

NeighborWorks Home Partners

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2016

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the **2016** calendar year, or tax year beginning **OCT 1, 2016** and ending **SEP 30, 2017**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization COMMUNITY NEIGHBORHOOD HOUSING SERVICES		D Employer identification number 41-1386089
	Doing business as NEIGHBORWORKS HOME PARTNERS		E Telephone number 651-292-8710
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 533 DALE ST N		G Gross receipts \$ 6,289,973.
	City or town, state or province, country, and ZIP or foreign postal code ST. PAUL, MN 55103		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	F Name and address of principal officer: JASON PETERSON SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(c) Group exemption number ▶
J Website: ▶ WWW.NWHOMEPARTNERS.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1981	M State of legal domicile: MN

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROVIDING FORECLOSURE PREVENTION, HOME IMPROVEMENT LOANS, AND NEW HOMEOWNER EDUCATION, IN		
	2 Check this box <input type="checkbox"/> 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	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	19
	6 Total number of volunteers (estimate if necessary)	6	30
	7 a 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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 3,654,824.	Current Year 5,434,320.
	9 Program service revenue (Part VIII, line 2g)	392,841.	350,611.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,143.	246,807.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	44,053.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,096,861.	6,031,738.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	950,122.	2,599,186.
	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)	763,731.	882,675.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 28,757.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	512,828.	525,985.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,226,681.	4,007,846.
19 Revenue less expenses. Subtract line 18 from line 12	1,870,180.	2,023,892.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 12,635,706.	End of Year 13,071,876.
	21 Total liabilities (Part X, line 26)	3,917,758.	2,529,352.
	22 Net assets or fund balances. Subtract line 21 from line 20	8,717,948.	10,542,524.

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	Signature of officer	Date			
	JASON PETERSON, EXECUTIVE DIRECTOR Type of print name and title	8-15-18			
Paid Preparer Use Only	Print/Type preparer's name MARC A. KOTSONAS	Preparer's signature	Date 08/14/18	Check <input type="checkbox"/> if self-employed	PTIN P00544551
	Firm's name ▶ MAHONEY, ULBRICH, CHRISTIANSEN & RUSS P.A.	Firm's EIN ▶ 41-1647057	Phone no. (651) 227-6695		
Firm's address ▶ 10 RIVER PARK PLAZA, SUITE 800 SAINT PAUL, MN 55107					

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 [X]

1 Briefly describe the organization's mission: PROVIDING ONE-ON-ONE AND GROUP PRE-PURCHASE HOMEBUYER EDUCATION AND COUNSELING, ONE-ON-ONE REFINANCE COUNSELING, ONE-ON-ONE FORECLOSURE COUNSELING, AND HOME IMPROVEMENT AND DOWN PAYMENT ASSISTANCE LOANS TO LOW-TO-MODERATE INCOME RESIDENTS OF THE TWIN CITIES 7 COUNTY METRO

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 [X] No

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

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 \$ 3,307,242. including grants of \$ 2,599,186.) (Revenue \$ 317,077.) REVOLVING LOAN PROGRAM HOME IMPROVEMENT AND DOWN PAYMENT ASSISTANCE LOANS AND GRANTS WERE PROVIDED TO QUALIFIED VERY LOW-TO-LOW-TO-MODERATE-TO-MIDDLE INCOME HOUSEHOLDS (AS DEFINED BY HUD) WHO WOULD NOT LIKELY QUALIFY FOR THESE FUNDS FROM A TRADITIONAL LENDING INSTITUTION. IN FISCAL YEAR 2017, 312 HOME IMPROVEMENT LOANS AND 20 DOWN PAYMENT LOANS WERE PROVIDED.

4b (Code:) (Expenses \$ 202,811. including grants of \$) (Revenue \$ 33,534.) COUNSELING AND EDUCATION PRE-PURCHASE AND POST-PURCHASE HOUSING COUNSELING AND EDUCATION WERE PROVIDED TO HOUSEHOLDS TO HELP THEM BUY AND KEEP THEIR HOME. IN FISCAL YEAR 2017, 813 FAMILIES RECEIVED COUNSELING OR EDUCATION SERVICES.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,510,053.

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>	X	
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

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

Form with multiple rows and columns for reporting tax compliance. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and charitable contributions. Columns include 'Yes', 'No', and numerical input fields.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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 X

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.		
	14		
b	Enter the number of voting members included in line 1a, above, who are independent		
	13		
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?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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	X	
b	Other officers or key employees of the organization		X
	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?		X
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 **MN**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request 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: **JASON PETERSON - 651-292-8710**
533 DALE ST N, ST PAUL, MN 55103

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DANNY GARCIA-VELEZ PRESIDENT	1.00	X		X				0.	0.	0.
(2) ANDY GRANBURG BOARD MEMBER	1.00	X						0.	0.	0.
(3) NANCY TUOMIE SECRETARY	1.00	X		X				0.	0.	0.
(4) ANNIE CARVALHO VICE PRESIDENT	1.00	X		X				0.	0.	0.
(5) KEN SCHAEFER TREASURER	1.00	X		X				0.	0.	0.
(6) JASON PETERSON EXECUTIVE DIRECTOR	36.00 4.00	X		X			107,500.	0.	16,520.	
(7) CALLIE BRIESE BOARD MEMBER	1.00	X						0.	0.	0.
(8) JERRY CARRIER BOARD MEMBER	1.00	X						0.	0.	0.
(9) JASON STONE BOARD MEMBER	1.00	X						0.	0.	0.
(10) MICHAEL NGUYEN BOARD MEMBER	1.00	X						0.	0.	0.
(11) SHOREE INGRAM BOARD MEMBER	1.00	X						0.	0.	0.
(12) MICHAEL MORRELL BOARD MEMBER	1.00	X						0.	0.	0.
(13) JUAN BATES BOARD MEMBER	1.00	X						0.	0.	0.
(14) STEVE MATHESON BOARD MEMBER	1.00	X						0.	0.	0.
(15) KJIRSTEN JOHNSON CFO	39.00 1.00			X			1,093.	0.	447.	

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	5,378,349.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	55,971.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		5,434,320.				
Program Service Revenue	2 a <u>LOAN INTEREST</u>	Business Code	522291	157,498.	157,498.		
	b <u>LOAN SERVICING</u>		522291	116,780.	116,780.		
	c <u>RENTAL REVENUE</u>		531110	42,799.	42,799.		
	d <u>OTHER REVENUE</u>		522291	33,534.	33,534.		
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		350,611.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			5,042.		5,042.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				500,000.			
		b Less: cost or other basis and sales expenses			258,235.		
		c Gain or (loss)			241,765.		
	d Net gain or (loss)			241,765.		241,765.	
	8 a 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					
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a 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					
11 a _____	a						
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			6,031,738.	350,611.	0.	246,807.	

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,599,186.	2,599,186.		
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	124,019.	57,049.	58,289.	8,681.
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	621,201.	383,433.	226,593.	11,175.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	19,149.	16,937.	1,786.	426.
9 Other employee benefits	64,163.	27,047.	36,145.	971.
10 Payroll taxes	54,143.	32,163.	20,590.	1,390.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	44,132.	16,716.	27,416.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	125,428.	109,162.	16,266.	
12 Advertising and promotion	5,261.	5,068.	52.	141.
13 Office expenses	102,868.	70,343.	30,543.	1,982.
14 Information technology	23,950.	14,762.	8,605.	583.
15 Royalties				
16 Occupancy	59,048.	34,900.	22,582.	1,566.
17 Travel	14,158.	4,852.	9,306.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,926.	1,798.	1,128.	
20 Interest	44,356.	40,802.	2,489.	1,065.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	22,968.	17,987.	4,373.	608.
23 Insurance	6,440.	3,398.	2,873.	169.
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 PROVISION FOR LOAN LOSS	70,289.	70,289.		
b PROGRAM FUNDS RETURNED	4,161.	4,161.		
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	4,007,846.	3,510,053.	469,036.	28,757.
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	588,947.	1	1,134,931.
	2 Savings and temporary cash investments	4,901,595.	2	4,785,104.
	3 Pledges and grants receivable, net	567,709.	3	535,798.
	4 Accounts receivable, net	268,872.	4	101,642.
	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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	25,023.	9	19,134.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 62,868.		
	b Less: accumulated depreciation	10b 6,573.	10c 242,929.	56,295.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	5,998,542.	13	6,396,883.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	42,089.	15	42,089.
16 Total assets. Add lines 1 through 15 (must equal line 34)	12,635,706.	16	13,071,876.	
Liabilities	17 Accounts payable and accrued expenses	83,192.	17	110,898.
	18 Grants payable		18	
	19 Deferred revenue	1,436,977.	19	296,300.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	3,951.	21	4,698.
	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	1,798,215.	23	1,793,964.
	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	595,423.	25	323,492.
	26 Total liabilities. Add lines 17 through 25	3,917,758.	26	2,529,352.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,104,167.	27	3,136,743.
	28 Temporarily restricted net assets	4,880,385.	28	6,192,385.
	29 Permanently restricted net assets	1,733,396.	29	1,213,396.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	8,717,948.	33	10,542,524.	
34 Total liabilities and net assets/fund balances	12,635,706.	34	13,071,876.	

Part XI Reconciliation 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	6,031,738.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,007,846.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,023,892.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,717,948.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-199,316.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	10,542,524.

Part XII Financial Statements and Reporting

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

- 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? _____
 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? _____
 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? _____
 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? _____
- 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 _____

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

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

2016

Open to Public Inspection

Name of the organization **COMMUNITY NEIGHBORHOOD HOUSING SERVICES** Employer identification number **41-1386089**

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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 above (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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1785562.	1097451.	2270137.	3654824.	5434320.	14242294.
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	1785562.	1097451.	2270137.	3654824.	5434320.	14242294.
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)						59,809.
6 Public support. Subtract line 5 from line 4.						14182485.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	1785562.	1097451.	2270137.	3654824.	5434320.	14242294.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,539.	1,501.	4,033.	5,143.	5,042.	17,258.
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						14259552.
12 Gross receipts from related activities, etc. (see instructions)					12	1,386,487.
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	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	99.46	%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	99.41	%
16a 33 1/3% support test - 2016. 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	<input checked="" type="checkbox"/>		
b 33 1/3% support test - 2015. 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	<input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2016. 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	<input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2015. 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	<input type="checkbox"/>		
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	<input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. 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 - 2015. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

- 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?
 - b A family member of a person described in (a) above?
 - 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.*

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.*
- 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.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 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).*
- 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.*

	Yes	No
1		
2		
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).*

- 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.*
 - 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.*
- 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.*
 - 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.*

	Yes	No
2a		
2b		
3a		
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 (explain in Part VI.) **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):		
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).

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

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 2016 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-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

Employer identification number

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

41-1386089

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization COMMUNITY NEIGHBORHOOD HOUSING SERVICES	Employer identification number 41-1386089
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Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CITY OF ST. PAUL 1400 CITY HALL ANNEX, 25 WEST 4TH STREET ST. PAUL, MN 55102	\$ 666,628.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	NEIGHBORWORKS AMERICA 1325 G STREET, W SUITE 500 WASHINGTON, DC 20005	\$ 1,098,394.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT 451 7TH STREET S.W. WASHINGTON, DC 20410	\$ 445,210.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization COMMUNITY NEIGHBORHOOD HOUSING SERVICES	Employer identification number 41-1386089
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Part II **Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization COMMUNITY NEIGHBORHOOD HOUSING SERVICES	Employer identification number 41-1386089
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2016

Open to Public Inspection

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

Name of the organization: COMMUNITY NEIGHBORHOOD HOUSING SERVICES; Employer identification number: 41-1386089

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 2 columns: Question, Held at the End of the Tax Year. Includes questions 1-9 regarding conservation easements.

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

Table with 2 columns: Question, Amount. Includes questions 1a, 1b, 2a, 2b regarding collections of art and historical treasures.

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" on 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 on Part XIII

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

	(a) Current year	(b) Prior year	(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 on 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" on line 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" on 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				
d Equipment		62,868.	6,573.	56,295.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				56,295.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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
(1) LOANS RECEIVABLE	6,396,883.	COST
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		6,396,883.

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SECURITY DEPOSITS	795.
(3) UNDISBURSED LOAN COMMITMENTS	322,697.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
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	
3	Subtract line 2e from line 1		3	
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	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
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	
3	Subtract line 2e from line 1		3	
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	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

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.

PART X, LINE 2:

CNHS IS CLASSIFIED AS TAX-EXEMPT ORGANIZATION UNDER MINNESOTA STATUTE 290.05 AND SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, IS EXEMPT FROM PRIVATE FOUNDATION STATUS UNDER SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE, AND IS SUBJECT TO INCOME TAXES ONLY ON NET UNRELATED BUSINESS INCOME. MANAGEMENT BELIEVES IT DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS.

2016

Open to Public Inspection

SCHEDULE I (Form 990) Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

Department of the Treasury Internal Revenue Service

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

Name of the organization: COMMUNITY NEIGHBORHOOD HOUSING SERVICES

Employer identification number: 41-1386089

Part I General Information on Grants and Assistance. 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? [X] Yes [] No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

Table with 7 columns: (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.

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

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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 noncash assistance
LIFT FORGIVEABLE HOME BUYER GRANTS	312	2,300,000.	0.		
DOS FORGIVABLE LOANS	20	299,186.	0.		

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

PART I, LINE 2:
CNHS REQUIRES THE RECEIVING ORGANIZATION TO PROVIDE REPORTS DETAILING THE USAGE OF GRANT AWARDS.

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

2016

Open to Public
Inspection

Name of the organization

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

Employer identification number

41-1386089

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

THE SEVEN-COUNTY SAINT PAUL / MINNEAPOLIS METRO AREA WITH SPECIAL
PROGRAM EMPHASIS IN THE CITY OF SAINT PAUL.

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

AREA WITH A SPECIAL EMPHASIS ON THE CITY OF ST. PAUL.

FORM 990, PART VI, SECTION B, LINE 11B:

A COPY OF THE ORGANIZATION'S FORM 990 IS MADE AVAILABLE TO EACH BOARD
MEMBER FOR THEIR REVIEW. THE 990 IS REVIEWED BY THE FINANCE AND EXECUTIVE
COMMITTEES PRIOR TO FILING AND IS DISCUSSED AT THE NEXT BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

REVIEWED ANNUALLY AT BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS PERFORM AN ANNUAL PERFORMANCE REVIEW OF THE
EXECUTIVE DIRECTOR AND USE COMPARATIVE SALARY DATA TO DETERMINE
COMPENSATION FOR THE UPCOMING YEAR.

FORM 990, PART VI, SECTION C, LINE 19:

DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PAGE 6, PART VI, LINE 1B

THE EXECUTIVE DIRECTOR IS A DIRECTOR OF THE ORGANIZATION. HE ABSTAINS
FROM VOTES THAT INVOLVE HIS SALARY, APPROVAL OF THE BUDGET, AND

Name of the organization

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

Employer identification number

41-1386089

APPROVAL OF INCOMING BOARD DIRECTORS.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

TRANSFER OF ASSETS TO GREATER FROGTOWN COMMUNITY

DEVELOPMENT CORPORATION

-199,316.

FORM 990, PAGE 12, PART XII, LINE 2C

THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS.

SCHEDULE R (Form 990) **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.**

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number
41-1386089

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

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
GREATER FROGTOWN COMMUNITY DEVELOPMENT CORPORATION - 41-1804148, 533 DALE STREET N, ST. PAUL, MN 55103	REAL ESTATE DEVELOPMENT	MINNESOTA	501(C)(3)	LINE 7	COMMUNITY NEIGHBORHOOD HOUSING SERVICES		X

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

Schedule R (Form 990) 2016

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

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) Disproportionate 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			

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	No

COMMUNITY NEIGHBORHOOD HOUSING SERVICES

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.

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - b Gift, grant, or capital contribution to related organization(s)
 - c Gift, grant, or capital contribution from related organization(s)
 - d Loans or loan guarantees to or for related organization(s)
 - e Loans or loan guarantees by related organization(s)
 - f Dividends from related organization(s)
 - g Sale of assets to related organization(s)
 - h Purchase of assets from related organization(s)
 - i Exchange of assets with related organization(s)
 - j Lease of facilities, equipment, or other assets to related organization(s)
 - k Lease of facilities, equipment, or other assets from related organization(s)
 - l Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)
 - n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
 - o Sharing of paid employees with related organization(s)
 - p Reimbursement paid to related organization(s) for expenses
 - q Reimbursement paid by related organization(s) for expenses
 - r Other transfer of cash or property to related organization(s)
 - s Other transfer of cash or property from related organization(s)

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	Yes	No
GREATER FROGTOWN COMMUNITY DEVELOPMENT CORPORATION	D	100,000.CASH			X
GREATER FROGTOWN COMMUNITY DEVELOPMENT CORPORATION	R	199,316.CASH			X
GREATER FROGTOWN COMMUNITY DEVELOPMENT CORPORATION	Q	62,610.CASH			X
(4)					
(5)					
(6)					

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

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

(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 sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate 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	

**COMMUNITY NEIGHBORHOOD HOUSING
SERVICES, INC.**

dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATED FINANCIAL STATEMENTS

**FOR THE YEAR ENDED
SEPTEMBER 30, 2017**

**COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS**

CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Totals for 2016)

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Mahoney Ulbrich Christiansen Russ P.A.

CERTIFIED PUBLIC ACCOUNTANTS

10 River Park Plaza, Suite 800 | Saint Paul, MN 55107
Phone: 651.227.6695 Fax: 651.227.9796 | www.mucr.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Community Neighborhood Housing Services, Inc.
Saint Paul, Minnesota

Report on the Financial Statements

We have audited the accompanying consolidated financial statements of Community Neighborhood Housing Services, Inc. dba NeighborWorks Home Partners (a nonprofit organization) and its subsidiary, which comprise the consolidated statement of financial position as of September 30, 2017, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to consolidated financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

(Continued)

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Community Neighborhood Housing Services, Inc. dba NeighborWorks Home Partners and its subsidiary as of September 30, 2017, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited Community Neighborhood Housing Services, Inc.'s 2016 financial statements and we expressed an unmodified audit opinion on those audited financial statements in our report dated March 2, 2017. In our opinion, the summarized comparative information presented herein as of and for the year ended September 30, 2016, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Consolidating and Other Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating information shown on pages 23 and 24 is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, activities, and changes in net assets of the individual entities, and it is not a required part of the consolidated financial statements. The supplementary information shown on pages 25 and 26 is presented for purposes of additional analysis as required by NeighborWorks America and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The consolidating and other information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the consolidating and other information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated March 22, 2018, on our consideration of Community Neighborhood Housing Services, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Community Neighborhood Housing Services, Inc.'s internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Community Neighborhood Housing Services, Inc.'s internal control over financial reporting and compliance.

*Mahoney Ulbrich
Christiansen Russ P.A.*

March 22, 2018

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

September 30, 2017
(With Comparative Totals for 2016)

	2017	2016
ASSETS		
Cash	\$ 4,161,900	\$ 3,107,116
Cash - restricted for programs	2,118,016	2,697,380
Accounts and government grants receivable	107,440	226,581
Pledges receivable	30,000	110,000
CDFI grant receivable	400,000	400,000
Prepaid expenses	19,134	25,023
Properties held for sale, net	422,740	152,028
Loans receivable, net	6,396,883	5,998,542
Investments in LLC's	-	48,794
Office buildings and equipment, net	281,845	472,561
Total assets	\$ 13,937,958	\$ 13,238,025
LIABILITIES AND NET ASSETS		
Accounts payable and accrued expenses	\$ 26,851	\$ 6,977
Payroll liabilities	84,047	76,215
Undisbursed loan commitments	322,697	385,595
Security deposits and escrow liabilities, net	5,493	5,496
Fiscal agency payable	-	208,283
Deferred NeighborhoodLIFT grant	296,300	1,434,500
Deferred revenue	-	2,477
Notes payable	304,682	107,265
Long-term debt	2,130,845	2,151,486
Total liabilities	3,170,915	4,378,294
Net assets:		
Unrestricted	3,346,067	2,245,950
Temporarily restricted	6,207,580	4,880,385
Permanently restricted	1,213,396	1,733,396
Total net assets	10,767,043	8,859,731
Total liabilities and net assets	\$ 13,937,958	\$ 13,238,025

See accompanying notes to consolidated financial statements.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATED STATEMENT OF ACTIVITIES

For the Year Ended September 30, 2017
(With Comparative Totals for 2016)

	2017			Total	2016
	Unrestricted	Temporarily restricted	Permanently restricted		
Support and revenue:					
Contributions:					
NeighborWorks® America	\$ 378,394	\$ 720,000	\$ -	\$ 1,098,394	\$ 485,182
CDFI grant	-	-	-	-	130,435
Government grants	342,005	-	-	342,005	1,014,795
Other contributions	55,971	-	-	55,971	233,795
Revenue:					
The NeighborhoodLIFT	2,738,200	-	-	2,738,200	965,500
Loan interest	157,498	-	-	157,498	138,965
Loan servicing and origination fees	116,780	-	-	116,780	47,579
Other earned fees	33,534	-	-	33,534	17,613
Sales of properties	-	-	-	-	1,077,100
Rental revenue	57,179	-	-	57,179	79,153
Investment income	5,042	-	-	5,042	5,143
Net assets released from time and usage restrictions	815,772	(295,772)	(520,000)	-	-
Total revenue and support	<u>4,700,375</u>	<u>424,228</u>	<u>(520,000)</u>	<u>4,604,603</u>	<u>4,195,260</u>
Expenses:					
Program services:					
Loan and grant program	3,307,242	-	-	3,307,242	1,616,642
Homebuyer education	202,811	-	-	202,811	315,136
Real estate development	82,166	-	-	82,166	1,296,645
Total program services	<u>3,592,219</u>	<u>-</u>	<u>-</u>	<u>3,592,219</u>	<u>3,228,423</u>
Management and general	469,036	-	-	469,036	266,058
Fundraising	28,757	-	-	28,757	28,845
Total expenses	<u>4,090,012</u>	<u>-</u>	<u>-</u>	<u>4,090,012</u>	<u>3,523,326</u>
Change in net assets before nonoperating activity	610,363	424,228	(520,000)	514,591	671,934
CDFI and government grants for loans	-	902,967	-	902,967	1,061,725
Gain on sale of 35 Water	241,765	-	-	241,765	-
LIFT fiscal agency funds released	296,783	-	-	296,783	-
Loss from investment in other entities	(48,794)	-	-	(48,794)	(22,000)
Change in net assets	1,100,117	1,327,195	(520,000)	1,907,312	1,711,659
Net assets:					
Beginning of year	<u>2,245,950</u>	<u>4,880,385</u>	<u>1,733,396</u>	<u>8,859,731</u>	<u>7,148,072</u>
End of year	<u>\$ 3,346,067</u>	<u>\$ 6,207,580</u>	<u>\$ 1,213,396</u>	<u>\$ 10,767,043</u>	<u>\$ 8,859,731</u>

See accompanying notes to consolidated financial statements.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES

For the Year Ended September 30, 2017
(With Comparative Totals for 2016)

	2017						2016
	Loan and grant program	Homebuyer education	Real estate development	Total program services	Management and general	Fundraising	Total
Salaries	\$ 301,888	\$ 130,995	\$ 51,989	\$ 484,872	\$ 277,118	\$ 18,700	\$ 780,690
Payroll taxes	22,430	9,733	3,863	36,026	20,590	1,390	58,006
Employee benefits	35,506	16,077	6,758	58,341	45,695	2,553	106,589
	<u>359,824</u>	<u>156,805</u>	<u>62,610</u>	<u>579,239</u>	<u>343,403</u>	<u>22,643</u>	<u>945,285</u>
Insurance	2,576	822	610	4,008	2,873	169	7,050
Occupancy	26,605	8,295	6,187	41,087	9,202	1,237	51,526
Equipment	2,336	1,043	1,145	4,524	2,364	169	7,057
Consulting and contracts	102,596	6,566	2,546	111,708	-	-	111,708
Professional fees	15,994	722	372	17,088	43,682	-	60,770
Board and publicity	1,214	584	370	2,168	1,128	-	3,296
Other operating costs (consumables)	32,731	8,425	4,422	45,578	28,179	1,813	75,570
Depreciation	10,374	7,613	2,364	20,351	4,373	608	25,332
Home improvement grants	2,599,186	-	-	2,599,186	-	-	2,599,186
Marketing expenses	3,636	1,432	606	5,674	52	141	5,867
Travel	2,312	2,540	581	5,433	9,306	-	14,739
Information technology	10,153	4,609	353	15,115	8,605	583	24,303
Loan/client processing expenses	22,453	3,355	-	25,808	-	-	25,808
HOME program funds returned	4,161	-	-	4,161	-	-	4,161
Provision for loan losses	70,289	-	-	70,289	-	-	70,289
Cost of houses sold	-	-	-	-	-	-	-
Interest expense	40,802	-	-	40,802	2,489	1,065	44,356
Property taxes	-	-	-	-	13,380	329	13,709
	<u>\$ 3,307,242</u>	<u>\$ 202,811</u>	<u>\$ 82,166</u>	<u>\$ 3,592,219</u>	<u>\$ 469,036</u>	<u>\$ 28,757</u>	<u>\$ 4,090,012</u>
							<u>\$ 3,523,326</u>

See accompanying notes to consolidated financial statements.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATED STATEMENT OF CASH FLOWS

For the Year Ended September 30, 2017
(With Comparative Totals for 2016)

Increase (Decrease) in Cash

	2017	2016
Cash flows from operating activities:		
Change in net assets	\$ 1,907,312	\$ 1,711,659
Adjustments to reconcile the change in net assets to net cash from operating activities:		
Depreciation	25,332	23,225
Loss from investment in other entities	48,794	22,000
Provisions for loan losses, net	70,307	58,822
Accretion of discount on loans	(36,409)	(23,546)
Less grants for loans	(902,967)	(1,061,725)
Less permanently restricted grants	-	(210,000)
Gain on sale of building	(241,765)	-
LIFT fiscal agency funds released	(296,783)	-
Changes in operating assets and liabilities:		
Accounts receivable	119,141	(135,352)
Pledges receivable	80,000	(460,000)
Prepaid expenses	5,889	(15,551)
Properties held for sale, net	(270,712)	599,428
Accounts payable and accrued expenses	27,706	30,094
Change in security deposits and escrow liabilities, net	(3)	(20,244)
Fiscal agency payable	88,500	93,083
Deferred NeighborhoodLIFT	(1,138,200)	1,434,500
Deferred revenue	(2,477)	2,477
Net cash from operating activities	(516,335)	2,048,870
Cash flows from investing activities:		
New loans provided	(966,351)	(585,685)
Collections of loans receivable	471,214	184,651
Proceeds from sale of building	462,662	-
Purchase of building improvements and equipment	(55,513)	(12,765)
Net cash from investing activities	(87,988)	(413,799)
Cash flows from financing activities:		
Proceeds from notes payable	197,417	56,973
Payments of notes payable	-	(568,974)
Proceeds from issuance of long-term debt	-	1,000,000
Principal payments on long-term debt	(20,641)	(217,523)
Grants received for loans	902,967	1,061,725
Proceeds of permanently restricted grants	-	210,000
Net cash from financing activities	1,079,743	1,542,201
Net increase in cash	475,420	3,177,272
Cash at beginning of year	5,804,496	2,627,224
Cash at end of year	\$ 6,279,916	\$ 5,804,496
Reconciliation to the statement of financial position:		
Cash	\$ 4,161,900	\$ 3,107,116
Cash - restricted for programs	2,118,016	2,697,380
	\$ 6,279,916	\$ 5,804,496
Supplemental cash flow information:		
Cash paid for interest	\$ 44,356	\$ 40,147

See accompanying notes to consolidated financial statements.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

1. ORGANIZATION

Community Neighborhood Housing Services, Inc. (CNHS) is a community based nonprofit organization located in Saint Paul, Minnesota. CNHS was incorporated in 1980. CNHS serves the seven-county Saint Paul / Minneapolis metropolitan area with special program emphasis in Saint Paul.

On October 1, 2014, CNHS merged with Greater Frogtown Community Development Corporation (GFCDC). The merged organization began doing business as NeighborWorks Home Partners (NWHP).

NWHP's mission is to promote community development through education and affordable housing lending programs in the neighborhoods it serves. The target clients are households with incomes below the metropolitan median income and households whose credit histories may not afford them the opportunity to receive loans through conventional lenders.

Other activities include home improvement loans, forgivable loans (grants), and homebuyer education including foreclosure prevention services.

NWHP is an affiliate of NeighborWorks America (NWA) and a member of the NeighborWorks Network. NWA is a national nonprofit organization created by the U. S. Congress to provide financial and other support for community based revitalization. NWHP is also certified as a Community Development Financial Institution (CDFI).

The activities are supported primarily by contributions, government grants, rental revenue, interest income and fees for services. Should NWHP terminate operations, certain government funded assets would be returned to the respective government agency.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Principles of Consolidation - The consolidated financial statements include Community Neighborhood Housing Services, Inc. (parent organization) and Greater Frogtown Community Development Corporation (subsidiary organization). CNHS controls GFCDC with the authority to appoint its board of directors. All significant intercompany accounts and transactions have been eliminated.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
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2. **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Financial Statement Presentation - The accompanying financial statements have been prepared using the accrual basis of accounting. Net assets, revenues and support are classified based on the presence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

- **Unrestricted Net Assets** - Net assets that are not subject to donor-imposed stipulations.
- **Temporarily Restricted Net Assets** - Temporarily restricted resources are those restricted by the donor, grantor, or other outside parties whose restrictions either expire by the passage of time or fulfillment of the purpose. Temporarily restricted net assets are primarily for a revolving loan fund. Community Development Block Grants from the City of Saint Paul (CDBG funds) and Community Development Financial Institutions (CDFI) Fund monies from the Department of the Treasury funded a substantial portion of the revolving loan fund. A significant portion of these assets would be returned to the City and Department of Treasury if NWHP were to terminate operations. NWHP also received significant funds from NWA for housing counseling and foreclosure prevention.
- **Permanently Restricted Net Assets** - Permanently restricted resources consist of Revolving Loan Funds, which includes support and revenues designated to provide loans and grants. Permanently restricted net assets are from NWA. A significant portion of these assets would be returned to NWA if NWHP were to terminate operations.

NWHP has presented CDFI and government grants for loans, release of fiscal agency funds, gain on sale of building, and losses from noncontrolling interests in LLC's separate from operating results because management believes the presentation better assists users of the financial statements in analyzing operating results.

Use of Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expense during the reporting period. Actual results could differ from those estimates.

The significant estimates used in preparation of the financial statements are the determination of the allowances for losses on loans receivable, the allowance for losses on properties held for sale, and the allocation of functional expenses.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

2. **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Cash and Cash Equivalents - NWHP considers all highly liquid investments purchased with original maturities of three months or less and any certificates of deposit that do not contain material early withdrawal penalties to be cash equivalents.

Accounts, Government Grants, and Pledges Receivable - Accounts, government grants, and pledges receivable are stated at the amount management expects to collect.

Management reviews receivable balances at year end and establishes an allowance for doubtful accounts based on expected collections. Receivables are written off against the allowance when management determines the receivable will not be collected. Management determined that no allowance was necessary at September 30, 2017 or 2016.

Pledges and CDFI grant receivables of \$430,000 are expected to be collected in the year ending September 30, 2018.

Properties Held for Sale - NWHP acquires properties either by foreclosure of delinquent loans or direct purchase. The properties are then rehabilitated and sold to buyers who meet NWHP's criteria. Properties held for sale are recorded at cost, capitalized interest, plus certain holding costs like insurance, and reduced by an allowance for estimated losses.

At times, NWHP operates property acquired through foreclosure as rental property to minimize holding costs until the property can be sold.

Land Held in Trust – NWHP owns two lots in its land trust program. The lots are recorded at \$0. NWHP maintains title to the land underlying the land trust homes. The homeowner mortgages the physical housing structure. The homeowner leases the land for 99 years and pays a monthly land lease fee of \$30. When the owner sells the house, the seller receives 40% of appreciation, making the price to the next homeowner more affordable.

Loans Receivable and Allowance for Loan Losses - Loans are stated at the amount of unpaid principal, reduced by an allowance for loan losses. The loan receivable and undisbursed loan commitments (payables) are recognized at the time the loan is approved. As NWHP makes loan disbursements, undisbursed loan commitments are reduced.

Interest on loans is calculated using the simple interest method on the unpaid principal amount. Interest rates range from 0% to 9%. Interest is recorded when received.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
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2. **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Due on sale loans are noninterest bearing and due upon sale of the property. The due on sale loans acquired from GFCDC have been recorded net of a discount to reflect the fair value using an interest rate of 7% and a 30 year term. The loans are adjusted during the term for accretion of the discount.

The allowance for loan losses is established through a provision charged to expense. Loans are charged against the allowance for loan losses when management believes that the collectability of the principal is unlikely. Foreclosed loan balances are transferred to properties held for sale net of the related allowance.

The allowance is an amount that management believes will be adequate to absorb possible losses on existing loans that may become uncollectible, based on evaluations of the collectability of loans, value of collateral and prior loan loss experience. The evaluations take into consideration such factors as overall portfolio quality, review of specific problem loans, and current economic conditions that may affect the borrowers' ability to pay. Past due status is determined based on contractual terms.

Investments in LLC's - NWHP has noncontrolling interests in LLC's. These investments are recorded using the equity method of accounting and are not recorded below \$0 because NWHP has no other investments in LLC's and has no obligation to provide further funding.

Office Buildings and Equipment - Office buildings and equipment are stated at cost or fair value at date of donation in the case of donated property. Equipment costing greater than \$1,000 with an estimated useful life of two years or longer is capitalized. Depreciation is computed on the straight-line basis over the estimated useful life of each asset. The cost of maintenance and repairs is charged to income as incurred; significant renewals or betterments are capitalized. Absent explicit donor restrictions regarding how long contributed assets must be used, NWHP reports expiration of donor restrictions when the donated or acquired assets are placed into service.

Fiscal Agency Payable - NWHP periodically acts as an agent for grantors. It accepts assets from grantors and agrees to use those amounts to benefit specified beneficiaries. These transactions are not included in the statement of activities since NWHP has no discretion in determining how the funds are used. Such agency amounts collected are recorded as liabilities until released to the beneficiaries. NWHP is acting as an agent on behalf of NWA for funds originally awarded to another organization.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

2. **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Contributions - Contributions are recognized when the donor makes an unconditional promise to give. Contributions are recorded as unrestricted, temporarily restricted or permanently restricted support depending on the existence and/or nature of any donor restrictions. Contributions reported as temporarily restricted net assets are reclassified to unrestricted net assets upon expiration of the time or usage restriction. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized.

Donated Services and Materials - Donated services are recorded as contributions at their estimated fair value only if the services create or enhance a nonfinancial asset or if the services require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

NWHP regularly receives donated services from many volunteers. Amounts for these services that do not meet the criteria described above have not been recognized. No donated services were recorded in 2017 or 2016.

Donated materials are recorded as contributions at their estimated fair value in the period received. Donated construction materials valued at \$- and \$25,215 were received in 2017 and 2016 and are recorded in other contributions.

Government Grants and Contracts - Except for revolving loan funds discussed below, government grants and contract funds are generally considered exchange transactions and are recorded as revenue when earned. Revenue is earned when eligible expenditures, as defined in each grant or contract, are incurred. Funds received but not yet earned are recorded as deferred revenue.

CDFI grants are accounted for as contributions because they are nonreciprocal and are recognized as revenue when the Department of the Treasury makes an unconditional commitment. A portion of CDFI funds are used for revolving loans while the remaining cover administrative costs and are set aside as a loan loss reserve.

When government grants are for a revolving loan fund, a grant receivable and temporarily restricted revenue are recorded when a qualifying loan is approved and committed. Revenue does not necessarily match with a related expense because grant revenue is used to create loans receivable. CDBG and CDFI revolving loan funds are considered temporarily restricted net assets while NWA revolving loan funds are considered permanently restricted net assets.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

2. **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Interest income and loan fees related to CDBG funds are reported as temporarily restricted net assets; all other income and loan fees are reported as unrestricted net assets. A percentage of principal and interest received on loan repayments and on loan sales (none in 2017 or 2016) represents program income to NWHP which is released from temporary restricted to unrestricted. This program income is used to defray program expenses and to generate additional loans.

Sales of Properties - Sales of properties are recorded at the time of closing of the sale, when title to and possession of the property are transferred to the buyer. Cost of sales is based on direct costs.

Loan Fees - Loan fees are recorded as revenue upon closing of the loan.

Rental Revenue - Revenue from rents is recognized in the period earned.

Home Improvement Grants - Home improvement grants are made to homeowners to assist in acquisition or home improvements. The grants will be forgiven in five or ten years if the homeowner remains the owner throughout the term of the contract. Grants to homeowners are recorded in the period of award, except for grants that are subject to conditions which are recorded when the conditions have been substantially met. Grants are expensed when awarded since repayment is unlikely. Recoveries of grants are recorded as revenue when received.

Functional Expense Allocation - The majority of expenses can be directly identified with the program or supporting services to which they relate and are charged accordingly. Other expenses have been allocated among program and supporting services on the basis of employee work efforts.

Advertising - NWHP follows the policy of charging the costs of advertising to expense as incurred.

Income Taxes - CNHS and GFCDC are classified as tax-exempt organizations under Minnesota Statute 290.05 and Section 501(c)(3) of the Internal Revenue Code, are exempt from private foundation status under Section 509(a)(1) of the Internal Revenue Code, and are subject to income taxes only on net unrelated business income. Each files their own information return.

Rental income on one of the office buildings is subject to unrelated business income taxes because the office building is debt financed. No income taxes were paid in 2017 or 2016. Management believes neither CNHS or GFCDC have any uncertain tax positions. See Note 13.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
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2. **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Fair Value Measurements - NWHP determines fair value, when necessary, based on the assumptions that market participants would use when pricing the asset or liability. Valuation inputs are categorized using the following fair value hierarchy:

- Level 1 - quoted prices (unadjusted) in active markets for identical assets or liabilities;
- Level 2 - inputs that are observable, directly or indirectly, other than the quoted prices included in Level 1; and
- Level 3 - unobservable inputs.

Properties held for sale are valued using Level 2 inputs based on expected sale prices or values from the county real estate tax assessor, less estimated costs to sell.

Comparative Totals - The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with NWHP's financial statements for the year ended September 30, 2016, from which the summarized information was derived.

Reclassifications - Reclassifications were made to the 2016 financial statements to be consistent with the current year financial statements. These reclassifications did not affect net assets or the change in net assets.

3. **CASH – RESTRICTED FOR PROGRAMS**

Cash – restricted for programs consist of:

	<u>2017</u>	<u>2016</u>
Home ownership and development	\$ 165,195	\$ 65,195
Down payment assistance	720,000	-
Loans and grants	<u>1,232,821</u>	<u>2,632,185</u>
	<u>\$2,118,016</u>	<u>\$2,697,380</u>

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
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4. PROPERTIES HELD FOR SALE

Properties held for sale consist of the following:

	2017	2016
Properties held for sale	\$ 473,223	\$ 202,511
Less allowance for estimated losses	(50,483)	(50,483)
	\$ 422,740	\$ 152,028
 Number of properties	 5	 4

NWHP capitalizes interest incurred on rehabilitation and construction projects. Interest of \$3,666 was capitalized on the properties held for sale in 2017. No interest was capitalized on the properties held for sale in 2016.

5. LOANS RECEIVABLE

The following table presents loans by portfolio segment:

	2017	2016
First mortgage loans	\$ 557,958	\$ 718,969
Second mortgage loans	105,970	234,446
Home improvement loans	2,719,998	2,465,594
Due on sale loans	3,973,628	3,576,613
 Total loans receivable	 7,357,554	 6,995,622
Less discount on GFCDC due on sale/MURL loans	(863,105)	(899,514)
Less allowance for loan losses	(97,566)	(97,566)
 Loans receivable, net	 \$ 6,396,883	 \$ 5,998,542

All loans are individually reviewed for impairment.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
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5. LOANS RECEIVABLE (Continued)

The following table presents the aging of loans by portfolio segment:

	2017				Total	2016
	First Mortgage Loans	Second Mortgage Loans	Home Improvement Loans	Due on Sale Loans		
Current	\$ 557,958	\$ 81,149	\$ 2,579,532	\$ -	\$ 3,218,639	\$ 3,249,087
30 – 59 days	-	-	8,264	-	8,264	-
60 – 89 days	-	-	37,014	-	37,014	43,094
90 + days	-	24,821	95,188	-	120,009	126,828
Due on sale	-	-	-	3,973,628	3,973,628	3,576,613
Total	<u>\$ 557,958</u>	<u>\$ 105,970</u>	<u>\$ 2,719,998</u>	<u>\$ 3,973,628</u>	<u>\$ 7,357,554</u>	<u>\$ 6,995,622</u>

The following table presents the allowance for loan losses by portfolio segment:

	2017				Total	2016
	First Mortgage Loans	Second Mortgage Loans	Home Improvement Loans	Due on Sale Loans		
Beginning balance	\$ -	\$ 5,324	\$ 58,698	\$ 33,544	\$ 97,566	\$ 224,556
Provision	-	-	7,620	62,669	70,289	58,822
Recoveries	-	-	10,080	4,000	14,080	27,611
Loans charged off	-	-	(17,700)	(66,669)	(84,369)	(213,423)
Ending balance	<u>\$ -</u>	<u>\$ 5,324</u>	<u>\$ 58,698</u>	<u>\$ 33,544</u>	<u>\$ 97,566</u>	<u>\$ 97,566</u>

NWHP has two loans under the Minnesota Urban and Rural Homesteading Program (MURL). NWHP used the MURL funds to acquire homes. The homes were sold to a qualified low income individual on a contract for deed basis. Principal payments collected by NWHP are used to acquire additional properties, pay program related administrative expenses, bring a property back into code compliance, or refunded to the grantor if requested. The contracts for deed are included in First Mortgage loans receivable and temporarily restricted net assets on the accompanying financial statements.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

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6. INVESTMENTS IN OTHER ENTITIES

NWHP owns a 50% investment in Frogtown Development, LLC. Frogtown Development, LLC provides affordable rental housing in Saint Paul, Minnesota. This investment is accounted for using the equity method. As of September 30, 2017 and 2016, the recorded amount of the investment was \$0 and \$48,794 and NWHP had no balances due from the LLC.

NWHP has a 30% ownership in NEDU, LLC. NEDU, LLC owns and operates a commercial building in Saint Paul, Minnesota. As of September 30, 2017 and 2016, the recorded amount of the investment was \$0 and NWHP had no balances due from the LLC.

NWHP does not have a controlling interest in these entities and, accordingly, NWHP has not consolidated these entities.

7. OFFICE BUILDINGS AND EQUIPMENT

Office buildings and equipment consist of the following:

	2017	2016	Estimated useful life in years
Land	\$ 115,300	\$ 165,300	-
Office buildings	122,500	355,709	5 - 39
Building and land improvements	31,279	99,033	5 - 39
Equipment	45,675	49,232	3 - 5
	314,754	669,274	
Less accumulated depreciation	(32,909)	(196,713)	
	\$ 281,845	\$ 472,561	

NWHP sold the land and office building located at 35 Water Street during 2017.

8. REVOLVING TERM NOTE/LINE OF CREDIT

NWHP had a revolving term note from Associated Bank for up to \$400,000 with interest at the prime rate plus 1.00% which matured September 24, 2017. The note was secured by deposits at Associated Bank.

(Continued)

**COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

9. **NOTES PAYABLE**

Notes payable consists of the following:

	2017	2016
Saint Paul Housing and Redevelopment Authority (HRA)	\$ 57,265	\$ 57,265
Coulee Bank	197,417	-
Local Initiatives Support Corporation (LISC)	50,000	50,000
	\$ 304,682	\$ 107,265

Saint Paul HRA - NWHP has mortgage loans from the City of Saint Paul Housing and Redevelopment Authority (HRA) to finance the acquisition, construction, or rehabilitation of houses. Loans are non-interest bearing. Upon the sale of the houses to a qualified homebuyer, the loans are forgiven. This loan was forgiven in 2018 (See Note 19).

Coulee Bank - NWHP has a Line of Credit with Coulee Bank that enables them to borrow up to \$500,000 at an interest rate of prime + 1.75% (5.25% at September 30, 2017), and was due March 10, 2017. Advances are used for the acquisition, construction or rehabilitation of houses. The line of credit has a 12 month term with interest-only payments due monthly and is secured by the property. This loan was paid off in 2018 (See Note 19).

LISC - NWHP holds a \$20,000 non-interest bearing note from Local Initiatives Support Corporation (LISC) to be used for housing rehabilitation. The principal is due on the receipt of proceeds from the sale of the homes if requested by LISC.

NWHP holds a \$30,000 non-interest bearing note to be used for predevelopment costs associated with the GFCDC/PPL Frogtown Stabilization Partnership. GFCDC and PPL are 50% members of Frogtown Development LLC which purchases, rehabilitates, and sells homes located in the Frogtown neighborhood of Saint Paul. The principal is due upon closing of permanent funding for the project if requested by LISC.

Greater Metropolitan Housing Corporation - NWHP has a financing agreement with Greater Metropolitan Housing Corporation (GMHC) under the Inspiring Communities Program. GMHC will provide acquisition and construction financing and will be repaid at the time the home is sold. GMHC will jointly own the properties with GFCDC. The interest rate is at GMHC's normal borrowing rate. No funds are outstanding as of September 30, 2017 and 2016.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

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10. LONG-TERM DEBT

Long-term debt consists of the following:

	2017	2016
Note payable to the U.S. Department of the Treasury with interest at 2.0%. Interest only is payable quarterly and the note matures June 17, 2023. Unsecured.	\$ 350,000	\$ 350,000
Equity equivalent note payable to Wells Fargo with interest at 2.0%. Interest is payable quarterly. The note matures October 4, 2022. The maturity date will automatically extend for two years unless NWHP delivers a written request not to extend. Upon extension, eight quarterly principal payments of \$43,750 will be due beginning January 15, 2023. Unsecured.	350,000	350,000
Note payable to Midwest Minnesota Community Development Corporation with interest at 2.5%. Interest is payable monthly beginning May 1, 2015. Principal and interest payments of \$2,001 are payable quarterly beginning September 1, 2016. The note matures April 1, 2030. Secured by the loans that NWHP has funded with the proceeds of the loan.	93,964	98,215
Note payable to the Otto Bremer Trust (a nonprofit organization) with interest at 1.5%. Interest payments of \$3,750 are payable quarterly beginning March 21, 2016. The note matures December 21, 2022. Unsecured.	1,000,000	1,000,000
Mortgage payable to Sunrise Banks. The mortgage is payable in monthly installments, including interest at an initial rate of 4.5% (adjusted on May 5 in the years 2013, 2018, 2023 and 2028 to a rate equal to 67% of the sum of 411 basis points plus the then current rate of the Treasury Constant Maturities Index for five year obligations as reported by the Federal Reserve for the preceding month, not to exceed 7.02% (effective rate of 3.223% at September 30, 2017)), maturing May 2033. The mortgage is secured by the Dale Street building.	336,881	353,271
	\$2,130,845	\$2,151,486

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

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10. LONG-TERM DEBT (Continued)

The following is a schedule of maturities of long-term debt as of September 30:

2018		\$	16,913
2019			17,447
2020			18,038
2021			18,628
2022			19,237
Thereafter			<u>2,040,582</u>
			<u><u>\$ 2,130,845</u></u>

11. NET ASSETS

Temporarily restricted - Temporarily restricted net assets are primarily restricted for programs and deferred loans to assist homeowners/buyers in acquisition or home improvements. Funding comes from the City of Saint Paul, NWA, and the Department of the Treasury. A significant portion of these assets would be returned to the respective agencies if NWHP were to terminate operations.

Temporarily restricted net assets consisted of the following:

	<u>2017</u>		<u>2016</u>
Time restricted pledges for general operations	\$ -		\$ 50,000
LISC Vacant Lot Reclamation Project	30,000		60,000
McKnight Foundation First Mortgage Lending Program	-		25,000
Down payment assistance	720,000		-
Affordable Home Ownership Expansion Project	15,195		15,195
Loan and grant program:			
MURL revolving loan fund	260,284		260,284
CDFI	881,768		910,000
City of Saint Paul lending program	<u>4,300,333</u>		<u>3,559,906</u>
	<u><u>\$ 6,207,580</u></u>		<u><u>\$ 4,880,385</u></u>

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

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11. NET ASSETS (Continued)

Permanently restricted - Net assets are permanently restricted for revolving loan funds. Permanently restricted net assets are from NWA. During 2017 and 2016, NWA approved the release of \$520,000 and \$335,932 from permanently restricted net assets. A significant portion of these assets would be returned to NWA if NWHP were to terminate operations.

12. NEIGHBORHOODLIFTSM

NWHP participates in the NeighborhoodLIFTSM program. The program is a collaboration between Wells Fargo Bank, N.A.; Wells Fargo Foundation; NeighborWorks America; and local non-profit organizations including NWHP.

NWHP received repayments from loans originated by another NeighborWorks America affiliate under this program. These funds were recorded as a fiscal agency payable at September 30, 2016. During 2017, NWHP collected \$88,500 in LIFT payoffs prior to NeighborWorks America releasing the funds to NWHP without any restrictions.

In 2016, NWHP entered into a \$4,000,000 grant agreement with NeighborWorks America to assist low-to-moderate income persons with down payment assistance grants through the NeighborhoodLIFTSM program. For each grant provided, NWHP receives a \$1,400 administrative fee. NeighborWorks America advanced \$4,000,000 (\$2,400,000 in 2016 and \$1,600,000 in 2017) from which \$811,500 in grants were provided and NWHP earned \$154,000 in administrative fees during 2016 and \$2,300,000 in grants were provided and NWHP earned \$438,200 in administrative fees during 2017. The remaining balance of \$296,300 is recorded as deferred revenue.

13. LEASES RECEIVABLE

NWHP rented portions of its buildings to tenants. All but one of these leases were month-to-month. Rental revenue from the office buildings was \$47,639 in 2017 and \$69,613 in 2016.

During 2017, NWHP sold the property at 35 Water Street for \$500,000. Prior to selling 35 Water Street, NWHP terminated the leases at 533 Dale and consolidated its office staff into one location.

NWHP operates foreclosed properties as rental property to minimize holding costs until the property can be sold. Lease terms do not exceed one year. Rental revenue from foreclosed properties was \$9,540 in 2017 and \$9,540 in 2016.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

14. CONCENTRATIONS

NWHP maintains its cash in accounts at seven financial institutions. At times balances may exceed federally insured limits. NWHP has not experienced any losses as a result of these deposits. At September 30, 2017, deposits exceeded the insured limit by \$681,767.

Loans receivable are primarily secured by properties located in Saint Paul, Minnesota. This geographic concentration subjects NWHP to a credit risk.

NWHP has entered into "Master Repurchase Agreements" (sweep accounts) with two banks, whereby amounts on deposit in the accounts are, at the close of each business day, used to purchase securities/bonds. These securities/bonds are not insured by the Federal Deposit Insurance Corporation; however, the banks agreed to repurchase these securities/bonds at cost and credit the general operating bank accounts the following business day. Sweep account balances were \$4,313,059 at September 30, 2017, and \$4,390,018 at September 30, 2016.

NWHP received 50% of total support and revenue from the NeighborhoodLIFTSM program, 18% from NWA, and 18% from the City of Saint Paul in 2017.

NWHP received 18% of total support and revenue from the NeighborhoodLIFTSM program, 19% from CDFI, and 9% from the City of Saint Paul in 2016.

15. RELATED PARTY TRANSACTIONS

Three board members are employees of banks that NWHP uses for deposits or borrowing.

16. EMPLOYEE BENEFIT PLANS

The Board of Directors has authorized an employer contribution of 4% of employee gross salary to each eligible employee's simplified employee pension plan. The plan covers permanent employees employed over six months who work over 30 hours per week. The contribution charged to expense was \$23,449 in 2017 and \$21,918 in 2016.

(Continued)

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended September 30, 2017
(With Comparative Information for 2016)

17. CONDITIONAL CONTRIBUTION

During 2017, NWHP received a grant from NWA for the Project Reinvest: Homeownership program. The program will provide housing counseling and foreclosure prevention trainings. The total amount of the award is \$1,200,000. NWHP received \$720,000 in 2017. The remaining \$480,000 will be paid when NWHP meets certain conditions as stipulated in the grant agreement. Because of the conditional nature of the commitment, this payment has not been recorded in the financial statements.

18. CONTINGENCIES AND COMMITMENTS

Compliance Regulations - Governmental program activities are subject to financial and compliance regulations. To the extent that any expenditures are disallowed or other compliance features are not met, a liability to the grantor agency could result.

Fidelity Bond - NWHP has \$1,000,000 of directors and officer liability insurance, plus \$1,000,000 of employment practices liability insurance coverage.

NWHP has contracts with the Minnesota Home Ownership Center and the City of Woodbury HRA to provide lending program services. The contracts expire September 30, 2018, and December 31, 2020. In addition, NWHP has ongoing contracts with Minnesota Housing Finance Agency to provide services for its Rehabilitation, Emergency and Accessibility, and Fix Up Loan Programs.

19. SUBSEQUENT EVENTS

Effective December 1, 2017, NWHP outsourced the servicing of its amortizing loan portfolio to Sunrise Banks.

In January 2018, NWHP sold a property held for sale for \$325,000. The note payable to Coulee Bank was paid off with the proceeds and the note payable to the St. Paul HRA was forgiven.

Management has evaluated subsequent events through March 22, 2018, the date on which the financial statements were available for issue, and identified no further significant events or transactions to disclose.

SUPPLEMENTARY INFORMATION

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATING STATEMENT OF FINANCIAL POSITION

September 30, 2017

	CNHS	GFCDC	Eliminations	Total
ASSETS				
Cash	\$ 3,802,019	\$ 359,881	\$ -	\$ 4,161,900
Cash - restricted for programs	2,118,016	-	-	2,118,016
Accounts and government grants receivable	207,440	-	(100,000)	107,440
Pledges receivable	30,000	-	-	30,000
CDFI grant receivable	400,000	-	-	400,000
Prepaid expenses	19,134	-	-	19,134
Properties held for sale, net	42,089	380,651	-	422,740
Loans receivable, net	6,396,883	-	-	6,396,883
Office buildings and equipment, net	56,295	225,550	-	281,845
	<u>\$ 13,071,876</u>	<u>\$ 966,082</u>	<u>\$ (100,000)</u>	<u>\$ 13,937,958</u>
Total assets				
LIABILITIES AND NET ASSETS				
Accounts payable and accrued expenses	\$ 26,851	\$ -	\$ -	\$ 26,851
Payroll liabilities	84,047	-	-	84,047
Undisbursed loan commitments	322,697	-	-	322,697
Security deposits and escrow liabilities, net	5,493	-	-	5,493
Deferred NeighborhoodLIFT grant	296,300	-	-	296,300
Notes payable	-	404,682	(100,000)	304,682
Long-term debt	1,793,964	336,881	-	2,130,845
Total liabilities	<u>2,529,352</u>	<u>741,563</u>	<u>(100,000)</u>	<u>3,170,915</u>
Net assets:				
Unrestricted	3,136,743	209,324	-	3,346,067
Temporarily restricted	6,192,385	15,195	-	6,207,580
Permanently restricted	1,213,396	-	-	1,213,396
Total net assets	<u>10,542,524</u>	<u>224,519</u>	<u>-</u>	<u>10,767,043</u>
Total liabilities and net assets	<u>\$ 13,071,876</u>	<u>\$ 966,082</u>	<u>\$ (100,000)</u>	<u>\$ 13,937,958</u>

See independent auditor's report.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

CONSOLIDATING STATEMENT OF ACTIVITIES

For the Year Ended September 30, 2017

	CNHS	GFCDC	Eliminations	Total
Support and revenue:				
Contributions:				
NeighborWorks® America	\$ 1,098,394	\$ -	\$ -	\$ 1,098,394
Government grants	342,005	-	-	342,005
Other contributions	55,971	-	-	55,971
Revenue:				
The NeighborhoodLIFT	2,738,200	-	-	2,738,200
Loan interest	157,498	-	-	157,498
Loan servicing and origination fees	116,780	-	-	116,780
Other revenue	33,534	-	-	33,534
Rental revenue	42,799	14,380	-	57,179
Investment income	5,042	-	-	5,042
	4,590,223	14,380	-	4,604,603
Total revenue and support				
Expenses:				
Program services:				
Loan and grant program	3,307,242	-	-	3,307,242
Homebuyer education	202,811	-	-	202,811
Real estate development	-	82,166	-	82,166
Total program services	3,510,053	82,166	-	3,592,219
Management and general	469,036	-	-	469,036
Fundraising	28,757	-	-	28,757
	4,007,846	82,166	-	4,090,012
Total expenses				
Change in net assets before nonoperating activity	582,377	(67,786)	-	514,591
CDFI and government grants for loans	902,967	-	-	902,967
Gain of sale of 35 Water	241,765	-	-	241,765
LIFT fiscal agency funds released	296,783	-	-	296,783
Transfer of assets between entities	(199,316)	199,316	-	-
Loss from investment in other entities	-	(48,794)	-	(48,794)
	1,824,576	82,736	-	1,907,312
Change in net assets				
Net assets:				
Beginning of year	8,717,948	141,783	-	8,859,731
End of year	\$10,542,524	\$ 224,519	\$ -	\$10,767,043

See independent auditor's report.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

STATEMENT OF FINANCIAL POSITION
FOR NEIGHBORWORKS® AMERICA FUNDS

September 30, 2017

ASSETS

Cash and cash equivalents	\$ 677,235
Cash - restricted for programs	214,269
Loans receivable, net	<u>987,194</u>
Total assets	<u>\$ 1,878,698</u>

LIABILITIES AND NET ASSETS

Undisbursed loan proceeds and escrowed client funds	\$ 14,172
Total liabilities	<u>14,172</u>
Net assets:	
Unrestricted	651,130
Permanently restricted - NWA	<u>1,213,396</u>
Total net assets	<u>1,864,526</u>
Total liabilities and net assets	<u>\$ 1,878,698</u>

See independent auditor's report.

COMMUNITY NEIGHBORHOOD HOUSING SERVICES, INC.
dba NEIGHBORWORKS HOME PARTNERS

STATEMENT OF ACTIVITIES
FOR NEIGHBORWORKS® AMERICA FUNDS

For the Year Ended September 30, 2017

Support and revenue:	
Support:	
NWA capital grant	\$ -
NWA expendable grants	378,394
Total support	<u>378,394</u>
Revenue:	
Loan interest	68,398
Service and origination fees	989
Total revenue	<u>69,387</u>
Total support and revenue	<u>447,781</u>
Expenses:	
Revolving loan fund	589,387
Expendable grants	<u>378,394</u>
Total expenses	<u>967,781</u>
Change in net assets	(520,000)
Net assets:	
Beginning of year	<u>2,384,526</u>
End of year	<u><u>\$ 1,864,526</u></u>

See independent auditor's report.

Jason Peterson

1279 Osage Street St. Paul, MN 55117
651-334-2605 / jasonlawrencepeterson@gmail.com

Work History

- Present – January 2011*
Executive Director, NeighborWorks Home Partners, St. Paul, MN
Administer a 17 person non-profit community development organization with a current annual budget of \$1.6mm and assets of \$13mm which provides homeownership counseling and education and community development lending programs to low to moderate income families living in the Twin Cities metro area. Responsible for all aspects of the operations of the agency including: board administration and support, program, product and service delivery oversight, financial, tax, risk and facilities management, community reinvestment act (CRA) relations, human resource management and marketing and public relations.
- January 2011 – November 2008*
Program Manager 2, Family Service Center/Housing Crisis Response, Catholic Charities, MN
Provided leadership for two large programs working with low to moderate income and homeless families in the Twin Cities and was responsible for managing all aspects of the operations of these programs including: supervision and oversight of 27 combined employees, developing and maintaining a combined annual budget of over \$2 million, grant writing, grant compliance and reporting, developing and analyzing program policies, HMIS reporting, communication with funders and community leaders, donor relations, fundraising, community advocacy and support and volunteer recruitment, training and supervision.
- November 2008 - January 2008*
Housing Specialist, Amherst H. Wilder Foundation, St. Paul, MN
My duties included working with a caseload of approximately thirty homeless families on locating and maintaining permanent housing, administering HTF rental subsidies, ensuring compliance with subsidy requirements, building and maintaining housing and community contacts and completing HQS inspections.
- January 2009 - May 2002*
District Court Counselor/Jail Screener, Project Remand, St. Paul, MN
My duties consisted of interviewing defendants, preparing bail evaluation and release forms, making recommendations to the court, supervising a caseload of sixty conditionally released defendants and, when applicable, releasing qualified defendants on their own recognizance or under specified conditions.
- May 2007 - May 2006*
Law Clerk, Hennepin County Public Defenders Office, Minneapolis, MN
I was generally responsible for the support and assistance of both the juvenile and adult criminal trial attorneys of the office. My duties largely consisted of researching legal issues and writing motions and memorandums of law to the court regarding these issues.
- July 2004 - March 2003*
Shelter Manager, Our Saviour's Housing, Minneapolis, MN
I was responsible for managing and directing all aspects of the operations and programs of a 40 bed adult homeless shelter. My responsibilities included: hiring, training and managing a staff of eight employees, ensuring that the policies and rules of the shelter were updated and implemented, developing and maintaining a budget, training and supervising volunteers, and implementing and maintaining HMIS.
- March 2003 - December 2001*
Case Manager, Our Saviour's Housing, Minneapolis, MN
My duties consisted of assisting homeless adults on issues related to employment, housing, chemical and mental health as well as advocating for affordable housing in the larger community.

Education

- 1997-2001*
Bachelor of Arts Degree, University of Minnesota Duluth, Anthropology/Sociology Double Major with a Philosophy Minor; 3.27 Cumulative GPA; Dean's List Spring 1998, Fall 1998, Spring 2000.
- 2004-2007*
Juris Doctorate Degree, Hamline University School of Law, St. Paul, MN; 3.33 Cumulative GPA; Dean's List: Spring 2006, Fall 2007, Spring 2007.

Volunteer Experience and Relevant Trainings

- Supervisors Training – University of St Thomas, Center for Non-Profit Management, 2003
- Board Member – Hennepin County Family Homeless Prevention and Assistance Program, 2003-2004.
- Minnesota Justice Foundation Volunteer – Volunteer Lawyers Network, Simpson Housing, 2005-2006.
- Active Member – Metropolitan Consortium of Community Developers, 2010-Present.
- Active Member, NeighborWorks America HomeOwnership Advisory Committee, 2015 – Present

Kjirsten Johnson

(651) 900.9708 • Kjirsten2@gmail.com

ACCOUNTING AND FINANCE PROFESSIONAL

- Budgeting and forecasting
- Month and Year-end reporting
- Audit and compliance reporting
- Board and Finance Committee reporting
- Human Resource, Information Technology and Project management
- Accounting and operational process development
- Treasury and banking relationship management

PROFESSIONAL EXPERIENCE

Hennepin Theatre Trust, Minneapolis, Minnesota

2008 - Present

Hennepin Theatre Trust is the nonprofit owner of the State, Orpheum, Pantages and New Century Theatres in downtown Minneapolis. The Trust is a presenter and producer of theatrical engagements, as well as a leader in creating the West Downtown Minneapolis Cultural District.

Chief Financial Officer (10/2012 – Present)

Responsible for the oversight of all finance and accounting activities, including banking, Board and Finance Committee reporting and audit management. Primary contracting and compliance officer for the organization, including management of insurance renewals and review and execution of artist, contractor, service and grant contracts. Managed all aspects of human resource functions from payroll to insurance renewals. Member of leadership team since creation and supported growth in the organization from 12 to 32 full time and one to 25 part-time/occasional employees. Manage team: Accounting Manager and Accounting Assistant.

- Migrated Great Plains accounting software to FinancialForce, a Salesforce native general ledger package, to integrate organization-wide information flow.
- Facilitated the securing of \$2.8 million in debt financing from the City of Minneapolis to support a property acquisition.
- Outsourced human resources and payroll functions resulting in more efficient utilization of internal resources and a reduction of administration. This change created capacity in the accounting department that was redirected toward functions that were more critical to supporting growth of the organization.
- Participated as a team member in a ten organization initiative to increase diversity and inclusivity in programming, human resources and organizational governance within the ten largest cultural organizations in the Twin Cities.
- *Accounting and Reporting Software:* Salesforce, FinancialForce, Microsoft Great Plains, FRx, ADP Resource reporting, Etlx, Microsoft Excel.

Controller (10/2008 – 10/2012)

Responsible for all aspects of finance and accounting, including budgeting, reporting, human resource management, information technology and institutional compliance. Oversaw New Century Theatre management, a black box theatre created to house the organization's educational initiatives and local theatre community outreach, including the financial, operations and the ticketing functions. Managed team: Accounting and Payroll Associate, New Century Theatre Operations Manager, Interactive Marketing Manager.

- Managed design and construction of New Century Theatre.
- Developed and executed internal show reconciliation process to ensure the proper distribution and receipt of funds for Broadway, concerts and internally-produced shows.
- Initiated budgeting process.
- Outsourced information technology to Success Computer Consulting. Led development of initial technology plan for the Trust.
- *Accounting and Reporting Software:* Microsoft Great Plains, FRx, Ticketmaster's TM360 accounting-based reporting, ADP's Workforce Now reporting, Microsoft Excel

Kjirsten Johnson

(651) 900.9708 • Kjirsten2@gmail.com

Window to the World Communications, Inc., Chicago, Illinois 2003 to 2006
Window to the World Communications is committed to creating and presenting unique television and digital media content. As the nonprofit owner of WTTW11, a Chicago-based public television station, and WFMT98.7, a Chicago-based classical radio station, the organization strives to develop, create and broadcast engaging and educational programming for public media stakeholders.

Director of Finance

Supervised the development of annual budgets, project-specific budgets and quarterly forecasts for Broadcasting, On-Air Pledge, and Local and National Productions of WTTW11, as well as the bi-weekly processing of payroll and accounts payable for WTTW11 and WFMT98.7. Coordinated with internal and external production partners to establish and execute production contracts, budgets and financial reporting. Managed team: Payroll Coordinator and Accounting Payable Coordinator.

- Designed and implemented process and control procedures to ensure efficient processing of and safeguards over the disbursements process.
- Designed and implemented a project analysis process for programs in development for the National Productions Team to ensure pipeline projects met organizational and team objectives.

KPMG, LLP, Chicago, Illinois 1997 to 2002
KPMG is a "Big 4" public accounting firm providing Audit, Tax and Advisory services globally.

Assurance Manager

Planned, executed, and supervised audits and special projects for a variety of new and existing client engagements in the real estate (property/property management, construction, gaming, hospitality, low income housing), not for profit, banking and fund management lines of business. Ensured firm audit methodology was properly incorporated into audit strategy, as well as preparation of risk analysis, developing budgets, and fee and hour estimates. Managed teams ranging from one to fifteen team members, including one of the largest audit engagements in the Chicago real estate group (National Equity Fund).

- Selected for and participated in a three-month international rotation assignment to Melbourne, Australia.
- Selected for and acted as a National Instructor for the Assurance Fundamentals course, a weeklong course designed to introduce new staff to the firm and to the firm audit methodology.
- Promoted one year early to level of Manager.

EDUCATION

Columbia College Chicago, Chicago, Illinois June 2007
Masters of Art Management, Television and Film, GPA 3.95

Kelley School of Business, Indiana University, Bloomington, Indiana May 1997
Bachelor of Science in Business, Major Accounting, GPA 3.55

- Beta Alpha Psi, honorary accounting fraternity

ADDITIONAL

Certified Public Accountant (Inactive)

- November 1997 (passed all parts on first attempt)

Finance & Commerce

- Top Women in Finance Honoree, 2016

Eastview Athletic Association

- Team Manager 2013 - current

Beth Hyser

1299 Earl Street, Saint Paul, MN 55106
Phone: (651) 771-2004, bethhyser@aol.com

QUALIFICATIONS

Grant Writing and Fund Development

- Research options for funding prospects and develop funder relationships
- Create fund raising calendar, create and track proposals, prepare reporting as required by funder
- Secure multi-year, annual, and one-time grants from public, private, and corporate funders to sustain \$500,000 budget (McKnight Foundation, Local Initiatives Support Corporation, Pew Charitable Trusts, St. Paul Foundation, Federal Home Loan Bank, University of Minnesota)
- Design, secure, coordinate city/federal financing programs for housing rehab programs (City of St. Paul, CDBG, HUD, MHFA, STAR)
- Create a variety of communications tools such as annual reports, newsletters, handouts, and media messaging to build relationships and encourage community and donor engagement
- Coordinate monthly donor renewals and annual appeals to individuals and organizations

Project Management-Community Development

- Design, secure, and administer financing and grant programs including outreach, review, disbursement, reporting for housing rehab programs and general operating
- Co-coordinate privately funded down/closing cost/rehab fund for Abbott Northwestern Hospital
- Work with board and executive committee to review program progress and annual work plans
- Oversee design, financing, plan review, bidding, and construction of single family housing rehab and new construction to exceed city building standards
- Managed rent-to-own housing program for 10 families which included property management, rental code compliance, city inspections, and support services for residents
- Co-sponsor of a two-year comprehensive community planning process in the Hamline-Midway neighborhood of St. Paul engaging community, organizations, businesses, and government
- Coordinate exhibitor and recruitment, marketing, and workshops for the annual Greater Midway Home & Garden Show - 450 attendees
- Coordinate large mailings to constituents and oversee data entry into online database
- Supervise staff, interns, and volunteers to coordinate projects and events

Communication

- Extensive customer service experience and public speaking including troubleshooting and referrals
- Excellent written skills - grant writing, reports, outreach materials, multi-media messaging
- Conduct interviews, internet searches, and synthesize information into various reporting formats
- Experience with PC and Mac Microsoft Office, Google Drive, FileMaker, E-Tapestry databases
- Mediate conflict with staff, community people, contractors, and customers
- Background working with diverse cultural and age groups in nonprofit companies
- Attended college in Liberia, West Africa - Cultural Immersion Program

Education/Training

University of St. Thomas, St. Paul, MN - B.A. in Speech Communication, 1988
Cuttington University College - Student Exchange Program, Liberia, West Africa, 1987
Project Development Program, Development Training Institute & Local Initiatives Support Corp., 1999
Neighborhood Leadership Training Program, Amherst H. Wilder Foundation, 2008

Professional Experience

- Program Coordinator** – Catholic Rural Life, St. Paul MN – 1/2011 – present
Coordinate outreach and special projects, outreach and coaching to applicants of national grant program, oversee donor renewals and annual appeals, coordinate E-Tapestry online database, assist with event planning, supervise student interns, and utilize Google for Nonprofits.
- Administrative Assistant** - Flannery Construction, St. Paul, MN 5/10-7/10, 8/10-10/10 (PT Temp.)
Coordinate compliance with Certified Payroll Reporting, tracking/filing lien waivers, general office tasks using Microsoft Office, answer phones, filing, process mail.
- Researcher** - Neighborhood Development Alliance, St. Paul, MN 4/09-11/09 (Consulting Contract)
Conducted internet research, interviews, and wrote final research paper on feasibility of converting duplex homes into condos.
- Event Coordinator** - Greater Midway Home & Garden Show - Sparc, St. Paul, MN Spring 2004-09
Developed vendor database, produced all written and electronic communication, extensive cold calling for vendor recruitment, solicited workshop presenters and volunteers, analyzed feedback from customers and vendors. (Seasonal Consulting Contract)
- Education Assistant** - Cooperating Community Programs - St. Paul, MN - 2/2004-09 One-to-one tutoring with a student with learning disabilities.
- Executive Director** - Hamline Midway Area Rehabilitation Corporation, St. Paul, MN 1/1995- 7/2002
Directed activities and staff and volunteers of neighborhood based, community development corporation focused on housing. Raised and managed \$500,000 budget and staff of three. Operated multiple grant/loan programs including outreach, application review, and disbursement.
- Manager, Home Ownership Program**- Project for Pride in Living (PPL), Minneapolis, MN 7/92 - 10/94
Managed rent-to-own housing program for 10 families. Operated home buyer grant program.
- Employment Specialist** – Project for Pride in Living, Minneapolis, MN 3/1990-7/1992
Provided employment and education planning assistance for low income families.

Community Activities

- Chair** - Blue & Green Spring Fling Gala Fundraiser - 2014 (raised \$46,000); **Co-Chair** – 2010 Harvest Fest Fundraiser (300 people) - Maternity of Mary/St. Andrew School, St. Paul, MN
- Coach** - Neighborhood Leadership Program, Wilder Foundation - 11/09 – 4/2012
- Advisory Committee**-Neighborhood Partnerships for Community Research –CURA/U of MN- 2000-13
- Dayton's Bluff Early Childhood Family Education Parent Council** - Treasurer – 8/2005 – 7/2007 .
- Steering Committee, Vice President** (2003) St. Paul Community GIS Consortium - 2000-2003
- Member & Housing Committee Chair** - St. Paul Coalition for Community Development -1995-2001
- Board Member** - Minnesota Housing Partnership - 1995/96
- Steering Committee Member** - St. Paul Area Coalition for the Homeless - 1 year
- English Teacher** (10th & 11th grades) - Phebe Community Lutheran School - Liberia, West Africa

Beth Hyser

Phone: (651) 771-2004

bethhyser@aol.com

Marie Malrick

10312 Sunset Avenue
Circle Pines, MN 55014
(763)786-6960
mariemalrick@gmail.com

Career Summary: A Program Administrator with over 15 years' experience with a nonprofit in mortgage lending, working with low-to-moderate income homeowners. Possesses a Bachelor's Degree in Urban Studies.

EMPLOYMENT:

Program Administrator - Greater Metropolitan Housing Corporation, MPLS, MN March 2000-Present
Oversee and facilitate the administration of contracted home improvement programs including CDBG programs with Ramsey County, Washington County and the City of Coon Rapids also specific city programs in Ramsey County and MHFA home improvement programs. The responsibilities included guidance to staff, processing and reviewing loan applications, underwriting through the loan closing, maintaining statistical information and presenting updates and reports to the funders regarding the status of their programs. My skills include ability to read, analyze and interpret technical procedures and government regulations. Additional skills include working with Microsoft Office including word, excel spreadsheets and mortgage software such as Encompass.

Mortgage Loan Originator – License 583291 January 2012-present, completed continuing education requirement for 2017

EDUCATION:

Student - Hamline University, St. Paul, MN 1995-1997
Urban Studies Major, Bachelors degree graduated in May 1997 with honors 3.75 GPA
HECUA (Higher Education Consortium for Urban Affair/Metro Urban Studies Term) Fall 1996

Student - Anoka Ramsey Community College, MN – A.A. degree 1991-1995

VOLUNTEER EXPERIENCE:

Volunteer - Alexandra House, Blaine MN 1997
Provide support to battered woman and their children

Volunteer – Turtle Lake Elementary, Mounds View, MN 2005-present
Reading Buddies, lunchtime reading program

EMPLOYMENT HISTORY:


Intern - Dayton's Bluff Neighborhood Housing Services, Inc., St. Paul, Fall/Winter 1996
Successfully ascertained petition signatures for rezoning several parcels of land
Attend community meetings, organized survey system and volunteers
Compiled information for 1996 Dayton's Bluff Exterior Conditions Survey

Server - Perkins Family Restaurant and Bakery, Roseville, MN 1976-2000

Management/Trainer - Perkins Family Restaurant and Bakery, Edina, MN 1977-1979
Traveled nationally organizing, hiring, training and supervising staff for new restaurant openings

Receptionist - ABRA Auto Body, St. Paul, MN 1986-1987
Posting to accounts receivable and payable, cash receipts and initial positive customer relations

MEGAN SPOTTS

(434)258-7001 

meganlinspotts@gmail.com 

UNDERWRITER

QUALIFICATIONS

Experience with diverse home loans
Exceptional speed and detail oriented, as documented in employee reviews
Strong skills in both oral and written communication
Quick learner with well-developed time management skills
Over **five years** mortgage experience, both front end and auditing
Excellent customer service skills

SKILLS

FNMA, Freddie Mac, FHLB, FHA, USDA, VA
APR calculation

Automated and Portfolio Underwriting

Income calculation: **self-employment**, corporate, partnerships, W-2 income

Order and review **credit reports**

Experience with **appraisals, private mortgage insurance, title work, TRID**

Fraud detection

Computer: Secondlook, Internet, Adobe, Microsoft applications: Word, Excel, Outlook, and Powerpoint

Office Equipment: postage machines, multi-line phone systems, paging systems, Fed-ex, UPS

EDUCATION

Randolph-Macon Woman's College,
Lynchburg, VA May 2007

Bachelor of the Arts in English: Creative Writing
GPA 3.2

EXPERIENCE

TENA COMPANIES, INC

Auditor, May 2013-Present

- ❖ Quality control based on FNMA, Freddie Mac, FHLB, FHA, USDA, and VA guidelines
- ❖ Track and evaluate each state's specific disclosures and requirements
- ❖ Use Allregs to validate policies
- ❖ Review all documents in detail, including but not limited to: appraisals, title work, TRID, private mortgage insurance, employment, and assets
- ❖ Order and review credit reports from Informative Research and Credco
- ❖ Recalculate income, debts, and assets including tax returns: self-employment, corporate, and partnerships
- ❖ Consistently exceeded company expectations in monthly reviews for accuracy and speed
- ❖ Audit fixed and adjustable rate mortgages and calculate APR
- ❖ Observe and documented credit worthiness of the borrowers
- ❖ Evaluate and analyze automated and portfolio underwriting, including DU, LP, GUS, and recalculating ratios
- ❖ Train new hires in reverification and audit and review their practice files

FREEDOM MORTGAGE CORP

Underwriting Assistant, January 2011-May 2013

- ❖ Completed Jr Underwriter training
- ❖ First person in department, represented department in a Process Improvement Committee
- ❖ Completed training in file set-up, broker maintenance, closing preparation, quality control

**REFERENCES AVAILABLE UPON
REQUEST**

- ❖ Submitted and followed up on packages to private mortgage insurance and appraisal companies
- ❖ Reviewed title commitments, hazard insurance
- ❖ Requested conditions from brokers, reviewed and organized incoming conditions
- ❖ Worked with Streetlinks, FHA connection, NMLS consumer access, MERS online, Interthinx, SAM, Limited Denial of Participation, GSA, Genworth, LexisNexis, and flood determination
- ❖ Informally supervised and trained new hires into the department
- ❖ Ordered tax transcripts for employment verification and researched any associated issues
- ❖ Completed verbal verifications of employment for both conventionally employed and self-employed borrowers

Matthew H. Brown

391 Banfil Street
Saint Paul, MN 55102
(651) 224-6108 (Home)
(651) 238-6769 (Cell)
mb@communitynhs.org

EDUCATION

Minneapolis College of Art and Design, 1975 to 1978
Licensed Contractor – State of Minnesota – 1985 to Present
Multiple NeighborWorks Trainings for Continuing Education

Skills: Wood framing, finishing, sheet rocking, flooring installation, roofing, siding, cabinetry, appliance installation, plumbing, window installation, painting, weatherization installation, lead abatement, knowledge of OSHA construction regulations.

EXPERIENCE

Community Neighborhood Housing Services, Saint Paul, MN 2006 to present
Construction Specialist

Responsible for oversight of the construction process for Community Neighborhood Housing Services' (CNHS) home improvement loan programs as well as oversight of all maintenance related needs for all CNHS owed properties. Performs inspections of buildings and properties to analyze construction needs, feasibility and code compliance and assists borrowers in determining needed repairs when requesting loans or grants. Presents rehabilitation specifications, costs and supplemental information to CNHS staff and Board.

Twin Cities Habitat for Humanity, Saint Paul, MN, 2003 to 2006

Filed Supervisor

- Manage four Construction Site Supervisors
- Coordinate and schedule building of 60 houses per year
- Act as a liaison between supervisors and office managers
- Provide supervision to staff
- Assist in oversight of construction department
- Advise on construction policies

Twin Cities Habitat for Humanity, Saint Paul, MN, 2000 to 2003

Site Supervisor

- Coordinate and organize house construction site from start to finish, including:
 - Install temporary utilities
- Oversee foundation construction
- Work with inspectors and excavators
- Order and receive construction materials and equipment
- Coordinate and oversee sub-contractors
- Oversee construction of home at all phases
- Supervise, coordinate, instruct, and plan work for Americorps and volunteers
- Represent TCHFH to volunteers, sub-contractors, corporate sponsors, and contributors

Contractor/Remodeler, Self-Employed, 1985-2000

Built and remodeled residential and commercial buildings individually and with a partner. Projects included the Loring Pasta Bar in Minneapolis.

Fraynke Atkinson

Education

ITT Technical Institute - Mount Prospect, IL

2010

AS of Applied Science in Criminal Justice

- GPA 3.92/4.0

Experience

Legacy, INC. - Vadnais Heights, MN

2017

Sales Representative

- Responsible for cold-calling prospective clientele regarding their coin collection.
- In charge of maintaining world-class coin collections by maintaining the upmost rare coins at the forefront and adding the most valuable to each collection.
- Required to dial at minimum of 150-200 dials per day regardless of client retention.

TenA - St. Paul, MN

2015-2017

Servicing Auditor

- Responsible for providing accurate and timely audit services for a variety of servicing clients.
- Maintained a current understanding of applicable federal and state laws and regulations, general servicing and secondary marketing investor guidelines related to mortgage loan servicing.
- Reviewed loan information including all documentation contained within a mortgage file and client servicing system to ensure compliance with applicable federal, state and agency guidelines.
- Maintained a quantity and quality of output that meets or exceeds the established standards of management.
- Identified areas of possible misrepresentation and report suspected “red flags” to their immediate Supervisor for further investigation and/or re-verification.
- Used proper language and grammar while clearly describing in writing the relevant circumstances found within the loan file in the form of exceptions and observations.

Wells Fargo Home Mortgage - St. Louis Park, MN

2015

Loan Servicing Specialist III/On-Site Trainer - Subject Matter Expert

- Evaluated each FHA Default Claim by obtaining proper documentation for HOA and Utilities.
- Maintained and processed a production queue with no less than 200 at a time.
- Evaluated and determined needs on each loan to determine how many outstanding bills are due that need to be paid before the file conveys to Housing Urban Development.
- Obtained and applied quality assurance, including quality control to daily production.
- Located and researched possible Homeowners Associations, water, sewer, and trash bills on each loan.
- Determined responsibility of Wells Fargo Home Mortgage to each property regarding all outstanding bills.
- Sustained rapport with Homeowners Associations as well as utility companies to confirm relationships.
- Withstand multitasking with incoming calls, emails, and consistent notes being taken as conversations arise.
- Responsible for maintaining efficient, functional, and educational training material.
- Liable for each trainee as they transition into their positions to confirm and maintain understanding.
- Identified areas of difficulty and executed teaching each in an easily understood and professional manner.
- Accountable to train each employee hired within the Default Claims Department.

Bank of America - Rolling Meadows, IL

2012-2015

Home Loans Home Servicing Specialist

- Responsible for processing of loans approved by an underwriter or Automated Decisioning System.
- Knowledgeable in clearing conditions and issuing changes to the terms on previously approved loans.
- Validated conditions of approval, which may include customer income/assets documentation.
- Resolved Routine title issues, including but not limited to vesting issues, child support liens, judgment liens, mechanic liens, and undisclosed liens with ease.
- Exemplified competency maintaining a mixed pipeline including VA Full Doc Loans, VA IRRRL, VA Alternate, FHA
- Streamlined, FHA Full Doc, CEMA and South Carolina Attorney regulations. Also, familiar with Conventional and MHA loans.
- Executed full examination and completion of opening and processing loans, including review of all assets, income, and review loan for possible roadblocks.
- Communicated with borrowers to convey needed items to satisfy loan conditions.
- Reviewed and assessed received documentation for completion.
- Communicated with all 3rd party vendors including but not limited to Title companies, VA Administration, hazard insurance companies, possible lien holders, in a professional manner.
- Maintained a Liaison role between Underwriter, Home Service Specialist, Mortgage Loan Officer, 3rd Party Vendors, and borrower.
- Facilitated full execution of applicable government guidelines and requirements.
- Upheld security clearances, Nationwide Mortgage Licensing System Number, and proper authentication of clients.

Becky A. Errigo

533 Dale Street North Saint Paul, MN 55103

becky@greaterfrogtowncdc.org

651-789-7484

experience

Housing Development Manager NeighborWorks Home Partners	St. Paul, MN	2014 – present
Housing Development Project Manager Greater Frogtown Community Development Corporation	St. Paul, MN	1999 - 2014
Project Manager / Construction Estimator / Design Consultant American Estate Homes, Inc.	Woodbury, MN	1994- 1999
Licensed Real Estate Assistant Coldwell Banker Burnet	Woodbury, MN	1998 - 1999

expertise

- Management of construction process, both new construction and renovation, from project feasibility to occupancy (single-family to 16 unit project)
- Establish rapport and effectively communicate with architects, contractors, clients, and community members
- Interior and exterior design as well as interior space planning
- Prepare and accurately document construction specifications for single-family and duplex renovation
- Read and interpret blue prints, AIA and UBC documents
- Oversight of competitive bidding process, analysis, and contractor selection
- Ensure projects meet all city and state inspections and code requirements, comply with hazardous material remediation requirements, and follow Green Communities Criteria
- Balance and maintain financial accounts and documentation for individual projects and funding sources
- Budget and materials management
- Oversight of the construction process including onsite routine and draw inspections
- Ensure project is compliant with all funding requirements
- Create marketing plans, coordinate marketing, compose marketing literature, and prepare for sale or lease-up
- Prepare final closing documents and reconcile with the title company and funding source/s
- Systematic and accurate maintenance of client documents and contracts
- Provide technical assistance to buyers in the area of general home maintenance
- Work with board of directors, committees, and staff to implement community housing plans

education/training

- University of Wisconsin - Stout Menomonie, WI 1988 - 1993
Major: Interior Design (BSA) Concentration: Construction / Architectural Drawing
- Windows XP, Microsoft Office Suite: Access, Power Point, Publisher, Word, Excel
- Neighborhood Reinvestment Training Institute - Cost Estimation, Design & Specification, & Rehab Management
- Neighborhood Reinvestment Institute - Project Feasibility and Analysis
- Neighborhood Reinvestment Corporation - Strategies & Implementation Techniques for Creating Neighborhoods of Choice through Revitalization
- Development Training Institute - Project Development Program
- Making Affordable Housing Affordable: Reducing Building Costs through Innovation, Design, Technology, Land Regulations, and Materials
- HUD - Financial Management Training: Understanding the Proper use of Federal Funds by Nonprofits
- HUD - Asset management - Capital Improvement Budgeting
- HUD - Addressing Lead-Based Paint in Federally Assisted Local Housing Programs
- Ramsey County - Lead Safe Work Practices

Green by Design Conference - How to Plan and Build Healthy, Sustainable, Affordable Housing & Communities
in Minnesota (2006, 2007, 2008, 2009)

Enterprise - Green Communities Initiative - Washington, DC

ProSource - Real Estate Licensing

National Development Council - Housing Development Finance/ Problem Solving & Deal Structure

National Development Council - Low-Income Housing Tax Credits

National Development Council - Rental Housing Development Finance

Federal Reserve Bank of Kansas City - Denver Branch - Responding to Foreclosures in your Communities

Healthcare, Infrastructure & Renewable Energy

HOME - Rental Projects: Workshop for Managers and Owners

HUD - Building Partnerships to Strengthen Communities

HUD - Becoming a High Performance CHDO

Financial & Asset Management Training

Strategic Opportunities for Community-Based Economic Development

professional / personal activities

Builder's Outreach Foundation - Committee Member Twin Cities, MN

St. Paul Community GIS Consortium - Executive Committee Member Twin Cities, MN

AIA Merit Award - "Work Force Homes": Project 20/20 - Greater Frogtown CDC Twin Cities, MN

St. Paul First Church - Board Member St. Paul, MN

Somsen 2012 International Reunion - Treasurer New Ulm, MN

Builders Association of the Twin Cities - Reggie Award - American Estate Homes, Inc. Twin Cities, MN

Best of Design Show - Art Metals Menomonie, WI

Juried Art Show - Art Metals Eau Claire, WI

Work and Study Abroad Edinburgh, Scotland, GB

Xeemtxheej (Nick) Yang

62 Hawthorne Avenue W. | Saint Paul, MN 55117 | xeemtxheej.yang@gmail.com | Cell: (651)-270-8104

CAREER INTERESTS

Clinical Social Work, Industrial and Organizational Psychology, Management Consulting and Human Resources

EDUCATION

Bachelor of Arts, *Gustavus Adolphus College*, Saint Peter, MN, May 27th, 2012

Major: Psychology

SKILLS

- Social Service operations experience
- Proficient in HMIS (Homeless Management Information System)
- Excellent analytical written proficiency
- Bilingual- English and Hmong
- Proficient in MS Excel, Word & PowerPoint
- Able to prioritize and handle a variety of task

CERTIFICATION

- **Certified Home Buyer Counselor**, Minnesota Homeownership Center, June 2013
- **Certified Home Buyer Educator**, Minnesota Homeownership Center, April 2013
- **Certified Foreclosure Counselor**, Minnesota Homeownership Center, March 2013
- **Certified Financial Education Instructor**, National Financial Educators Council, February 2013

EXPERIENCE

Housing Counselor, Hmong American Partnership, St. Paul, MN, October 2012- Present

- Conduct intensive case management for the Supportive Housing Assistance Program
- Managed a successful housing program to meet funder requirements
- Completed all Housing Counseling certifications through Minnesota Homeownership Center
- Administer culturally specific pre-purchase and rental counseling workshops

Direct Support Professional, St. David's Center, St. Louis Park, MN, June 4, 2012- October 2012

- Responsible for providing services to clients with developmental, physical or mental disabilities
- Created and implemented a work plan to improve client's lifestyle
- Positively influenced client to improve their lifestyle to achieve their goals

Southeast Asian Services Intern, Amherst H. Wilder Foundation, St. Paul, MN, December 2011- January 2012

- Assisted case managers and therapist with diagnostic assessments
- Supervised the Hmong men's group on weekly activities and counseling sessions
- Initiated projects for Wilder's Youth Leadership Initiative Group

Undergraduate Consultant, Gustavus Adolphus College/Infinite Insurance, February. 2012- May 2012

- Initiated Infinite Insurance's strategic plan for the next 3-5 years
- Coordinated and maintained weekly contact with employer
- Evaluated and suggested changes/additions to employer's current business plan
- Developed production goals to achieve maximum client results

LEADERSHIP and SERVICE

Co-Chair, Hmong American Partnership Events Committee, 2013-Present

- Planned HAP's all-staff picnic and HAP's annual United Way Campaign

Co-President/Activities Coordinator, Gustavus Asian Cultures Club, 2009-2012

- Promoted diversity through social and cultural events
- Representative to campus Diversity Leadership Council

REFERENCES

Choua "Que" Her, Supervisor Jan. 1, 2014 – November 14, 2014, 612.616.8691 or Que.Vang@state.mn.us

Patti Phillips, Supervisor Nov. 14, 2014 – Jan. 1, 2014, 651.395.9055 or patriciaphillips16133@gmail.com

Tulshi Kharel, Co-worker- ID Program Coordinator, 651.242.1738 or tulshik@hmong.org

GINA M. DENARDO
245 Congress St. West, St. Paul, MN 55107-2114
612-418-9642 / ginamdenardograf@gmail.com

SUMMARY OF QUALIFICATIONS

I have extensive experience working with culturally diverse individuals and families to create a stable financial future by gathering and analyzing their financial information and determining a course of action to meet their financial goals.

PROFESSIONAL EXPERIENCE

Financial Coach/Financial Wellness Manager, *EMERGE Community Development*
Minneapolis, MN June 2016 to Present

- Update client information and case activity in databases
- Provide individualized financial coaching services to a caseload of clients. Assess personal financial situation and assist in co-creating financial goals
- Gather financial information on clients including credit history, bank balances, job history, and other financial obligations
- Provide on-going support to achieve client's personal financial goals
- Perform services that support the integration of the Financial Wellness with MFIP, Training and other programming within EMERGE
- Coordinate, track, and deliver financial education trainings to diverse populations
- Lead the recruitment and management of volunteers to teach financial education classes
- Promote effective collaboration between Financial Wellness and program partners by working together with clients to developing and achieve their personal financial goals
- Guide clients through the application process for public benefits
- Participate in the development and management of program budget
- Hire, train, coach and supervise the performance of staff
- Implement and advise staff on policies and procedures
- Participate in funding opportunities; assist in grant writing

Financial and Employment Coach, *CommonBond Communities*
St. Paul, MN, August 2011 to May 2015

- Utilized one-on-one coaching methods to build and strengthen relationships and rapport with participants via phone, in-person and/or email with a large client caseload
- Helped clients develop financial goals and create realistic plans for becoming financially stable
- Analyzed and evaluate residents credit reports and create plans to resolve issues
- Collaborated with team members to create and update financial education materials
- Maintained case notes on company database and on Efforts to Outcomes database

Housing Counselor/Educator, *Thompson Associates Inc.*

St. Paul, MN, January 2002 to June 2011

- Worked with clients to gather required financial information to present to Mortgage Loan Officer
- Worked one on one with individuals to create financial goals and action plans to meet these goals
- Supported clients through multiple years while they strived to meet their financial goals
- Taught classes related to finances and home buying
- Communicated with Lenders and funders regarding client's ability to receive a Home Mortgage
- Acted as a liaison between clients and Mortgage Loan Officer

Real Estate Agent, *Thompson Associates Inc.*

St. Paul, MN, May 2009 to June 2011

- Prepared required documentation including representative contracts, purchase agreements and closing statements
- Worked with appraisers, escrow companies, lenders and home inspectors
- Evaluated mortgage options helping clients obtain financing at the best rates and terms
- Interviewed clients to determine what kinds of properties they were seeking and generated lists meeting those requirements from available properties

EDUCATION AND TRAINING

Financial Capability Certification, NeighborWorks America, Minneapolis, Minnesota

Four Directions of Economic Security, Lutheran Social Services, St. Cloud, Minnesota

Four Cornerstones of Financial Literacy, Lutheran Social Services, St. Cloud, Minnesota

Justine PETERSEN Credit Building Assessment 2013, Minneapolis, Minnesota

Financial Coaching Training, Central New Mexico C.C., Philadelphia, Pennsylvania

Real Estate License, Kaplan Professional Schools, St. Louis Park, Minnesota

Bachelor of Arts in Sociology, University of St. Thomas, St. Paul Minnesota

Nick.pierce90@gmail.com

715.222.3115

Nicholas W. Pierce

8360 Delaney Drive
Inver Grove Heights,
MN 55076

Objective	To be considered for jobs that use my skills and education background
Education	University of Wisconsin—Eau Claire, Eau Claire, WI December 2013 <i>Bachelor of Business Administration</i> <i>Major: Accounting/Finance</i>
Job Experience	Realtor , Century 21 Premier Group Hudson, WI April 2015 to Present <ul style="list-style-type: none">• Prospect on a daily basis to increase my client base• Provide excellent customer service to each client• Give each client helpful advice in the home buying/selling process Staff Accountant , Crenlo Cab Products, Inc Rochester, MN March 2014 to March 2015 <ul style="list-style-type: none">• Processed payroll for 700 employees• Managed the Accounts Payable department ensuring timely payments were made• Completed Journal Entries and reconciliations during month-end financial close Finance Intern , American Public Media-Minnesota Public Radio <i>St. Paul, MN</i> <i>June 2013 to August 2013</i> <ul style="list-style-type: none">• Conducted an internal audit of the T&E expense account and reported findings to Controller• Assisted in conversion from old ERP system to new ERP system• Teamed with giving department to improve reporting of donations and what funds were used for Audit Intern , Bauman Associates, LTD. <i>Eau Claire, WI</i> <i>January 2013 to April 2013</i> <ul style="list-style-type: none">• Audited Accounts Receivable, Accounts Payable, Inventory and other areas• Assisted in Tax Filings for Non-profits Controller Trainee , Midwest Manufacturing Truss Plant <i>Eau Claire, WI</i> <i>September 2012 to December 2012</i> <ul style="list-style-type: none">• Made weekly inventory counts of Lumber• Tracked labor hours on projects to ensure proper reporting• Reviewed employee hours and fixed and errors related to the timeclock
Activities	Rochester Jaycess , Rochester, MN July 2014 to June 2015 – Participate in volunteer activities and social events The National Society of Leadership and Success , University of Wisconsin-Eau Claire <i>Fall 2011 to Spring 2012</i> - Executive Board Member; Community Service Member

North East Neighborhood Development Corp (NENDC)

NORTH EAST NEIGHBORHOODS

1321 WHITE BEAR AVE.

ST. PAUL, MN 55106

December 31, 2017

Tax Returns

Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning _____, 2017, and ending _____, 20____

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

2017

Department of the Treasury
Internal Revenue Service

Name of exempt organization

**NORTH EAST NEIGHBORHOODS
DEVELOPMENT CORPORATION**

Employer identification number

41-1754720

Name and title of officer

**CHARLES REPKE
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>598,603</u>
2a	Form 990-EZ check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	_____
5a	Form 8868 check here	<input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize LEHERT, SKWIRA, SCHULTZ & CO. LLP to enter my PIN 60230 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature

Date 11/09/18

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature JAMES E STEVENSON, CPA Date 11/09/18

**ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2017)

60230 NORTH EAST NEIGHBORHOODS

41-1754720

FYE: 12/31/2017

Acknowledgement and General Information for Taxpayers Who File Returns Electronically

Thank you for taking part in the IRS e-file Program.

NORTH EAST NEIGHBORHOODS
1321 WHITE BEAR AVE.

ST. PAUL, MN 55106

- [X] Your Form 8868, Application for Extension of Time to File an Exempt Organization Return for tax year December 31, 2017 is being filed electronically with the IRS by the services of Lethert, Skwira, Schultz & Co. LLP.
- [X] Your extension was accepted by the IRS on 05/15/18 and the Submission Identification Number assigned to your return is 41402220181350040427.

Since you are filing your return electronically, PLEASE DO NOT SEND A PAPER COPY OF YOUR RETURN TO THE IRS. IF YOU DO, IT WILL DELAY THE PROCESSING OF THE RETURN.

Acknowledgement Process

The IRS will notify your electronic return originator when they accept your return, usually within 48 hours. If your return was not accepted, IRS will notify your electronic return originator of the reasons for rejection.

990

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning _____, and ending _____

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

C Name of organization: **NORTH EAST NEIGHBORHOODS DEVELOPMENT CORPORATION**
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address): **1321 WHITE BEAR AVE.**
 City or town, state or province, country, and ZIP or foreign postal code: **ST. PAUL MN 55106**

D Employer identification number: **41-1754720**

E Telephone number: **651-771-6955**

F Name and address of principal officer:
CHARLES REPKE
1321 WHITE BEAR AVENUE
ST. PAUL MN 55106

G Gross receipts \$: **598,603**

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)

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

J Website: **WWW.NENDC.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1992**

M State of legal domicile: **MN**

H(c) Group exemption number ▶

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE ORGANIZATION WAS ESTABLISHED IN ORDER TO PROMOTE AND IMPROVE HOUSING ECONOMIC DEVELOPMENT AND REDEVELOPMENT WITHIN ITS SERVICE AREA.		
	2 Check this box <input type="checkbox"/> 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	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	1
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	277,611	412,427
	9 Program service revenue (Part VIII, line 2g)	17,329	186,116
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	66	60
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	295,006	598,603
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	532,571	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	125,437	79,878
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	25,442	208,383
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	683,450	288,261
19 Revenue less expenses. Subtract line 18 from line 12	-388,444	310,342	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 635,139	End of Year: 945,741
	21 Total liabilities (Part X, line 26)	15,875	16,135
	22 Net assets or fund balances. Subtract line 21 from line 20	619,264	929,606

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

Signature of officer: *Charles Repke* Date: **11/13/2018**
CHARLES REPKE EXECUTIVE DIRECTOR
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **JAMES E STEVENSON, CPA** Preparer's signature: **JAMES E STEVENSON, CPA** Date: **11/09/18** Check if self-employed PTIN: **P00163024**

Firm's name: **LEHERT, SKWIRA, SCHULTZ & CO. LLP** Firm's EIN: **41-0738189**
 170 7TH PL E STE 100
 Firm's address: **SAINT PAUL, MN 55101-2361** Phone no.: **651-224-5721**

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:

THE ORGANIZATION WAS ESTABLISHED IN ORDER TO PROMOTE AND IMPROVE HOUSING ECONOMIC DEVELOPMENT AND REDEVELOPMENT WITHIN ITS SERVICE AREA.

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 \$ **199,836** including grants of \$) (Revenue \$)

TO PROMOTE AND IMPROVE HOUSING, ECONOMIC DEVELOPMENT AND REDEVELOPMENT WITHIN ITS SERVICE AREA.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

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

4e Total program service expenses **▶ 199,836**

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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.		X

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

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical responses. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance requirements.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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 [X]

Section A. Governing Body and Management

Table with 5 columns: Question ID, Question Text, 1a, 12, Yes, No. Rows include questions 1a through 9 regarding governing body members, relationships, and documentation.

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

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include questions 10a through 16b regarding local chapters, conflict of interest policies, whistleblower policies, and compensation reviews.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MN
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
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: JERRY ROMERO, 1321 WHITE BEAR AVE., ST. PAUL, MN 55106-2134 651-771-6955

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

 Check this box if neither the organization nor any related organization compensated any current officer, director, 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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATHLEEN DONNELLY-COHEN	1.00									
DIRECTOR	0.00	X						0	0	0
(2) CEDRICK BAKER	1.00									
DIRECTOR	0.00	X						0	0	0
(3) DELORES HENDERSON	1.00									
DIRECTOR	0.00	X						0	0	0
(4) ROBERT HUMPHREY	1.00									
DIRECTOR	0.00	X						0	0	0
(5) JEAN JANSEN	1.00									
DIRECTOR	0.00	X						0	0	0
(6) RICHARD KRAMER	1.00									
DIRECTOR	0.00	X						0	0	0
(7) MARJE MANGINE	1.00									
DIRECTOR	0.00	X						0	0	0
(8) LORETTA NOVAK	1.00									
DIRECTOR	0.00	X						0	0	0
(9) BRYAN LANGFORD	1.00									
DIRECTOR	0.00	X						0	0	0
(10) JERRY ROMERO	1.00									
DIRECTOR	0.00	X						0	0	0
(11) GARY UNGER	1.00									
DIRECTOR	0.00	X						0	0	0

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) BARBARA WENCIL DIRECTOR	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
(13) CHARLES REPKE EXECUTIVE DIRECTOR	40.00 0.00			<input checked="" type="checkbox"/>				0	70,000	0
1b Sub-total								70,000		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								70,000		

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 **▶ 0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

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

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 **▶ 0**

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					
	e Government grants (contributions)	1e	262,427				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	150,000				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			412,427			
Program Service Revenue	2a DEVELOPMENT FEES	Busn. Code	167,336	167,336			
	b LOAN INTEREST		18,780	18,780			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			186,116			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6a Gross rents		(i) Real	(ii) Personal				
b Less: rental exps.							
c Rental inc. or (loss)							
d Net rental income or (loss)							
7a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
b Less: cost or other basis & sales exps.							
c Gain or (loss)							
d Net gain or (loss)							
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		Busn. Code					
11a MISCELLANEOUS			60	60			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			60				
12 Total revenue. See instructions.			598,603	186,176	0	0	

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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				
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				
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	77,156		77,156	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	2,722		2,722	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	1,124		1,124	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,700		1,700	
12 Advertising and promotion				
13 Office expenses	2,480		2,480	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	1,417		1,417	
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 DEVELOPMENT	98,410	98,410		
b REHAB	93,786	93,786		
c OTHER PUBLIC IMPROVEMENT	7,640	7,640		
d MISCELLANEOUS	1,659		1,659	
e All other expenses	167		167	
25 Total functional expenses. Add lines 1 through 24e	288,261	199,836	88,425	0
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 <input type="checkbox"/> 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	26,448	1	241,051
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	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	600,472	7	696,471
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,099	9	1,099
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 31,240		
	b Less: accumulated depreciation	10b 31,240	10c	
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	7,120	15	7,120
16 Total assets. Add lines 1 through 15 (must equal line 34)	635,139	16	945,741	
Liabilities	17 Accounts payable and accrued expenses	151	17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	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	15,724	25	16,135
	26 Total liabilities. Add lines 17 through 25	15,875	26	16,135
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	76,791	27	220,440
	28 Temporarily restricted net assets	542,473	28	709,166
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	619,264	33	929,606	
34 Total liabilities and net assets/fund balances	635,139	34	945,741	

Part XI Reconciliation 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	598,603
2	Total expenses (must equal Part IX, column (A), line 25)	2	288,261
3	Revenue less expenses. Subtract line 2 from line 1	3	310,342
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	619,264
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	929,606

Part XII Financial Statements and Reporting

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

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? Yes 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? Yes No
 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? Yes No
 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? Yes No

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.

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2017

Open to Public Inspection

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

**NORTH EAST NEIGHBORHOODS
DEVELOPMENT CORPORATION**

Employer identification number

41-1754720

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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 above (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		
(A)						
(B)						
(C)						
(D)						
(E)						
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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	186,865	64,913	224,706	277,611	412,427	1,166,522
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	186,865	64,913	224,706	277,611	412,427	1,166,522
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.						1,166,522

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	186,865	64,913	224,706	277,611	412,427	1,166,522
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	11,817					11,817
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.)	77					77
11 Total support. Add lines 7 through 10						1,178,416
12 Gross receipts from related activities, etc. (see instructions)					12	186,176
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	98.99%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	97.88%
16a 33 1/3% support test—2017. 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 <input checked="" type="checkbox"/>		
b 33 1/3% support test—2016. 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 <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2017. 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 <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2016. 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 <input type="checkbox"/>		
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 <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Percentage, and % symbol. Rows include: 15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)); 16 Public support percentage from 2016 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Percentage, and % symbol. Rows include: 17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)); 18 Investment income percentage from 2016 Schedule A, Part III, line 17

- 19a 33 1/3% support tests—2017. 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—2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents?
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?
3b 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)?
3c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?
4a Was any supported organization not organized in the United States ("foreign supported organization")?
4b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?
4c 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)?
5a Did the organization add, substitute, or remove any supported organizations during the tax year?
5b 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?
5c Substitutions only. Was the substitution the result of an event beyond the organization's control?
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations?
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor?
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
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))?
9b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest?
9c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest?
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)?
10b 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.)

Table with 3 columns: Question ID, Yes, No. Rows correspond to questions 1 through 10b.

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 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? Row 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?

Section E. Type III Functionally-Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year. Sub-rows a, b, c. Row 2: Activities Test. Answer (a) and (b) below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer (a) and (b) below. Sub-rows a, b.

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 (explain in Part VI). 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):		
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		(A) Prior Year	(B) 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).

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017:			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

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.)

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME **\$ 77**

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

2017▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization NORTH EAST NEIGHBORHOODS DEVELOPMENT CORPORATION	Employer identification number 41-1754720
--	---

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 $\frac{1}{3}$ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

NORTH EAST NEIGHBORHOODS

Employer identification number

41-1754720

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	OTTO BREMER TRUST 30 E. 7TH ST. STE. 2900 SAINT PAUL MN 55101	\$ 150,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization NORTH EAST NEIGHBORHOODS DEVELOPMENT CORPORATION

Employer identification number 41-1754720

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated, 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?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?, 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" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 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 on 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 on 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" on 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 on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(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 on 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:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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" on 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				
d Equipment		31,240	31,240	
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely-held equity interests, (3) Other (A-H), and Total.

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9) and Total.

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9) and Total.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Rows include (1) Federal income taxes, (2) MORTGAGE PAYABLE, (3) ACCRUED PAYROLL TAXES, (4) TAX/INSURANCE ESCROW, and Total.

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

SCHEDULE O
(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2017

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

**NORTH EAST NEIGHBORHOODS
DEVELOPMENT CORPORATION**

Employer identification number

41-1754720

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY THE BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

NO DOCUMENTS AVAILABLE TO THE PUBLIC

60230 NORTH EAST NEIGHBORHOODS

41-1754720

FYE: 12/31/2017

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER FEES	\$ 1,700	\$	\$ 1,700	\$
TOTAL	\$ 1,700	\$ 0	\$ 1,700	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
BOARD & PUBLICITY	\$ 162	\$	\$ 162	\$
BANK FEES	5		5	
TOTAL	\$ 167	\$ 0	\$ 167	\$ 0

Mail To:

Minnesota Attorney General's Office
Charities Division
445 Minnesota Street, Suite 1200
St. Paul, MN 55101-2130

**STATE OF MINNESOTA
CHARITABLE ORGANIZATION
ANNUAL REPORT FORM**

(Pursuant to Minn. Stat. ch. 309)

Website Address:

www.ag.state.mn.us/charity

SECTION A: Organization Information

NORTH EAST NEIGHBORHOODS

Legal Name of Organization DEVELOPMENT CORPORATION

Federal EIN: 41-1754720

Fiscal Year-End: 12/31/2017

mm/dd/yyyy

Did the organization's fiscal year-end change? Yes No

Mailing Address:

CHARLES REPKE

Contact Person

1321 WHITE BEAR AVE.

Street Address

ST. PAUL

MN 55106

City, State, and Zip Code

651-771-6955

Phone Number

Email Address

Physical Address:

Contact Person

1321 WHITE BEAR AVE.

Street Address

ST. PAUL

MN 55106

City, State, and Zip Code

Phone Number

Email Address

1. Organization's website: WWW.NENDC.ORG

2. List all of the organization's alternate and former names (attach list if more space is needed).

Alternate Former

Alternate Former

3. List all names under which the organization solicits contributions (attach list if more space is needed).

NORTH EAST NEIGHBORHOODS DEVELOPMENT CORPORATION

4. Is the organization incorporated pursuant to Minn. Stat. ch. 317A? Yes No

5. Total amount of contributions the organization received from Minnesota donors: \$ 412,427

6. Has the organization's tax-exempt status with the IRS changed?

Yes No If yes, attach explanation.

7. Has the organization significantly changed its purpose(s) or program(s)?

Yes No If yes, attach explanation.

**CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)**

8. Has the organization been denied the right to solicit contributions by any court or government agency?
 Yes No If yes, attach explanation.

9. Does the organization use the services of a professional fundraiser (outside solicitor or consultant) to solicit contributions in Minnesota? Yes No
If yes, provide the following information for each (attach list if more space is needed):

Name of Professional Fundraiser	Compensation
Street Address	City, State, and Zip Code

10. Is the organization a food shelf? Yes No
If yes, is the organization required to file an audit? Yes, audit attached No
Note: An organization that has total revenue of more than \$750,000 is required to file an audit prepared in accordance with generally accepted accounting principles by an independent CPA or LPA. The value of donated food to a nonprofit food shelf may be excluded from the total revenue if the food is donated for subsequent distribution at no charge and is not resold.

11. Do any directors, officers, or employees of the organization or its related organization(s) receive total compensation* of more than \$100,000? Yes No
If yes, provide the following information for the five highest paid individuals:

Name and title	Compensation*	Other compensation

*Compensation is defined as the total amount reported on Form W-2 (Box 5) or Form 1099-MISC (Box 7) issued by the organization and its related organizations to the individual. See Minn. Stat. § 309.53, subd. 3(i) and Minn. Stat. § 317A.011 for definitions.

**CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)**

SECTION B: Financial Information

This section must be completed by organizations that file an IRS Form 990-EZ, 990-PF, or 990-N. Organizations that file an IRS Form 990 may skip Section B and go directly to Section C.

INCOME

1. Contributions Received	\$ <u>150,000</u> 1
2. Government Grants	\$ <u>262,427</u> 2
3. Program Service Revenue	\$ <u>186,116</u> 3
4. Other Revenue	\$ <u>60</u> 4
5. TOTAL INCOME	\$ <u>598,603</u> 5

EXPENSES

6. Program Expenses	\$ <u>199,836</u> 6
7. Management & General Expenses	\$ <u>88,425</u> 7
8. Fund-raising Expenses	\$ <u>8</u> 8
9. TOTAL EXPENSES	\$ <u>288,261</u> 9
10. EXCESS or DEFICIT	\$ <u>310,342</u> 10
(Line 5 minus Line 9)	

ASSETS

11. Cash	\$ <u>241,051</u> 11
12. Land, Buildings & Equipment	\$ <u>12</u> 12
13. Other Assets	\$ <u>704,690</u> 13
14. TOTAL ASSETS	\$ <u>945,741</u> 14

LIABILITIES

15. Accounts Payable	\$ <u>15</u> 15
16. Grants Payable	\$ <u>16</u> 16
17. Other Liabilities	\$ <u>16,135</u> 17
18. TOTAL LIABILITIES	\$ <u>16,135</u> 18

FUND BALANCE/NET WORTH

(Line 14 minus Line 18)

\$ 929,606

**CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)**

Section B (continued): Statement of Functional Expenses

This expense statement must be prepared in accordance with generally accepted accounting principles. Each column must be completed, and Columns B, C, and D must equal Column A. The amount on Line 25, Column A must match Line 17 of IRS Form 990-EZ or Line 26 of IRS Form 990-PF.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1. Grants and other assistance to governments and organizations in the U.S.				
2. Grants and other assistance to individuals in the U.S.				
3. Grants and other assistance to governments, organizations, and individuals outside the U.S.				
4. Benefits paid to or for members				
5. Compensation of current officers, directors, trustees, and key employees				
6. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7. Other salaries and wages				
8. Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9. Other employee benefits				
10. Payroll taxes				
11. Fees for services (non-employees):				
a. Management				
b. Legal				
c. Accounting				
d. Lobbying				
e. Professional fundraising services				
f. Investment management fees				
g. Other				
12. Advertising and promotion				
13. Office expenses				
14. Information technology				
15. Royalties				
16. Occupancy				
17. Travel				
18. Payments of travel or entertainment expenses for any federal, state, or local public officials				
19. Conferences, conventions, and meetings				
20. Interest				
21. Payments to affiliates				
22. Depreciation, depletion, and amortization				
23. Insurance				
24. Other expenses. Itemize expenses not covered above. Expenses labeled miscellaneous may not exceed 5% of total expenses (Line 25).				
a.				
b.				
c.				
d.				
25. Total functional expenses. Add lines 1 through 24d.				
26. Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in Column B joint costs from a combined educational campaign and fundraising solicitation				

CHARITABLE ORGANIZATION ANNUAL REPORT FORM (Continued)

Section C: Board of Directors Signatures and Acknowledgment

The form must be executed pursuant to a resolution of the board of directors, trustees, or managing group and must be signed by two officers of the organization. See Minn. Stat. § 309.52, subd. 3.

We, the undersigned, state and acknowledge that we are duly constituted officers of this organization, being the EXECUTIVE DIRECTOR (Title) and President (Title) respectively, and that we execute this document on behalf of the organization pursuant to the resolution of the Executive Committee (Board of Directors, Trustees, or Managing Group) adopted on the day of Nov. 13, 2018, approving the contents of the document, and do hereby certify that the Executive Committee (Board of Directors, Trustees or Managing Group) has assumed, and will continue to assume, responsibility for determining matters of policy, and have supervised, and will continue to supervise, the operations and finances of the organization. We further state that the information supplied is true, correct and complete to the best of our knowledge.

CHARLES REPKE
Name (Print)
Signature
EXECUTIVE DIRECTOR
Title
Date 11/13/2018

Kathleen Donnelly-Cohen
Name (Print)
Signature
President
Title
Date 11/13/18

North East Neighborhoods Development Corporation
Balance Sheet
As of December 31, 2018

	Dec 31, 18
ASSETS	
Current Assets	
Checking/Savings	
1002 · CCCU - Checking	50,455.41
1003 · CCCU - Savings	8,830.81
1004 · CCCU Saving 2	150,231.99
	209,518.21
Total Checking/Savings	
Other Current Assets	
1300 · Prepaid Expenses	1,098.75
1820 · Investment Hazel Pk Heights LLC	7,110.00
1901 · Loans Receivable	
1976 · Dars Double Scoop	14,320.82
1975 · Open Cities Health Clinic	8,239.00
1973 · The Look Hair Salon CDBG	12,502.00
1972 · Hmong Village CDBG	94,406.00
1968 · Manara Restaurant #2	49,329.00
1967 · Dayten's Bluff Dist 4 Comm Coun	46,364.07
1965 · Impact Printing	13,251.00
1964 · 5 Minute Fitness NEBDP	2,048.83
1970 · Beverly Peterson (1748 Arl)	16,027.16
1969 · Front Ave Star Loan	10,000.00
1949 · Turning Lives Around - CDBG	15,739.67
1910 · Ruth H Campbell (Swede Hollow)	16,665.00
1963 · EquityServicesofStPaulIncNEBDP4	-0.11
1962 · Long's Auto Place STAR NEBDP2	9,385.54
1904 · Urban Roots MN	11,485.32
1903 · East Side Enterprise Center	36,482.81
1980 · CentroMex Supermercado	86,537.64
1909 · S.W.W. Realty Partnership	-29.03
1950 · Loan - 962 Arcade Saigon Chi	28,515.13
1951 · Shear Elegance Pet Grooming	66,000.19
1991 · Loan-Gallagher Financial	-216.85
1994a · Loan-Cherry Pit	903.90
1994b · Loan-Swede Hollow	-96.00
1996 · Loan-Metro East Chiropractic	440.33
1997 · Loan-Life Care Animal Hospital	26,473.48
1998 · Twin Cities Tees	-172.48
1998b · Donna Dox Hair	-264.00
	564,338.42
Total 1901 · Loans Receivable	
	572,547.17
Total Other Current Assets	
Total Current Assets	782,065.38

North East Neighborhoods Development Corporation
Balance Sheet
As of December 31, 2018

02/27/19

Accrual Basis

	Dec 31, 18
Fixed Assets	
1400 · Equipment	31,239.64
1410 · Accumulated Depreciation	-31,239.64
Total Fixed Assets	0.00
TOTAL ASSETS	782,065.38
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 · *Accounts Payable	-13.53
Total Accounts Payable	-13.53
Other Current Liabilities	
2100 · Payroll Liabilities	
MN Income Tax	165.32
MN Unemployment Taxes	-20.52
Federal Taxes (941/944)	525.82
2100 · Payroll Liabilities - Other	5,417.79
Total 2100 · Payroll Liabilities	6,088.41
2110 · Tax/Insurance Escrow	7,744.15
2350 · Mortgage Payable	7,000.00
Total Other Current Liabilities	20,832.56
Total Current Liabilities	20,819.03
Total Liabilities	20,819.03
Equity	
3000 · Opening Bal Equity	52,894.63
3001 · Unrestricted Net Assets	
3007 · Reward Fund	600.00
3500 · Investment in Capitol Brokerage	37,181.94
3001 · Unrestricted Net Assets - Other	42,391.54
Total 3001 · Unrestricted Net Assets	80,173.48
3002 · Temp. Restricted Net Assets	
3003 · CDBG Business Fund	558,707.93
3004 · CDBG Housing Fund	-17,103.07
3005 · STAR Program	242,422.77
3006 · Housing Fund-2	125.06
Total 3002 · Temp. Restricted Net Assets	784,152.69

4:52 PM

02/27/19

Accrual Basis

North East Neighborhoods Development Corporation

Balance Sheet

As of December 31, 2018

	<u>Dec 31, 18</u>
3900 · Retained Earnings	-41,690.10
Net Income	<u>-114,284.35</u>
Total Equity	<u>761,246.35</u>
TOTAL LIABILITIES & EQUITY	<u>782,065.38</u>

Resume

Charles W. Repke
154 W Winifred
Saint Paul, MN 55107

Cell – 651-214-8664
Office – 651-771-6955

Executive Director North East Neighborhoods Development Corporation since February 2002.

Executive Director, District 2 Community Council since April 1999.

These two non-profit organizations facilitate the community involvement in development activities in the north eastern neighborhoods of Saint Paul. Responsible to the Board of Directors for the management of these agencies, duties include creating budgets, managing and supervision of employees, representing the organizations in the community and with governmental entities.

2009 – ongoing Capitol Brokerage, 1321 White Bear Ave, Saint Paul, MN – Real Estate Broker - Responsible for management of a full service real estate brokerage.

Independent Contractor - registered lobbyist with the State of Minnesota since 1999. Specialization in Energy, Environment, Tax and Land Use issues. Clients include Ever-Green Energy, Saint Paul, MN.

Previous Employment : 1/1990-12/1997 City of Saint Paul served as the legislative aid to the President of the Saint Paul City Council and the Chair of the Housing and Redevelopment Authority;

Related Experience: Served as a member of the Saint Paul Planning Commission and its zoning committee. Former President West Seventh/Fort Road Federation.

Dayton's Bluff Neighborhood Housing Services (DBNHS)

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning _____, and ending _____

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

C Name of organization **DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES, INC.**
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
823 EAST 7TH STREET
 City or town, state or province, country, and ZIP or foreign postal code
SAINT PAUL MN 55106

D Employer identification number **41-1386097**

E Telephone number **651-774-6995**

G Gross receipts \$ **1,925,184**

F Name and address of principal officer:
JIM ERCHUL
823 EAST 7TH STREET
SAINT PAUL MN 55106

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)

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

J Website: **WWW.DBNHS.ORG** **H(c)** Group exemption number ▶ _____

K Form of organization: Corporation Trust Association Other ▶ _____

L Year of formation: **1980** **M** State of legal domicile: **MN**

Part I Summary

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)	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	12
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	6
6 Total number of volunteers (estimate if necessary)	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,776,283	2,749,242
9 Program service revenue (Part VIII, line 2g)	138,724	143,708
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,331	20,748
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	69,888	-988,514
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,993,226	1,925,184
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,077,589	839,096
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	480,739	428,972
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	316,633	284,223
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,874,961	1,552,291
19 Revenue less expenses. Subtract line 18 from line 12	118,265	372,893

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	20,111,796	20,305,479
21 Total liabilities (Part X, line 26)	4,860,184	5,045,763
22 Net assets or fund balances. Subtract line 21 from line 20	15,251,612	15,259,716

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
 Signature of officer: **JIM ERCHUL**
 Date: _____
 Type or print name and title: **EXECUTIVE DIRECTOR**

Paid Preparer Use Only
 Print/Type preparer's name: **LEO F. YUREK, CPA**
 Preparer's signature: **LEO F. YUREK, CPA**
 Date: **06/29/18**
 Check if self-employed if not self-employed
 PTIN: **P00163047**
 Firm's name: **LETHERT, SKWIRA, SCHULTZ & CO. LLP**
 Firm's EIN: **41-0738189**
 Firm's address: **170 7TH PL E STE 100 SAINT PAUL, MN 55101-2361**
 Phone no.: **651-224-5721**

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 \$ 699,735 including grants of \$ 522,544) (Revenue \$)

THE COMMUNITY DEVELOPMENT BLOCK PROGRAM PROVIDED FUNDING FOR REHABILITATION OF SUBSTANDARD HOUSES IN NEED OF REPAIR; PROVIDED LOW INCOME FINANCING.

4b (Code:) (Expenses \$ 276,365 including grants of \$ 18,826) (Revenue \$)

THE NEIGHBORHOOD PARTNERSHIP PROGRAM PROVIDED FUNDING FOR EXTERIOR IMPROVEMENTS OF RESIDENTIAL HOMES

4c (Code:) (Expenses \$ 175,907 including grants of \$ 157,560) (Revenue \$)

THE MINNESOTA HOUSING FINANCE AGENCY PROGRAM PROVIDED FUNDS TO ASSIST LOW/MODERATE INCOME HOMEOWNERS IN REHABILITATING THEIR HOMES

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

(Expenses \$ 308,904 including grants of \$ 140,166) (Revenue \$)

4e Total program service expenses 1,460,911

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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		X
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	X	
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		X
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		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
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		X
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		X
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		X
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		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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		
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		X
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		X
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.		X

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

Input box for Schedule O

Main table with columns for question ID, question text, and Yes/No response columns. Includes rows 1a-1c, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-14b.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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.		
b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
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?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **MN**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request 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: ▶

THE ORGANIZATION
ST. PAUL

823 EAST 7TH STREET

MN 55106

651-774-6995

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, 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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) AKENZUA AGBATOR	1.00									
BOARD DIR.	0.00	X					0	0	0	
(2) DANIELLE WINNER	1.00									
BOARD DIR.	0.00	X					0	0	0	
(3) KEVIN SEVCIK	1.00									
BOARD DIR.	0.00	X					0	0	0	
(4) JOHN FAHEY	1.00									
BOARD SECT	0.00	X		X			0	0	0	
(5) BILL SARVELA	1.00									
TREASURER	0.00	X		X			0	0	0	
(6) MARTIN SHIMKO	1.00									
BOARD VICE PRES.	0.00	X		X			0	0	0	
(7) MALCOM MCDONALD	1.00									
BOARD DIR.	0.00	X					0	0	0	
(8) DENISE BEIGBEDER	1.00									
BOARD DIR.	0.00	X					0	0	0	
(9) KATE CUNNINGHAM	1.00									
BOARD DIR.	0.00	X					0	0	0	
(10) ROSE LEWIS	1.00									
BOARD DIR.	0.00	X					0	0	0	
(11) BEN GREILING	1.00									
BOARD DIR.	0.00	X					0	0	0	

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) DIANE MAY	1.00									
PRESIDENT	0.00	X		X			0	0	0	
(13) JIM ERCHUL	40.00									
EXECUTIVE DIRECTOR	0.00			X			91,000	0	29,584	
1b Sub-total							91,000		29,584	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							91,000		29,584	

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 **0**

	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		X
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		X
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		X

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

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 **0**

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					
	e Government grants (contributions)	1e	2,749,192				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	50				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		2,749,242				
	Program Service Revenue	2a LOAN INTEREST	Busn. Code	143,708	143,708		
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			143,708				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		20,748			20,748
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real					
		(ii) Personal					
		b Less: rental exps.					
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis & sales exps.					
		c Gain or (loss)					
	d Net gain or (loss)						
	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		Busn. Code					
11a GRANTS REPAID			109,663	109,663			
b SHOP 2012 LLC			-25,506	-25,506			
c SERVICE FEES/REIMBURSEMENTS			-1,072,671	-1,072,671			
d All other revenue							
e Total. Add lines 11a-11d			-988,514				
12 Total revenue. See instructions.			1,925,184	-844,806	0	20,748	

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	839,096	839,096		
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	91,000	85,540	5,460	
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	337,972	319,924	18,048	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	100,615	87,420	13,195	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	860	860		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	35,857	10,898	24,959	
23 Insurance				
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 CONSULTING CONTRACTS	50,964	47,410	3,554	
b INSURANCE	32,267	29,533	2,734	
c SUPPLIES	25,417	24,155	1,262	
d LOAN SERVICING FEES	11,419	10,940	479	
e All other expenses	26,824	5,135	21,689	
25 Total functional expenses. Add lines 1 through 24e	1,552,291	1,460,911	91,380	0
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 <input type="checkbox"/> 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		1	
	2 Savings and temporary cash investments	3,389,971	2	4,308,125
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	766,522	4	321,230
	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	7,506,590	7	6,408,560
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,849,222		
	b Less: accumulated depreciation	10b 2,119,134	10c 487,916	1,730,088
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	7,960,797	15	7,537,476
16 Total assets. Add lines 1 through 15 (must equal line 34)	20,111,796	16	20,305,479	
Liabilities	17 Accounts payable and accrued expenses	64,735	17	82,385
	18 Grants payable	1,014,734	18	386,657
	19 Deferred revenue	57,332	19	61,936
	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	3,739,957	23	4,530,030
	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	-16,574	25	-15,245
	26 Total liabilities. Add lines 17 through 25	4,860,184	26	5,045,763
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,592,122	27	3,819,450
	28 Temporarily restricted net assets	10,633,322	28	10,414,098
	29 Permanently restricted net assets	1,026,168	29	1,026,168
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	15,251,612	33	15,259,716	
34 Total liabilities and net assets/fund balances	20,111,796	34	20,305,479	

Part XI Reconciliation 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	1,925,184
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,552,291
3	Revenue less expenses. Subtract line 2 from line 1	3	372,893
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,251,612
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-364,789
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	15,259,716

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
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?	X	
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.	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES, INC.

Employer identification number

41-1386097

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 12, 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).
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).
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).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X 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).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university.
10 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...
11 An organization organized and operated exclusively to test for public safety.
12 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...
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
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).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes rows (A) through (E) and a Total row.

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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,435,048	1,647,132	2,550,156	1,776,283	2,749,242	13,157,861
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	4,435,048	1,647,132	2,550,156	1,776,283	2,749,242	13,157,861
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.						13,157,861

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	4,435,048	1,647,132	2,550,156	1,776,283	2,749,242	13,157,861
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,297	1,902	1,772	8,331	20,748	35,050
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						13,192,911
12 Gross receipts from related activities, etc. (see instructions)					12	-844,806
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	99.73%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	99.87%
16a 33 1/3% support test—2017. 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 <input checked="" type="checkbox"/>		
b 33 1/3% support test—2016. 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 <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2017. 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 <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2016. 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 <input type="checkbox"/>		
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 <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income; 13 Total support; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Value, Percentage. Rows: 15 Public support percentage for 2017; 16 Public support percentage from 2016 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Rows: 17 Investment income percentage for 2017; 18 Investment income percentage from 2016 Schedule A, Part III, line 17.

- 19a 33 1/3% support tests—2017. 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—2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows include questions 1 through 10b regarding supported organizations, such as 'Are all of the organization's supported organizations listed by name...', 'Did the organization have any supported organization that does not have an IRS determination of status...', etc.

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 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? Row 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?

Section E. Type III Functionally-Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer (a) and (b) below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer (a) and (b) below. Sub-rows a, b.

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 (explain in Part VI). 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):		
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		(A) Prior Year	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).

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017:			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

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.)

(This area contains horizontal dotted lines for supplemental information.)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

**DAYTON'S BLUFF NEIGHBORHOOD
HOUSING SERVICES, INC.**

Employer identification number

41-1386097

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply). <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space <input type="checkbox"/> Preservation of a historically important land area <input type="checkbox"/> Preservation of a certified historic structure	
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 Tax 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 7/25/06, 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶	
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?	<input type="checkbox"/> Yes <input type="checkbox"/> 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" on 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 on 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 on 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" on 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 on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(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 on 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" on line 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" on 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				
d Equipment		3,849,222	2,119,134	1,730,088
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,730,088

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) RESALE PROP W/ALLOW	7,225,695
(2) ESCROW	305,640
(3) PREPAID EXPENSES	176,878
(4) ACCRUED INTEREST REC	80
(5) INVESTMENT IN SHOP 2012 LLC	-170,817
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	7,537,476

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) CLIENT ESCROW DEPOSITS	-15,245	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	-15,245	

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" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (2a-2e, 4a-4c). Column 1: Description, Column 2: Sub-description, Column 3: Amount. Total revenue is 1,925,184.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (2a-2e, 4a-4c). Column 1: Description, Column 2: Sub-description, Column 3: Amount. Total expenses are 1,552,291.

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.

Series of horizontal dotted lines for providing supplemental information.

Part XIII Supplemental Information *(continued)*

Dotted lines for supplemental information entry.

SCHEDULE I (Form 990)

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

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

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization

DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES, INC.

Employer identification number

41-1386097

OMB No. 1545-0047

2017

Open to Public Inspection

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

Yes No

[X] Yes [] No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

Table with 7 columns: (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. Rows 1-9 are empty.

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

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

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

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

Table with 6 columns: (a) Type of grant or assistance, (b) Number of recipients, (c) Amount of cash grant, (d) Amount of noncash assistance, (e) Method of valuation (book, FMV, appraisal, other), (f) Description of noncash assistance. Rows include MHFA GRANT FUND, LEGACY FUND, CDBG LOAN FUND, HOME OWNERSHIP PRODUCTION, NEIGHBORHOOD REINVEST, and MISC.

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

Series of horizontal dotted lines for providing supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

2017

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

**Open to Public
Inspection**

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES, INC.	Employer identification number 41-1386097
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FORM 990 - ORGANIZATION'S MISSION

TO RENEW PRIDE, RESTORE CONFIDENCE, PROMOTE REINVESTMENT AND REVITALIZE THE
NHS NEIGHBORHOOD(S) THROUGH THE EFFORTS OF LOCAL RESIDENTS ACTING IN
CONCERT WITH FINANCIAL INSTITUTIONS, THE INSURANCE INDUSTRY, CORPORATE
ENTERPRISE AND THE BUSINESS COMMUNITY, COMMUNITY ORGANIZATIONS, FOUNDATIONS
AND GOVERNMENT.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

THE TARGETED BLOCK GRANT PROGRAM PROVIDED FUNDING FOR
REHABILITATION OF SUBSTANDARD HOUSES IN NEED OF REPAIR;
PROVIDED NO FINANCING.

COMMUNITY DEVELOPMENT BLOCK GRANT DEVELOPMENT PROGRAM

URBAN REVITALIZATION ACTION PROGRAM

HOME OWNERSHIP PRODUCTION PROGRAM

NEIGHBORHOOD HOUSING SERVICES OF AMERICA 1ST MORTGAGE

TARGETED BLOCK GRANT PROGRAM

HOME BUYER'S ASSISTANCE PROGRAM

AURORA ST. ANTHONY DEVELOPMENT FUND

COORDINATED HOUSING IMPROVEMENT PROGRAM FUND

SALES TAX AREA REVITALIZATION FUND

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

Name of the organization

Employer identification number

DAYTON'S BLUFF NEIGHBORHOOD

41-1386097

OFFICERS, DIRECTORS, AND EMPLOYEES ARE REQUIRED TO FILL OUT A FORM DISCLOSING ANY CONFLICTS OF INTEREST ANNUALLY OR PRIOR TO ACCEPTANCE OF A POSITION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL BOARD OF DIRECTORS REVIEW AND APPROVE COMPENSATION PACKAGES BASED ON COMPARABLE DATA AND ADEQUATELY DOCUMENT THE DELIBERATION AND DECISION MAKING PROCESS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS BOARD OF DIRECTORS REVIEW AND APPROVE COMPENSATION PACKAGES BASED ON COMPARABLE DATA AND ADEQUATELY DOCUMENT THE DELIBERATION AND DECISION MAKING PROCESS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION HISTORIC BLUFF LANDINGS NEGATIVE EQUITY \$ -364,789

19451 DAYTON'S BLUFF NEIGHBORHOOD

41-1386097

Federal Statements

FYE: 12/31/2017

Form 990 - Federal General Footnote

Description

SEE PRIVATE LETTER RULING REQUEST DATED MAY 15, 2013, CONTROL NUMBER: PLR-123088-13 IN REGARDS TO GREATER METROPOLITAN HOUSING CORPORATION/DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES - REQUEST FOR RULING UNDER SECTION 7701(I) OF THE INTERNAL REVENUE CODE.

**DAYTON'S BLUFF NEIGHBORHOOD
HOUSING SERVICES AND SUBSIDIARY**

REPORT ON AUDIT

**DECEMBER 31, 2017
(with comparative totals
for 2016)**

**DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES AND
SUBSIDIARY**

1

Consolidated Statements of Financial Position

December 31, 2017
(with comparative totals for 2016)

<u>ASSETS</u>	2017			2016	
	Unrestricted Fund	Temporarily Restricted Fund	Permanently Restricted Fund	Total	Total
Cash and cash equivalents	\$ 3,306,897	\$ 861,971	\$ 39,257	\$ 4,208,125	\$ 3,289,973
Accounts receivable (Note 4)	-	321,230	-	321,230	766,522
Accrued interest receivable	80	-	-	80	80
Prepaid expenses	1,477	175,401	-	176,878	254,878
Escrow for acquisition and rehabilitation	-	305,640	-	305,640	1,615,370
Loans receivable, net of allowance of \$243,000 in 2017 and \$259,000 in 2016 (Notes 5 and 7)	91,718	5,331,940	984,902	6,408,560	7,506,590
Certificates of deposit	100,000	-	-	100,000	100,000
Property held for resale	-	7,225,695	-	7,225,695	6,235,780
Investment in Shop 2012 LLC	(170,817)	-	-	(170,817)	(145,143)
Investment in Homes for Learning LP	-	-	-	-	(168)
Building and equipment, less accumulated depreciation of \$2,119,134 in 2017 and \$596,900 in 2016	215,550	1,514,538	-	1,730,088	487,916
Interfund receivable (payable)	656,857	(658,866)	2,009	-	-
TOTAL ASSETS	\$ 4,201,762	\$ 15,077,549	\$ 1,026,168	\$ 20,305,479	\$ 20,111,798
 <u>LIABILITIES AND FUND BALANCES</u>					
<u>Liabilities</u>					
Accounts payable	\$ 21,090	\$ -	\$ -	\$ 21,090	\$ 13,073
Accrued expenses	61,302	-	-	61,302	51,669
Escrow deposits	-	(15,245)	-	(15,245)	(16,574)
Deferred revenue	-	61,936	-	61,936	57,332
Committed loans	-	386,657	-	386,657	1,014,734
Notes payable (Note 6)	299,927	4,230,103	-	4,530,030	3,739,957
Total Liabilities	382,319	4,663,451	-	5,045,770	4,860,191
 <u>Fund Balances</u>					
Unrestricted	3,819,443	-	-	3,819,443	3,592,117
Temporarily restricted	-	10,414,098	-	10,414,098	10,633,322
Permanently restricted	-	-	1,026,168	1,026,168	1,026,168
Total Fund Balances	3,819,443	10,414,098	1,026,168	15,259,709	15,251,607
TOTAL LIABILITIES AND FUND BALANCES	\$ 4,201,762	\$ 15,077,549	\$ 1,026,168	\$ 20,305,479	\$ 20,111,798

The accompanying notes are an integral part of this financial statement.

**DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICES AND
SUBSIDIARY**

2

Consolidated Statements of Activities

Year Ended December 31, 2017
(with comparative totals for 2016)

	2017			2016	
	Unrestricted Fund	Temporarily Restricted Fund	Permanently Restricted Fund	Total	Total
<u>Support and Revenue</u>					
Support, contributions	\$ 50	\$ -	\$ -	\$ 50	\$ 15,719
<u>Revenue</u>					
Performance based contracts and grants	-	3,233,662	-	3,233,662	1,972,703
Loan interest	-	117,321	26,387	143,708	138,725
Grants repaid	-	109,663	-	109,663	97,626
Interest income	20,748	-	-	20,748	8,331
Loss on equity investments	(25,506)	-	-	(25,506)	(165,832)
Loss on property held for resale	-	(1,546,967)	-	(1,546,967)	(174,773)
Other income	55,078	419,217	-	474,295	312,867
	<u>50,320</u>	<u>2,332,896</u>	<u>26,387</u>	<u>2,409,603</u>	<u>2,189,647</u>
Total Support and Revenue	50,370	2,332,896	26,387	2,409,653	2,205,366
Net Assets Released From Restrictions	2,213,718	(2,187,331)	(26,387)	-	-
<u>Expenses</u>					
<u>Program Services</u>					
Construction and rehabilitation	3,360	-	-	3,360	10,703
Grants provided	1,323,567	-	-	1,323,567	1,284,135
Provision for loan losses	(6,692)	-	-	(6,692)	37,704
Rental property costs	46,983	-	-	46,983	38,803
Loan servicing fees	11,419	-	-	11,419	15,721
Interest	860	-	-	860	7,910
Total Program Services	1,379,497	-	-	1,379,497	1,394,976
<u>Management and General</u>	657,265	-	-	657,265	692,124
Total Expenses	2,036,762	-	-	2,036,762	2,087,100
Excess Revenue Over Expenses	227,326	145,565	-	372,891	118,266
Fund Balances, Beginning of Year	3,592,117	10,633,322	1,026,168	15,251,607	15,133,341
Equity from Historic Bluff Landings LLC	-	(364,789)	-	(364,789)	-
Fund Balances, End of Year	<u>\$ 3,819,443</u>	<u>\$ 10,414,098</u>	<u>\$ 1,026,168</u>	<u>\$ 15,259,709</u>	<u>\$ 15,251,607</u>

The accompanying notes are an integral part of this financial statement.

Jim Erchul
2707 South 8th Street
Minneapolis, MN 55454
(612) 339-1274 jimerchul@gmail.com

SUMMARY

Thirty plus years of diverse management, planning, administration, evaluation and policy development experience in the areas of housing, community development, and workforce development.

EXPERIENCE

- 1991-present Executive Director
Dayton's Bluff Neighborhood Housing Services St. Paul, MN
Responsible for overall administration and management of all the Agency's affordable housing programs, including a \$5 million revolving loan fund, and the new construction, rehabilitation and assisted purchase of single and multi-family housing totaling over 3,000 units.
- 1989-1991 Senior Planner/Interim Executive Director
Community Action for Suburban Hennepin Hopkins, MN
Administered the Agency's grant making programs in the areas of housing, community development, emergency services and workforce development.
- 1988-1989 Planner/Policy Analyst for the Assistant Commissioner
Minnesota Department of Jobs and Training St. Paul, MN
Advised the Assistant Commissioner on public policy issues related to housing, community development, and workforce development services for difficult to serve populations. Developed and implemented the Department's overall strategy to increase the level of services being provided to homeless individuals.
- 1987-1988 Assistant Director
Duluth Community Action Program Duluth, MN
Administered the agency's grant making programs and provided technical assistance to community-based nonprofit organizations working in the areas of housing, community development, energy conservation, and emergency services.
- 1983-1987 Community Development Specialist
Arrowhead Economic Opportunity Agency Virginia, MN
Served as principal staff for the Agency's Community Development Corporation. Raised over \$3 million annually for programs serving low-income people. Developed, implemented and evaluated projects in the areas of: housing, community and small business development, energy conservation and workforce development.

The Rondo Community Land Trust

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2017

Open to Public Inspection

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.
Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning _____, **and ending** _____

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

C Name of organization: **THE RONDO COMMUNITY LAND TRUST**
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **626 SELBY AVE**
 City or town, state or province, country, and ZIP or foreign postal code: **ST. PAUL MN 55104**

D Employer identification number: **41-1753148**

E Telephone number: **651-221-9884**

F Name and address of principal officer:
GREG FINZELL
626 SELBY AVE
ST. PAUL MN 55104

G Gross receipts \$: **995,477**

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)

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

J Website: **RONDOCLT.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1993** **M** State of legal domicile: **MN**

H(c) Group exemption number

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O					
	2 Check this box <input type="checkbox"/> 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	12		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12		
	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	3		
	6	Total number of volunteers (estimate if necessary)	6	12		
	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			
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	182,694	Current Year	958,257
	9	Program service revenue (Part VIII, line 2g)		19,081		36,961
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		169		259
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				0
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		201,944		995,477
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)				0
	14	Benefits paid to or for members (Part IX, column (A), line 4)				0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		60,127		118,976
	16a	Professional fundraising fees (Part IX, column (A), line 11e)				0
	b	Total fundraising expenses (Part IX, column (D), line 25) 4,123				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		115,073		62,944
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		175,200		181,920
	19	Revenue less expenses. Subtract line 18 from line 12		26,744		813,557
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	2,070,331	End of Year	2,568,361
	21	Total liabilities (Part X, line 26)		353,120		37,593
	22	Net assets or fund balances. Subtract line 21 from line 20		1,717,211		2,530,768

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

Signature of officer: **MELISSA PFEIFFER** Date: _____
 Type or print name and title: **TREASURER**

Paid Preparer Use Only

Print/Type preparer's name: **ZACHARY RYAN, CPA** Preparer's signature: **ZACHARY RYAN, CPA** Date: **10/10/18** Check if PTIN self-employed **P01247857**

Firm's name: **LETHERT, SKWIRA, SCHULTZ & CO. LLP** Firm's EIN: **41-0738189**
 Firm's address: **170 7TH PL E STE 100 SAINT PAUL, MN 55101-2361** Phone no.: **651-224-5721**

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 [X]

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 [X] 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 [X] 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 \$ 138,325 including grants of \$) (Revenue \$ 36,961)

THE ORGANIZATION, A COMMUNITY LAND TRUST (CLT), ACHIEVES PERMANENT, LONG-TERM HOUSING AFFORDABILITY THROUGH THE USE OF A GROUND LEASE. CLT HOMEBUYERS PURCHASE ONLY THE HOUSE, AND ENTER INTO A 99-YEAR GROUND LEASE WITH THE ORGANIZATION FOR THE EXCLUSIVE USE OF THE LAND. THE ORGANIZATION'S GROUND LEASE STATES THAT WHEN A HOMEOWNER DECIDES TO SELL THEIR HOME, THE HOUSE IS SOLD TO ANOTHER LOW-TO-MODERATE INCOME HOUSEHOLD FOR THE ORIGINAL PURCHASE PRICE PLUS 25% OF ANY APPRECIATION IN THE HOME'S VALUE. BY LIMITING MARKET APPRECIATION, PERMANENT AFFORDABILITY IS ENSURED AND INITIAL SUBSIDIES INVESTED IN MAKING THE HOME AFFORDABLE ARE SPREAD ACROSS GENERATIONS OF LOW-TO-MODERATE INCOME HOMEBUYERS.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 138,325

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
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		X
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		X
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		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
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		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
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		X
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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
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		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
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		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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.	X	

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

Main form area containing questions 1a through 14b and corresponding Yes/No columns. Includes sub-questions for various IRS forms and financial reporting.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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 [X]

Section A. Governing Body and Management

Table with 5 columns: Question ID, Question Text, 1a, 12, Yes, No. Rows include questions 1a through 9 regarding governing body members, relationships, and documentation.

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

Table with 5 columns: Question ID, Question Text, Yes, No. Rows include questions 10a through 16b regarding local chapters, policies, conflict of interest, whistleblower, document retention, and compensation.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MN
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
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:

THE ORGANIZATION
ST PAUL

626 SELBY AVE

MN 55104

651-221-9884

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, 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)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHARLES BRADLEY	1.00									
PRESIDENT	0.00	X		X			0	0	0	
(2) BETH KODLUBOY	1.00									
VICE PRESIDENT	0.00	X		X			0	0	0	
(3) MELISSA PFEIFFER	1.00									
TREASURER	0.00	X		X			0	0	0	
(4) KATHLEEN CASTLE	1.00									
SECRETARY	0.00	X					0	0	0	
(5) STEVE BUBUL	1.00									
DIRECTOR	0.00	X					0	0	0	
(6) LAURA SKJERLY	1.00									
DIRECTOR	0.00	X					0	0	0	
(7) BILL OEHRLEIN	1.00									
DIRECTOR	0.00	X					0	0	0	
(8) MARITZA MARIANAI	1.00									
DIRECTOR	0.00	X					0	0	0	
(9) MELVIN GILES	1.00									
DIRECTOR	0.00	X					0	0	0	
(10) JOSEPH IBHAZE	1.00									
DIRECTOR	0.00	X					0	0	0	
(11) GABRIELL PILLMANN	1.00									
DIRECTOR	0.00	X					0	0	0	

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 (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) MYCHAEL WRIGHT	1.00									
DIRECTOR	0.00	X					0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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 **0**

	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		X
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		X
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		X

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

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 **0**

Part VIII Statement of Revenue

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

Table with columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512-514. Rows include Contributions, Gifts, Grants and Other Similar Amounts (1a-1f), Program Service Revenue (2a-2g), and Other Revenue (3-12).

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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				
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				
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	97,598	86,862	9,760	976
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	13,842	13,842		
10 Payroll taxes	7,536	6,707	754	75
11 Fees for services (non-employees):				
a Management				
b Legal	843		801	42
c Accounting	12,100		11,495	605
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	4,506	316	3,965	225
12 Advertising and promotion	2,495	499	1,946	50
13 Office expenses	926	648	232	46
14 Information technology				
15 Royalties				
16 Occupancy	16,344	11,441	4,086	817
17 Travel	92	64	23	5
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	47	33	12	2
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,366	6,555	2,342	469
23 Insurance	3,769	2,638	943	188
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 RENTAL - REPAIRS AND MAIN	5,357	3,750	1,339	268
b MISCELLANEOUS	2,854	1,998	713	143
c OUTREACH	2,100	1,470	525	105
d TELEPHONE	1,344	941	336	67
e All other expenses	801	561	200	40
25 Total functional expenses. Add lines 1 through 24e	181,920	138,325	39,472	4,123
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 <input type="checkbox"/> 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	107,909	1	113,328	
	2	242,181	2	717,279	
	3	5,201	3	5,201	
	4	29,920	4	35,678	
	5				
			5		
	6				
			6		
	7	6,110	7	7,054	
	8		8		
	9	3,028	9	1,613	
	10a	1,654,758			
	10b	22,912	1,641,212	10c	1,631,846
	11			11	
	12			12	
	13			13	
14			14		
15		34,770	15	56,362	
16		2,070,331	16	2,568,361	
Liabilities	17	12,793	17	4,236	
	18		18		
	19		19		
	20		20		
	21		21		
	22			22	
	23			23	
	24	330,000	24	30,000	
	25	10,327	25	3,357	
	26	353,120	26	37,593	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	243,236	27	756,792	
	28	134,348	28	434,349	
	29	1,339,627	29	1,339,627	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30		30		
	31		31		
	32		32		
33	1,717,211	33	2,530,768		
34	2,070,331	34	2,568,361		

Part XI Reconciliation 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	995,477
2	Total expenses (must equal Part IX, column (A), line 25)	2	181,920
3	Revenue less expenses. Subtract line 2 from line 1	3	813,557
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,717,211
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,530,768

Part XII Financial Statements and Reporting

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

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? Yes 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? Yes No
 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? Yes No
 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? Yes No

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.

	Yes	No
2a		X
2b	X	
2c		X
3a		X
3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2017

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

THE RONDO COMMUNITY LAND TRUST

Employer identification number

41-1753148

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 12, 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).
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).
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).
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 X 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).
8 A community trust described in section 170(b)(1)(A)(vi).
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university.
10 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...
11 An organization organized and operated exclusively to test for public safety.
12 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).
a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s).
b Type II. A supporting organization supervised or controlled in connection with its supported organization(s).
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s).
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
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).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Rows (A) through (E) and a Total row.

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

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 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

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 99.95%; 15 Public support percentage from 2016 Schedule A, Part II, line 14 99.89%; 16a 33 1/3% support test—2017. 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 [X]; 16b 33 1/3% support test—2016. 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—2017. 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; 17b 10%-facts-and-circumstances test—2016. 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 10 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

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 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; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2016 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2016 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests—2017. 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—2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows include questions 1 through 10b regarding supported organizations, including their status, control, and support.

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 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? Row 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?

Section E. Type III Functionally-Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year. Sub-rows a, b, c. Row 2: Activities Test. Answer (a) and (b) below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer (a) and (b) below. Sub-rows a, b.

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 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Table with 3 columns: Description, (A) Prior Year, (B) Current Year (optional). Section A - Adjusted Net Income. Rows include Net short-term capital gain, Recoveries of prior-year distributions, Other gross income, Depreciation and depletion, and Adjusted Net Income.

Table with 3 columns: Description, (A) Prior Year, (B) Current Year (optional). Section B - Minimum Asset Amount. Rows include Aggregate fair market value of all non-exempt-use assets, Acquisition indebtedness, and Minimum Asset Amount.

Table with 3 columns: Description, (A) Prior Year, (B) Current Year (optional). Section C - Distributable Amount. Rows include Adjusted net income for prior year, Minimum asset amount for prior year, and Distributable Amount.

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

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017:			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

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.)

Area with horizontal dotted lines for supplemental information.

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2017

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

Employer identification number

THE RONDO COMMUNITY LAND TRUST

41-1753148

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

THE RONDO COMMUNITY LAND TRUST

Employer identification number

41-1753148

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE SAINT PAUL FOUNDATION 101 FIFTH STEET EAST, SUITE 2400 SAINT PAUL MN 55101	\$ 37,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	BIGELOW FOUNDATION 101 FIFTH STREET EAST, SUITE 2400 SAINT PAUL MN 55101	\$ 37,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	MCKNIGHT FOUNDATION 710 SOUTH 2ND STREET, SUITE 400 MINNEAPOLIS MN 55401	\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	CATHOLIC BISHOPS 1200 2ND AVE. SOUTH MINNEAPOLIS MN 55403	\$ 60,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	HJ ANDERSON FOUNDATION 342 FIFTH AVENUE NORTH, SUITE 200 BAYPORT MN 55003	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	HOME FUNDS 15 WEST KELLOG BOULEVARD 250 COURT HOUSE ST PAUL MN 55103	\$ 300,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE RONDO COMMUNITY LAND TRUST	Employer identification number 41-1753148
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HRK FOUNDATION 345 SAINT PETER STREET SUITE 120 SAINT PAUL MN 55102	\$ 146,952	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	MARDAG FOUNDATION 101 5TH ST E #2400 ST. PAUL MN 55101	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	BREMER TRUST 380 ST PETER ST #500 ST PAUL MN 55102	\$ 245,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

THE RONDO COMMUNITY LAND TRUST

41-1753148

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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?, 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?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)?, 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" on Form 990, Part IV, line 8.

Table with 2 columns: \$. Rows include: 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 on 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 on 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?

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on 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?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

- Table with columns: (a) Current year, (b) Prior year, (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 on 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:
(i) unrelated organizations
(ii) related organizations
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with columns: 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
d Equipment
e Other
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, and Other (A-H).

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows numbered 1 through 9.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 9.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Rows include Federal income taxes, OTHER ACCRUALS (1,827), FISCAL AGENT - NEW LENS (1,530), and Total (3,357).

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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 [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	995,477
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
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	
3	Subtract line 2e from line 1		3	995,477
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	995,477

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	181,920
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	
3	Subtract line 2e from line 1		3	181,920
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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	181,920

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.

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES AS ORGANIZATIONS DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 290.05 OF THE MINNESOTA STATUTE. THE ORGANIZATION'S OPEN AUDIT PERIODS ARE THE YEARS ENDED DECEMBER 31, 2014 THROUGH 2017. THE ORGANIZATION HAS ADOPTED THE RECOGNITION REQUIREMENTS FOR UNCERTAIN INCOME TAX POSITIONS AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, WITH NO CUMULATIVE EFFECT ADJUSTMENT REQUIRED. INCOME TAX BENEFITS ARE RECOGNIZED FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, ONLY WHEN IT IS DETERMINED THAT THE INCOME TAX POSITION WILL MORE-LIKELY-THAN-NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. THE ORGANIZATION HAS ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE IRS AND

Part XIII Supplemental Information (continued)

ALL STATE JURISDICTIONS WHERE IT OPERATES. THE ORGANIZATION BELIEVES THAT INCOME TAX FILING POSITIONS WILL BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL ADVERSE EFFECT ON THE ORGANIZATION'S FINANCIAL CONDITION, RESULTS OF OPERATIONS OR CASH FLOWS. ACCORDINGLY, THE ORGANIZATION HAS NOT RECORDED ANY RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES FOR UNCERTAIN INCOME TAX POSITIONS AT DECEMBER 31, 2017. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. THE ORGANIZATION BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR TAX RETURN YEARS PRIOR TO THE YEAR ENDED DECEMBER 31, 2014. THE ORGANIZATION'S POLICY IS TO CLASSIFY ANY INCOME TAX RELATED INTEREST AND PENALTIES IN INTEREST EXPENSE AND OTHER EXPENSES, RESPECTIVELY.

SCHEDULE O
(Form 990 or 990-EZ)

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

THE RONDO COMMUNITY LAND TRUST

Employer identification number

41-1753148

FORM 990 - ORGANIZATION'S MISSION

TO STRENGTHEN COMMUNITIES BY PROVIDING PERMANENTLY AFFORDABLE, SUSTAINABLE HOUSING FOR FAMILIES AND INDIVIDUALS AT OR BELOW 80% OF THE AREA MEDIAN INCOME; AND, TO PROMOTE THE LAND TRUST MODEL AS A METHOD OF PRESERVING AFFORDABLE HOUSING.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

MOST IMPORTANTLY, THIS AFFORDABLE HOUSING OPTION GIVES HOUSEHOLDS THAT COULD OTHERWISE ONLY AFFORD TO RENT THE OPPORTUNITY TO TAKE ADVANTAGE OF ALL OF THE BENEFITS OF HOMEOWNERSHIP; STABILITY, SECURITY, TAX BENEFITS, AND THE OPPORTUNITY TO EARN EQUITY AND APPRECIATION IN REAL ESTATE THAT IS NOT AVAILABLE THROUGH RENTING.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

MEMBERSHIP IS OPEN TO RESIDENTS OF RAMSEY COUNTY WHO ARE OVER THE AGE OF 18 AND WHO WANT TO MAKE OWNERSHIP OF QUALITY, PERMANENTLY AFFORDABLE HOMES POSSIBLE FOR OUR WHOLE COMMUNITY. RONDO CLT MEMBERS CREATE HOUSING THAT WILL STAY AFFORDABLE FOR DECADES.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

RONDO CLT MEMBERS SHAPE THE DIRECTION OF THE ORGANIZATION BY ELECTING THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS

RONDO CLT MEMBERS SHAPE THE DIRECTION OF THE ORGANIZATION BY VOTING AT

Name of the organization

Employer identification number

THE RONDO COMMUNITY LAND TRUST

41-1753148

MEMBERSHIP MEETINGS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE BOARD RECEIVES A DRAFT OF THE 990 FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD PRESIDENT CONDUCTS AN ANNUAL REVIEW OF THE EXECUTIVE DIRECTOR,
PROVIDES BOARD MEMBERS WITH A WRITTEN QUESTIONNAIRE, FOLLOWS UP WITH A
PHONE CALL AND PROVIDES THE REPORT TO THE BOARD. THE BOARD THEN DISCUSSES
FINDINGS AND SHARES WITH THE EXECUTIVE DIRECTOR. SALARY DATA AVAILABLE
FROM THE MINNESOTA COUNCIL OF NONPROFITS AND OTHER SOURCES IS USED TO
DETERMINE COMPENSATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
COPIES OF THE ARTICLES OF INCORPORATION, BYLAWS, FINANCIAL STATEMENTS, AND
CONFLICT OF INTEREST POLICY ARE AVAILABLE FOR REVIEW AT THE ORGANIZATION'S
OFFICE, UPON REQUEST.

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2017

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.
▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. **179**

Name(s) shown on return

THE RONDO COMMUNITY LAND TRUST

Identifying number
41-1753148

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	510,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,030,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	330

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	9,036
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	9,366
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2017)

62620 The Rondo Community Land Trust

41-1753148

FYE: 12/31/2017

Federal Statements

Tax-Exempt Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>InState Muni (\$ or %)</u>
INTEREST INCOME	\$ 259				1	
TOTAL	<u>\$ 259</u>					

62620 The Rondo Community Land Trust
 41-1753148
 FYE: 12/31/2017

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONSULTING	\$ 1,806		1,716	90
DATA PROCESSING	2,248		2,136	112
DUES AND SUBSCRIPTION	452	316	113	23
TOTAL	\$ 4,506	\$ 316	\$ 3,965	\$ 225

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACT SERVICES	\$ 405	284	101	20
LICENSES AND FEES	396	277	99	20
TOTAL	\$ 801	\$ 561	\$ 200	\$ 40

62620 The Rondo Community Land Trust
41-1753148
FYE: 12/31/2017

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
THE SAINT PAUL FOUNDATION	
CASH CONTRIBUTION	\$ 3,980
BIGELOW FOUNDATION	
CASH CONTRIBUTION	37,500
MCKNIGHT FOUNDATION	
CASH CONTRIBUTION	37,500
CATHOLIC BISHOPS	
CASH CONTRIBUTION	35,000
U.S. BANK	
CASH CONTRIBUTION	60,000
HJ ANDERSON FOUNDATION	
CASH CONTRIBUTION	5,000
HOME FUNDS	
CASH CONTRIBUTION	40,000
HRK FOUNDATION	
CASH CONTRIBUTION	300,000
MARDAG FOUNDATION	
CASH CONTRIBUTION	146,952
VANGUARD CHARITABLE	
CASH CONTRIBUTION	25,000
WATERSHED DISTRICT	
CASH CONTRIBUTION	5,000
BREMER TRUST	
CASH CONTRIBUTION	17,325
TOTAL	<u>245,000</u>
	<u>\$ 958,257</u>

62620 The Rondo Community Land Trust
41-1753148
FYE: 12/31/2017

Federal Statements

Schedule A, Part II, Line 9(e)

Description	Amount
INTEREST INCOME	\$ 259
LESS: DEDUCTIONS	-1,000
TOTAL	\$ -741

Schedule A, Part II, Line 12 - Current year

Description	Amount
LEASE FEES	\$ 7,023
RENTAL INCOME	29,846
OTHER INCOME	92
TOTAL	\$ 36,961

RONDO COMMUNITY LAND TRUST

REPORT ON AUDIT

DECEMBER 31, 2017

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of Rondo Community Land Trust

We have audited the accompanying financial statements of **Rondo Community Land Trust** (a nonprofit organization), which comprise the statements of financial position as of **December 31, 2017** and 2016, and the related statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of **Rondo Community Land Trust** as of **December 31, 2017** and 2016, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of functional expenses on page 11 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

November 9, 2018

LETHERT, SKWIRA, SCHULTZ & CO. LLP

RONDO COMMUNITY LAND TRUST

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RONDO COMMUNITY LAND TRUST

Statements of Financial Position
December 31, 2017 and 2016
(See Accountant's Audit Report)

	2017				2016			
	Unrestricted	Temporarily Restricted	Permanently Restricted	Total	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
ASSETS								
Cash	\$ 217,277	\$ 229,896	\$ -	\$ 447,173	\$ 232,213	\$ 73,700	\$ -	\$ 305,913
Cash, restricted	-	388,407	-	388,407	-	44,177	-	44,177
Total Cash	217,277	618,303	-	835,580	232,213	117,877	-	350,090
Accounts receivable	30,705	-	-	30,705	29,920	-	-	29,920
Grants receivable (Note 4)	-	5,201	-	5,201	-	5,201	-	5,201
Notes receivable (Note 5)	7,054	-	-	7,054	6,110	-	-	6,110
Inventory	56,362	-	-	56,362	23,501	11,270	-	34,771
Prepayments	1,614	-	-	1,614	3,028	-	-	3,028
Total Current Assets	313,012	623,504	-	936,516	294,772	134,348	-	429,120
Property and Equipment								
Land (Note 7)	-	56,147	1,339,627	1,395,774	-	56,147	1,339,627	1,395,774
Building (Note 7)	4,644	243,853	-	248,497	4,644	243,853	-	248,497
Equipment	10,487	-	-	10,487	10,487	-	-	10,487
Total	15,131	300,000	1,339,627	1,654,758	15,131	300,000	1,339,627	1,654,758
Less: Accumulated depreciation	10,487	12,425	-	22,912	13,546	-	-	13,546
Total Property and Equipment	4,644	287,575	1,339,627	1,631,846	1,585	300,000	1,339,627	1,641,212
Total Assets	\$ 317,656	\$ 911,079	\$ 1,339,627	\$ 2,568,362	\$ 296,357	\$ 434,348	\$ 1,339,627	\$ 2,070,332
LIABILITIES AND NET ASSETS								
Current Liabilities								
Accounts payable	\$ 4,236	\$ -	\$ -	\$ 4,236	\$ 12,793	\$ -	\$ -	\$ 12,793
Accrued expenses	3,358	-	-	3,358	10,327	-	-	10,327
Total Current Liabilities	7,594	-	-	7,594	23,120	-	-	23,120
Long-Term Debt (Note 6)								
Long-term debt	30,000	-	-	30,000	30,000	-	-	30,000
Net Assets	280,062	911,079	1,339,627	2,530,768	243,237	434,348	1,339,627	2,017,212
TOTAL LIABILITIES AND NET ASSETS	\$ 317,656	\$ 911,079	\$ 1,339,627	\$ 2,568,362	\$ 296,357	\$ 434,348	\$ 1,339,627	\$ 2,070,332

The accompanying notes are an integral part of this financial statement.

RONDO COMMUNITY LAND TRUST
 Statements of Activities
 Years Ended December 31, 2017 and 2016
 (See Accountant's Audit Report)

	2017				2016			
	Unrestricted Fund	Temporarily Restricted Fund	Permanently Restricted Fund	Total	Unrestricted Fund	Temporarily Restricted Fund	Permanently Restricted Fund	Total
Support and Revenue								
Program service fees	\$ 92	\$ -	\$ -	\$ 92	\$ 1,219	\$ -	\$ -	\$ 1,219
Fee revenue	7,023	-	-	7,023	11,370	-	-	11,370
Contributions	148,098	510,159	-	658,257	171,424	311,270	-	482,694
Rental Income	29,846	-	-	29,846	6,482	-	-	6,482
Interest	259	-	-	259	169	-	-	169
Net Assets Released from Restrictions	<u>33,428</u>	<u>(33,428)</u>	-	-	<u>2,048</u>	<u>(2,048)</u>	-	-
Total Support and Revenue	218,746	476,731	-	695,477	192,722	309,222	-	501,944
Expenses								
Program Services								
Total Program Expenses	136,880	-	-	136,880	144,387	-	-	144,387
Supporting Services								
Management & General	40,779	-	-	40,779	26,924	-	-	26,924
Fundraising	<u>4,262</u>	-	-	<u>4,262</u>	<u>3,889</u>	-	-	<u>3,889</u>
Total Supporting Services	45,041	-	-	45,041	30,813	-	-	30,813
Total Expenses	181,921	-	-	181,921	175,200	-	-	175,200
Increase in Net Assets	36,825	476,731	-	513,556	17,522	309,222	-	326,744
Net Assets, Beginning of Year	<u>243,237</u>	<u>434,348</u>	<u>1,339,627</u>	<u>2,017,212</u>	<u>225,715</u>	<u>125,126</u>	<u>1,339,627</u>	<u>1,690,468</u>
Net Assets, End of Year	\$ 280,062	\$ 911,079	\$ 1,339,627	\$ 2,530,768	\$ 243,237	\$ 434,348	\$ 1,339,627	\$ 2,017,212

The accompanying notes are an integral part of this financial statement.

RONDO COMMUNITY LAND TRUST

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Statements of Cash Flows
Years Ended **December 31, 2017** and 2016
(See Accountant's Audit Report)

<u>Cash Flows From Operating Activities</u>	<u>2017</u>	<u>2016</u>
Increase in net assets	\$ 513,556	\$ 326,744
Adjustments to reconcile increase in net assets to net cash provided by operating activities:		
Depreciation	9,367	3,717
Increase (decrease) in cash flows from:		
Cash, restricted	(344,230)	(42,661)
Accounts receivable	(785)	16,905
Grants receivable	-	2,500
Notes receivable	(944)	-
Inventory	(21,591)	183,378
Prepayments	1,414	(994)
Accounts payable	(8,558)	9,127
Accrued expenses	(6,969)	(2,668)
Net Cash Provided by Operating Activities	141,260	496,048
 <u>Cash Flows Used by Investing Activities</u>		
Purchase of property and land	-	(304,643)
 <u>Cash Flows From Financing Activities</u>		
Proceeds from long-term debt	-	30,000
Payments of long-term debt	-	(133,596)
Net Cash Used by Financing Activities	-	(103,596)
 Net Increase in Cash	141,260	87,809
 Cash, Beginning of Year	305,913	218,104
 Cash, End of Year	\$ 447,173	\$ 305,913

The accompanying notes are an integral part of this financial statement.

RONDO COMMUNITY LAND TRUST

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Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

NOTE 1 NATURE OF BUSINESS

Rondo Community Land Trust (The Organization) was incorporated in 1993 under the Minnesota Nonprofit Act to provide permanently affordable housing for low and moderate income and multi-generational households by exploring various development methods, remaining flexible in its revitalization approaches and working within priorities set by the community. The Organization creatively meets housing needs while preserving the economic and cultural diversity of the community. Programs of the Organization include:

Property Development and Home Ownership Program - The property development and home ownership program is aimed at first-time, low-income homebuyers. The program includes establishment of home ownership opportunities, training, and workshops.

Community Land Trust - A community land trust achieves permanent, long-term housing affordability through the use of a ground lease. Community land trust homebuyers purchase only the house, entering into a 99 year ground lease with the Organization for exclusive use of the land. The Organization's ground leases state that when a community land trust homeowner decides to sell the home, the house is sold to another qualified low to moderate income household for the original purchase price plus 25% of any appreciation in the home's value. This program is available to families living in Ramsey County that are at or below 80% of HUD median income guidelines. By limiting market appreciation, permanent affordability is ensured and initial subsidies invested in making the home affordable are spread across generations of low to moderate income homebuyers. Most importantly, this affordable housing option gives households that could otherwise only afford to rent the opportunity to take advantage of all of the benefits of homeownership including stability, security, tax benefits, and the opportunity to earn equity and appreciation in real estate that is not available through renting.

Long-Term Affordability - The Organization provides affordable housing by purchasing and rehabilitating properties, and then reselling these single-family homes to income-qualified families and individuals at below market sales price. The goal is to provide housing for low-income households at or below 80% HUD AMI. In order to accomplish this, Rondo CLT writes down the cost of the project below the market value to ensure it is affordable for the first household and future generations. The cost of the writedown below the market value is an expense built into the initial project costs.

To ensure affordability for future generations, the Organizations's ground lease includes a 25% limited appreciation formula that is used upon resale of the home. This formula allows the home to remain affordable for the next generation of homebuyers, while allowing the original buyer to gain equity. The initial investment in affordable housing is recycled again and again.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND USE OF ACCOUNTING ESTIMATES

Financial Statement Presentation

The financial statements of the Organization have been prepared on the accrual basis of accounting.

RONDO COMMUNITY LAND TRUST

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Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND USE OF ACCOUNTING ESTIMATES (CONTINUED)

The Organization follows "Financial Statements of Not-for-Profit Organizations" which establishes standards for external financial reporting by not-for-profit organizations and requires that resources be classified for accounting and reporting purposes into three net asset categories according to externally (donor) imposed restrictions. A description of the three net asset categories follows.

Unrestricted net assets have no donor imposed restrictions, or the donor-imposed restrictions have expired. Unrestricted net assets may be designated for a specific purposes by the Board of Directors.

Temporarily restricted net assets have donor-imposed restrictions that are satisfied either by the passage of time or expenditures that meet the donor-specified purpose.

Permanently restricted net assets have donor-imposed restrictions which do not expire.

Accounting Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Promises to Give

Contributions are recognized when the donor makes a promise to give that is, in substance, unconditional. Promises to give represent amounts committed by donors that have not yet been received by the Organization. The Organization uses the allowance method to determine uncollectible promises to give.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all cash and other highly liquid debt instruments with an original maturity of three months or less to be cash equivalents.

The Organization maintains, as required by grant agreements, a separate bank account for funding provided by the Family Housing Fund (FHF) and the City of St. Paul. At **December 31, 2017** and 2016, an account balance of **\$387,399** and \$43,169 was included in cash - escrow deposits.

The Organization maintains, as required by the State of Minnesota, a separate bank account for acting as a limited broker. Escrow deposits made by home purchasers are required to be held in the account and interest earned must be remitted to the State of Minnesota. At **December 31, 2017** and 2016, an account balance of **\$1,008** and \$1,008 was included in cash - escrow deposits.

RONDO COMMUNITY LAND TRUST

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Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

**NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
AND USE OF ACCOUNTING ESTIMATES (CONTINUED)**

Inventory

Inventory consists of houses and lots acquired by the Organization for rehabilitation and resale. The houses and lots are valued at the lower of specific acquisition of carrying costs or appraised value.

The Organization uses the completed contract method of accounting for construction projects. Because the amount of funds and grants (grant funds are used to allow an income-qualified buyer to purchase a property at below market value) to be received upon future sale of properties is uncertain, management has determined that this method more accurately reflects this uncertainty and the current operations.

Property, Plant, and Equipment

Property, plant and equipment are stated at cost less accumulated depreciation. Depreciation is provided on the straight-line method over the estimated useful lives of the assets, ranging from 3 to 27.5 years.

Contributions

Contributions are recognized when the donor makes a promise to give that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the year in which the contributions are recognized. All other contributions are recorded as unrestricted, temporarily restricted, or permanently restricted support depending on the existence and/or nature of any donor restrictions. Contributions are considered to be available for unrestricted use unless specifically restricted by the donor.

No interest is charged on the note receivables per management policy.

Revenues

Donations, grants, contributions, and all other forms of revenue are considered unrestricted use unless specifically restricted by the donor. Grants from governmental agencies are recorded as contributions when notification is received. Expenditures under government contracts are subject to review by the granting authority. To the extent, if any, that such a review reduces expenditures allowable under those contracts, the Organization will record such disallowance during the year in which the determination is made. Service fees are recorded as revenue when earned.

Forgiveable Loan Contributions

The Organization recognizes and records forgiveable loans as a contribution or grant in the period they are received if the loan agreement specifies the lender will forgive the loan under a defined set of conditions, and violation of the conditions which will lead to forgiveness is considered a remote possibility. These contributions or grants are recognized as temporarily restricted revenue when received and released from restriction when those conditions have been met.

RONDO COMMUNITY LAND TRUST

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Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

**NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
AND USE OF ACCOUNTING ESTIMATES (CONTINUED)**

Donated Materials and Services

Donated materials are reflected as contributions in the financial statements at their estimated fair values at the date of receipt. Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received.

For the years ended **December 31, 2017** and 2016, there were no donated materials or contributed services that met these requirements.

Income Taxes

The Organization was granted tax-exempt status under Section 501(c)(3) of the Internal Revenue Code and similar state provisions. The Organization is not classified as a private foundation. Accordingly, no provision for income taxes has been provided for in these financial statements.

The Organization follows a "more likely than not" criterion for recognizing the tax benefit of uncertain tax positions; it established measurement criteria for tax benefits and it established certain new disclosure requirements. The Organization has identified no such exposures. The current tax years open are 2015 through 2017. During the upcoming 12 months, the Organization expects no material changes to occur related to Accounting for Uncertainty in Income Taxes.

The Organization recognizes interest and penalties accrued related to unrecognized tax benefits in interest expense and other expenses, respectively. The amount of interest and penalties expensed totaled \$0 and \$0 for the years ended **December 31, 2017** and 2016, respectively.

Functional Expense Allocation

The majority of expenses can generally be directly identified with the program or supporting service to which they relate and are charged accordingly. Other expenses by function are allocated to components of these services based on ratios determined by management.

**NOTE 3 CONCENTRATIONS OF CREDIT RISK ARISING FROM CASH
DEPOSITED IN EXCESS OF INSURED LIMITS**

Financial instruments that potentially subject the Organization to concentrations of credit risk consist principally of cash and temporary cash investments. The Organization maintains its cash balances at two financial institutions. Accounts at one of these institutions are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. Account at the other institution may be privately insured.

At **December 31, 2017** and 2016, amounts in excess of insured limits were approximately \$373,000 and \$44,000, respectively.

NOTE 4 GRANTS RECEIVABLE

RONDO COMMUNITY LAND TRUST

Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

NOTE 4 GRANTS RECEIVABLE (CONTINUED)

At December 31, 2017 and 2016, grants receivable consists of the following:

	2017	2016
Neighborhood STAR Program	\$ 5,201	\$ 5,201

NOTE 5 NOTES RECEIVABLE

The Organization occasionally provides one-time loans to their leaseholders for up to two mortgage payments in time of need. The loan agreements specify repayment terms and are secured by the owner's property. At December 31, 2017 and 2016, the total of these loans, net of allowance for doubtful accounts of \$6,000, amounted to \$7,054 and \$6,110, respectively.

NOTE 6 LONG-TERM DEBT

Long-term debt consists of the following:

	2017	2016
Loan payable to LISC bearing interest of 0%, matures July, 2018. Unsecured.	\$ 30,000	\$ 30,000

The aggregate annual maturities of long-term debt at December 31, 2017, are as follows:

Year Ended December 31,	Amount
2018	\$ 30,000

NOTE 7 FORGIVABLE LOAN

The Organization received a contribution from Ramsey County on July 11, 2016, in the form of a building and land, subject to a forgivable loan of \$300,000, bearing interest of 0% and forgivable after 18 years. The Organization has treated this as a temporarily restricted contribution due to the remote likelihood of violating the conditions of the loan.

NOTE 8 TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets consist of the following:

	2017	2016
HOME CHDO	\$ 107,267	\$ 116,352
Neighborhood STAR Program	5,201	5,201
Selby Milton Victoria Development	387,325	517
State of Minnesota escrow	1,008	1,008
Grant US Bank	-	11,270
Ramsey County	287,575	300,000
Morgan Stanley	122,703	-
Total Temporarily Restricted Net Assets	\$ 911,079	\$ 434,348

NOTE 9 RELATED PARTY TRANSACTIONS

RONDO COMMUNITY LAND TRUST

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Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

NOTE 9 RELATED PARTY TRANSACTIONS (CONTINUED)

HUD provides "HOME" funds, under Title II of the Cranston-Gonzales National Affordable Housing Act, to the Organization through the City of St. Paul and Ramsey County. These funds are either Community Housing Development Organizations (CHDO) or non-CHDO funds and are used to assist low-income homebuyers in the purchase and rehabilitation of properties in the Rondo neighborhood.

During the year ended December 31, 2012, the rules for qualification for CHDO funds changed. Previously, the Organization was able to assist the buyer in the purchase and rehabilitation of a property, without ever having any ownership interest in the property. HUD now requires the Organization to purchase the property, rehabilitate it, and then sell it to the buyer in order to qualify for CHDO funds. On May 16, 2012, in order to limit the liability of the Organization in these transactions, the Organization set up a limited liability company, Rondo Development, LLC, to hold these properties during the purchase, rehabilitation, and sale process. No activity in the current year.

NOTE 10 RISKS AND UNCERTAINTIES

The Organization depends upon contributions and grants for a significant portion of its revenue. The ability of the Organization's contributors and grantors to continue giving amounts comparable to those of prior years is dependent upon future economic conditions and continued deductibility for income tax purposes of contributions and grants to the Organization. Management believes the Organization currently has the resources to continue its programs.

The Organization provides affordable housing by purchasing and rehabilitating properties, and then reselling these single family homes to income-qualified families and individuals at below market sales price. In most cases, the sale price is less than the cost of the project. The difference is covered by grant funds. Leaseholders also agree to limit the appreciation realized at the time of future sale. These two strategies help to ensure that properties within the land trust remain affordable in the long term while also allowing for current owners to build wealth as part of home ownership. The actual sale price and the amount of grant funds attributed to the project are unknown until the sale has been completed, and are not reasonably estimable. Accordingly, no accrual has been made.

NOTE 11 SUBSEQUENT EVENTS

The Organization has evaluated subsequent events through **November 9, 2018**, the date the financial statements were available to be issued.

Subsequent to year-end, the Organization entered into an investment in the Selby Milton Victoria development, a mixed-use development project consisting of senior rental housing and commercial space in St. Paul. The Organization's total exposure in the project is unknown, but expected to be recouped as the project progresses. As of **December 31, 2017**, the Organization has received grants totaling **\$387,325** that are restricted to fund this project.

RONDO COMMUNITY LAND TRUST

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Notes to Financial Statements
December 31, 2017 and 2016
(See Accountant's Audit Report)

NOTE 12 UPCOMING ACCOUNTING PRONOUNCEMENT

The Financial Accounting Standards Board has issued an accounting standard that will result in significant changes to financial reporting and disclosures for nonprofit organization. The amendments are intended to make immediate improvements that address complexity of net asset classifications, clarity on information regarding liquidity and availability of cash, transparency in reporting of financial performance measures, consistency in reporting expenses by function and nature and utility of the statement of cash flows. The provisions of this statement are effective for the Bureau's financial statements for the year ending December 31, 2018.

The Financial Accounting Standards Board has issued an accounting standard that will result in changes to the timing of when an organization will recognize income. Revenues will be recognized when the promised goods or services are transferred to its customers in an amount that reflects the consideration to which the organization expects to be entitled in exchange for those goods or services. This standard also included expanded disclosure requirements that result in an entity providing users of financial statements with comprehensive information about the nature, amount, timing, and uncertainty of revenue and cash flows arising from the entity's contracts with customers. The provisions of this statement are effective for the Bureau's financial statements for the year ending December 31, 2019.

Supplementary Information to Follow

RONDO COMMUNITY LAND TRUST

Schedules of Functional Expenses
December 31, 2017 and 2016
(See Accountant's Audit Report)

	2017					2016				
	Total Program Expenses	SUPPORTING SERVICES			Total All Funds	Total Program Expenses	SUPPORTING SERVICES			Total All Funds
		Management & General	Fundraising	Total Supporting Services			Management & General	Fundraising	Total Supporting	
Personnel Costs										
Salaries	\$ 86,862	\$ 9,760	\$ 976	\$ 10,736	\$ 97,598	\$ 41,892	\$ 4,237	\$ 941	\$ 5,178	\$ 47,070
Employee benefits	12,402	1,301	139	1,440	13,842	7,553	763	170	933	8,486
Payroll taxes	6,707	754	75	829	7,536	4,068	412	91	503	4,571
Total Salaries and Related Benefits	105,971	11,815	1,190	13,005	118,976	53,513	5,412	1,202	6,614	60,127
Rehabilitation project expenses	-	-	-	-	-	61,614	-	-	-	61,614
Donated materials	1,470	525	105	630	2,100	3,086	1,103	220	1,323	4,409
Professional services	-	16,148	850	16,998	16,998	-	11,428	601	12,029	12,029
Office supplies	558	199	40	239	797	573	205	41	246	819
Telephone	941	336	67	403	1,344	937	335	67	402	1,339
Postage	90	33	6	39	129	28	10	2	12	40
Occupancy costs	11,441	4,086	817	4,903	16,344	9,815	3,505	701	4,206	14,021
Repairs and maintenance	3,750	1,339	268	1,607	5,357	8,238	1,957	588	2,545	10,783
Printing	-	64	-	28	92	57	20	4	24	81
Travel	-	23	5	28	92	78	27	6	33	111
Conferences, conventions, and meetings	33	12	2	14	47	9	3	1	4	13
Advertising	499	1,946	50	1,996	2,495	175	678	13	691	866
Contract services	284	101	20	121	405	177	63	13	76	253
Dues, memberships, and subscriptions	316	113	23	136	452	228	86	11	97	325
Insurance	2,638	943	188	1,131	3,769	2,612	933	187	1,120	3,732
Licenses and fees	277	99	20	119	396	281	100	20	120	401
Miscellaneous	1,997	713	143	856	2,853	364	130	26	156	520
Total Expenses Before Depreciation	130,329	38,431	3,794	42,225	172,554	141,785	25,995	3,703	29,698	171,483
Depreciation	6,551	2,348	468	2,816	9,367	2,602	929	186	1,115	3,717
Total Expense	\$ 136,880	\$ 40,779	\$ 4,262	\$ 45,041	\$ 181,921	\$ 144,387	\$ 26,924	\$ 3,889	\$ 30,813	\$ 175,200

Gregory M. Finzell

1183 Ashland Avenue
St. Paul, Minnesota 55104
Phone (651) 647-0862

Professional Experience and Accomplishments

1992 to Present *Executive Director - Rondo Community Land Trust, St. Paul*

Responsibilities:

- Assisted in the formation of new non-profit Housing Corporation located in St. Paul, Minnesota.

Accomplishments:

- Assisted in establishing the first community based housing land trust in the Minneapolis/St. Paul metropolitan area.
- Oversee the renovation, building new single-family houses and assisted in the development of the HIP and HIP/HOP programs. Formed partnerships with other non-profits, Foundation, government and neighborhood volunteers. All homes are sold to families at or below 80% of median income. Majority of homes are sold to households of color.
- Supervise and direct all employees
- Responsible for ensuring all administrative and organizational tasks are accomplished, including annual budget preparation and maintenance, public relations and fundraising.
- Oversee the development of the Selby Milton Victoria Project and other multifamily and economic development work.

1984 to 1992 *Executive Director, Summit - University Planning Council, St Paul*

Responsibilities:

- Developed policy statements with community members to be presented to public agencies on issues such as affirmative action, low-income housing and youth employment
- Represented the Board's position at various public agencies including the City Council, Metropolitan Council and the Planning Commission
- Develop yearly action plans, goals and objectives with Board of Directors and community members
- Supervise and direct all employees
- Responsible for ensuring all administrative and organizational tasks are accomplished, including annual budget preparation and maintenance, public relations and monthly newsletter, quarterly reports and meeting agendas and minutes

Accomplishments:

- Increased and maintained a high level of neighborhood participation in the Summit-University Planning Council board.
- Expanded funding support of the organization to include private as well as public sources.
- Assisted residents in creations of a Community Land Trust for the Summit-University and Lexington Hamline communities.
- Worked for two years with two other neighborhood organizations to develop an alternative Lexington Parkway plan reflecting the needs of the neighborhood residents. This plan was adopted by City Council.

- Worked with neighborhood residents in a successful effort to convince the City Council to preserve a neighborhood park in the face of outside development pressures.
- Developed new female and minority leadership on the Board of Directors.
- Facilitated development of the first five year plan for the organization.

1980- 1984

Responsibilities:

Executive Director - Hawthorne Area Community Council, Minneapolis

- Organized task forces around crime prevention, housing, special events and youth activities
- Staff for committees and Board for neighborhood review of development proposals in the neighborhood
- Financial management, legal matters and coordinating monthly newsletter
- Supervision of staff
- Grant writing and grassroots fundraising

Accomplishments:

- Raised over \$150,000 in 1983 and 1984 from Foundation and grassroots sources when government funding was cut off
- Planned and developed the Hawthorne Area Neighborhood Dispute Service, (HANDS) a neighborhood dispute mediation project.
- Planned and developed the youth employment project, eight youths were hired to renovate and repair home exteriors for seniors and low income residents
- Opened up communications between North and Southside community organizations
- Developed new neighborhood leadership
- Developed good working relationships with various City and State agencies

Summer 1980

Responsibilities:

Housing Law Research/Support Staff, Northside Legal Aid, and Minneapolis, MN

- Housing law research, as assigned by attorneys

1978- 1980

Responsibilities:

Community Organizer - Pillsbury United Neighborhood Services (Formerly Northside Settlement Services Inc.), Minneapolis, MN

- Responsible for organizing Northside Redlining Task Force
- Organized mailing list of over 100 names and organizations
- Responsible for research of local bank and insurance lending practices within inner-city areas

Accomplishments:

- Researched and helped develop "Consumer Rights to Homeowner Insurance" published in conjunction with the State Insurance Commission
- Co-Authored banking practices report "A Study of Minneapolis Area Mortgage Loan Disclosure Data"

Education

Spring 1999	<i>National Community Land Trust Conference, St. Paul, MN Rondo CLT was local sponsor of national conference.</i>
Fall 1991	<i>National Community Land Trust Conference, Burlington VT Training to establish a community based land trust.</i>
Summer 1983	<i>San Francisco Community Boards Program, San Francisco, CA Training session in neighborhood dispute resolution</i>
Spring 1979	<i>National Training and Information Center, Chicago, IL Community Organizers Training Program</i>
1977- 1980	<i>University of Minnesota - Housing and Community Development</i>

Other Activities

- Former Walker West Music Academy Board member
- Member of Community Shares of Minnesota, Board Member and Access/Campaign Committee, 2006 to 2010
- Member of the Children, Families Community Initiative Advisory Committee of the Bigelow Foundation 1995- 2001
- Member of Urban Coalition Community Information Clearinghouse Committee, 1993- 1999
- Member Ward One Housing Committee, 1994-2001
- Vice President of Board of Directors, Lexington Hamline Community Council, 1993-94.
- Founding Member, Minnesota Move, State-wide coalition addressing transportation issues, 1993-94.
- Member of Living Environment Committee, Lexington Hamline Community Council, 1992.
- Neighborhood Leadership Initiatives Grant Recipient, St. Paul Companies 1989.
- Founding Member, St. Paul Coalition for Community Development 1984-1997
- Elected to Mayor's Task Force on Neighborhoods, Minneapolis, MN March 1984 - November 1984, Chairperson of Citizen Participation Task Force.
- Board member, Common Space 1982 - 1984
- Founding Member, Minneapolis Neighborhood Priorities Coalition, 1981 - 1984.

Neighborhood Development Center

Form **990**

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEIGHBORHOOD DEVELOPMENT CENTER, INC.		D Employer identification number 41-1738791
	Doing business as		E Telephone number 651-291-2480
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 5,673,953.
	663 UNIVERSITY AVENUE	200	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code SAINT PAUL, MN 55104		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
F Name and address of principal officer: MIHAILO TEMALI SAME AS C ABOVE		H(c) Group exemption number	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.NDC-MN.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1993 M State of legal domicile: MN	

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: NDC'S MISSION STATEMENT IS TO EMPOWER ENTREPRENEURS AND COMMUNITY PARTNERS TO TRANSFORM LOW-INCOME		
	2 Check this box <input type="checkbox"/> 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	14
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	33
	6 Total number of volunteers (estimate if necessary)	6	30
	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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,595,591.	4,728,643.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	783,270.	800,113.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,984.	2,198.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-58,591.	-114,852.
		2,322,254.	5,416,102.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	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)	2,054,819.	2,386,944.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) 82,224.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,099,563.	1,812,888.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,154,382.	4,199,832.	
19 Revenue less expenses. Subtract line 18 from line 12	-832,128.	1,216,270.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	8,904,505.	10,915,641.
	22 Net assets or fund balances. Subtract line 21 from line 20	4,764,456.	5,589,322.
		4,140,049.	5,326,319.

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	Signature of officer	Date	
	MIHAILO TEMALI, PRESIDENT AND CEO		
Paid Preparer Use Only	Print/Type preparer's name LANCE J. BROCK	Preparer's signature <i>Lance J Brock</i>	Date 11/15/18
	Firm's name MAHONEY, ULBRICH, CHRISTIANSEN & RUSS P.A.	Firm's EIN 41-1647057	Check if self-employed <input type="checkbox"/> PTIN P01919631
	Firm's address 10 RIVER PARK PLAZA, SUITE 800 SAINT PAUL, MN 55107	Phone no. (651) 227-6695	

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
NDC'S MISSION STATEMENT IS TO EMPOWER ENTREPRENEURS AND COMMUNITY PARTNERS TO TRANSFORM LOW-INCOME NEIGHBORHOOD ECONOMIES FROM WITHIN.

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 [X] No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 1,493,949. including grants of \$) (Revenue \$ 143,524.)
REAL ESTATE DEVELOPMENT INITIATIVE PROGRAM - ENCOURAGE REVITALIZATION, PROPERTY OWNERSHIP, AND BUSINESS OWNERSHIP IN TARGETED NEIGHBORHOODS BY WITHIN WITH SPECIFIC ENTREPRENEURS AND NEIGHBORHOODS.

4b (Code:) (Expenses \$ 788,821. including grants of \$) (Revenue \$ 351,207.)
LENDING AND FINANCING PROGRAM - THE LENDING AND FINANCING PROGRAM PROVIDES FUNDS TO START-UP AND EXISTING BUSINESSES. NDC HAS A FIVE MILLION DOLLAR REVOLVING LOAN FUND. LOANS ARE GRANTED TO BUSINESSES THAT MEET CERTAIN GEOGRAPHICAL, INCOME, AND ETHNIC REQUIREMENTS. A PORTION OF AVAILABLE FUNDS IS USED FOR ISLAMICALLY ACCEPTABLE FINANCING. NDC APPROVED 43 LOANS - 14 SMALL BUSINESS LOANS (\$50K OR LARGER) AND 29 MICROLOANS (LESS THAN \$50K) TOTALING \$2,348,225 IN PRIMARY AND OTHER TARGET NEIGHBORHOODS.

4c (Code:) (Expenses \$ 660,227. including grants of \$) (Revenue \$ 226,582.)
TECHNICAL ASSISTANCE PROGRAM - ENCOURAGE GROWTH OF NEW AND EXISTING BUSINESSES IN THE COMMUNITY. NDC PROVIDED OVER 5,000 HOURS OF TECHNICAL ASSISTANCE TO 248 BUSINESSES IN HIGH-NEED TARGET NEIGHBORHOODS.

4d Other program services (Describe in Schedule O.)
(Expenses \$ 525,294. including grants of \$) (Revenue \$ 28,556.)

4e Total program service expenses 3,468,291.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
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	X	

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	51	
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?	X	
	1c		
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	33	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
	3a		
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)?		X
	4a		
b	If "Yes," enter the name of the foreign country: <input type="text"/> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
	4b		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	5b		
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?		X
	6a		
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?		X
	7a		
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?		X
	7c		
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?		X
	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	N/A	
	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? N/A		
	8		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A		
	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A		
	9b		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders N/A	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	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 N/A	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? N/A <i>Note.</i> 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	X
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 line 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	14		
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	14		
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?	X	
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
8a			
b	Each committee with authority to act on behalf of the governing body?	X	
8b			
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		X
9			

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?		X
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?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
11b			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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	X	
15a			
b	Other officers or key employees of the organization	X	
15b			
	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?		X
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 **MN**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request 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: **TESHITE WAKO - 651-291-2480**
663 UNIVERSITY AVENUE, ST PAUL, MN 55104

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PATTI TOTOTZINTLE CHAIR	1.00	X		X				0.	0.	0.
(2) TERRI FLEMING VICE CHAIR	1.00	X		X				0.	0.	0.
(3) DENNIS PRCHAL SECRETARY	1.00	X		X				0.	0.	0.
(4) LEIGH-ERIN IRONS BOARD MEMBER	1.00	X						0.	0.	0.
(5) ASAD ALIWEYD BOARD MEMBER	1.00	X						0.	0.	0.
(6) JIM GRAVES BOARD MEMBER	1.00	X						0.	0.	0.
(7) MARCUS OWENS BOARD MEMBER	1.00	X						0.	0.	0.
(8) WILLIAM SANDS BOARD MEMBER	1.00	X						0.	0.	0.
(9) MARGO GEFFEN BOARD MEMBER	1.00	X						0.	0.	0.
(10) LACHELLE CUNNINGHAM BOARD MEMBER	1.00	X						0.	0.	0.
(11) MIKE GOZE BOARD MEMBER	1.00	X						0.	0.	0.
(12) SANDRA SPONEM BOARD MEMBER	1.00	X						0.	0.	0.
(13) JULIANA TANNING BOARD MEMBER	1.00	X						0.	0.	0.
(14) GEBI TUFAA BOARD MEMBER	1.00	X						0.	0.	0.
(15) MIHAILO TEMALI PRESIDENT & CEO	40.00			X				161,692.	0.	23,690.

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals for lines 1b, 1c, and 1d.

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 1

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Row 1 contains 'NONE' in column A.

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 0

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	57,187.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	2,202,220.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,469,236.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		4,728,643.				
Program Service Revenue	2 a	LOAN INTEREST INCOME	Business Code	900099	279,129.	279,129.		
	b	CONTRACT INCOME	531390	226,582.	226,582.			
	c	PROPERTY MGMT FEES	531310	193,768.	193,768.			
	d	OTHER INCOME	900099	72,078.	72,078.			
	e	CLASS FEES	611600	28,556.	28,556.			
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		800,113.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,198.			2,198.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real	142,999.				
		Less: rental expenses	(ii) Personal	193,243.				
		Rental income or (loss)		-50,244.				
	d	Net rental income or (loss)		-50,244.	-50,244.			
	7 a	Gross amount from sales of assets other than inventory	(i) Securities					
		Less: cost or other basis and sales expenses	(ii) Other					
		Gain or (loss)						
	d	Net gain or (loss)						
	8 a	Gross income from fundraising events (not including \$ 57,187. of contributions reported on line 1c). See Part IV, line 18	a	0.				
		Less: direct expenses	b	64,608.				
		Net income or (loss) from fundraising events		-64,608.				-64,608.
9 a	Gross income from gaming activities. See Part IV, line 19	a						
	Less: direct expenses	b						
	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	a						
	Less: cost of goods sold	b						
	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See instructions.			5,416,102.	749,869.	0.	-62,410.	

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				
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	185,382.	92,691.	55,615.	37,076.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,717,218.	1,411,961.	291,263.	13,994.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	346,090.	282,304.	59,448.	4,338.
10 Payroll taxes	138,254.	111,156.	23,846.	3,252.
11 Fees for services (non-employees):				
a Management	174,179.	85,729.	82,423.	6,027.
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	123,976.	71,674.	46,025.	6,277.
14 Information technology				
15 Royalties				
16 Occupancy	99,652.	84,316.	13,496.	1,840.
17 Travel	31,996.	15,660.	14,376.	1,960.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,882.	5,674.	12,503.	1,705.
20 Interest	45,139.	45,139.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	10,528.	8,738.	1,579.	211.
23 Insurance	48,070.	38,648.	8,291.	1,131.
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 MIDTOWN GLOBAL MARKET	649,833.	649,833.		
b PROJECT EXPENSES	301,454.	292,716.	8,738.	
c PROVISION FOR LOAN LOSS	176,559.	176,559.		
d FORGIVENESS OF ACCOUNTS	73,955.	73,955.		
e All other expenses	57,665.	21,538.	31,714.	4,413.
25 Total functional expenses. Add lines 1 through 24e	4,199,832.	3,468,291.	649,317.	82,224.
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	443,307.	1 581,087.
	2	Savings and temporary cash investments	1,636,124.	2 1,627,765.
	3	Pledges and grants receivable, net	282,500.	3 2,024,000.
	4	Accounts receivable, net	388,835.	4 407,404.
	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 instr). Complete Part II of Sch L		6
	7	Notes and loans receivable, net	5,400,432.	7 5,478,302.
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	54,970.	9 27,532.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,557,547.	
	b	Less: accumulated depreciation	10b 929,966.	10c 627,581.
	11	Investments - publicly traded securities		11
	12	Investments - other securities. See Part IV, line 11		12
	13	Investments - program-related. See Part IV, line 11	109,000.	13 141,970.
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11		15
16	Total assets. Add lines 1 through 15 (must equal line 34)	8,904,505.	16 10,915,641.	
Liabilities	17	Accounts payable and accrued expenses	311,059.	17 418,628.
	18	Grants payable		18
	19	Deferred revenue	20,000.	19 5,000.
	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	3,974,397.	23 4,823,161.
	24	Unsecured notes and loans payable to unrelated third parties	293,293.	24 293,293.
	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	165,707.	25 49,240.
	26	Total liabilities. Add lines 17 through 25	4,764,456.	26 5,589,322.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	3,301,532.	27 2,893,837.
	28	Temporarily restricted net assets	838,517.	28 2,432,482.
	29	Permanently restricted net assets		29
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	4,140,049.	33 5,326,319.	
34	Total liabilities and net assets/fund balances	8,904,505.	34 10,915,641.	

Part XI Reconciliation 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	5,416,102.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,199,832.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,216,270.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,140,049.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-30,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,326,319.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
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:		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	X	
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?	X	
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	X	

SCHEDULE A
(Form 990 or 990-EZ)

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number

41-1738791

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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 above (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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3139125.	2686152.	3626995.	1595591.	4728643.	15776506.
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	3139125.	2686152.	3626995.	1595591.	4728643.	15776506.
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)						2105576.
6 Public support. Subtract line 5 from line 4.						13670930.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	3139125.	2686152.	3626995.	1595591.	4728643.	15776506.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	175,793.	192,053.	214,756.	302,386.	281,327.	1166315.
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						16942821.
12 Gross receipts from related activities, etc. (see instructions)					12	2,567,418.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	80.69 %
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	83.90 %
16a 33 1/3% support test - 2017. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2017. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2016. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. 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 - 2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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.*
- 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).*
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*
- 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.*
- 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.*
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- 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.*
- 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.*
- 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).*
- 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?
- c **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 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 I of Schedule L (Form 990 or 990-EZ).*
- 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.*
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) 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.*
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*
- 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.)*

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

	Yes	No
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? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		
11c		

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? <i>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.</i>		
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? <i>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.</i>		
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)? <i>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).</i>		
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
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? <i>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.</i>		
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? <i>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.</i>		
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? <i>Provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
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 (explain in Part VI.) 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):		
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).

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number

41-1738791

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization NEIGHBORHOOD DEVELOPMENT CENTER, INC.	Employer identification number 41-1738791
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>866,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>1,254,370.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>160,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>900,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

41-1738791

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
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	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____
	<hr/> <hr/> <hr/> <hr/>	\$ _____	_____

Name of organization NEIGHBORHOOD DEVELOPMENT CENTER, INC.	Employer identification number 41-1738791
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Political Campaign and Lobbying Activities

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on 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," on 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," on 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 organization NEIGHBORHOOD DEVELOPMENT CENTER, INC.	Employer identification number 41-1738791
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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 campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities

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)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	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.		
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.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
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)).

	(a)		(b)
	Yes	No	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?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		30,000.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			30,000.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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 campaign activity 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.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number

41-1738791

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, and questions about donor informed consent.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, number of easements, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

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" on 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 on Part XIII

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

	(a) Current year	(b) Prior year	(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 on 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" on line 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" on 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		115,900.		115,900.
b Buildings		966,941.	507,583.	459,358.
c Leasehold improvements		151,600.	151,600.	0.
d Equipment		323,106.	270,783.	52,323.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				627,581.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on 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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) TENANT SECURITY DEPOSITS	11,841.
(3) FISCAL AGENT FUNDS	312.
(4) UNDISBURSED LOAN FUNDS	37,087.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	49,240.

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" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded column for amounts.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a shaded column for amounts.

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.

PART X, LINE 2:

NDC IS CLASSIFIED AS A TAX-EXEMPT ORGANIZATION UNDER MINNESOTA STATUTE 290.05 AND SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE; IS EXEMPT FROM PRIVATE FOUNDATION STATUS UNDER SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE; AND IS SUBJECT TO INCOME TAXES ONLY ON NET UNRELATED BUSINESS INCOME. MANAGEMENT BELIEVES NDC DID NOT HAVE ANY UNRELATED BUSINESS INCOME.

NDC IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION. FEDERAL AND STATE TAX AUTHORITIES GENERALLY HAVE THE RIGHT TO EXAMINE THE CURRENT AND PRIOR THREE YEARS OF INCOME TAX RETURNS.

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest instructions.

Name of the organization
NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number
41-1738791

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- | | |
|--|---|
| a <input type="checkbox"/> Mail solicitations | e <input type="checkbox"/> Solicitation of non-government grants |
| b <input type="checkbox"/> Internet and email solicitations | f <input type="checkbox"/> Solicitation of government grants |
| c <input type="checkbox"/> Phone solicitations | g <input type="checkbox"/> Special fundraising events |
| d <input type="checkbox"/> In-person solicitations | |

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total				▶		

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		event type	event type	(total number)	
Revenue		BANQUET		NONE	
	1	Gross receipts	57,187.		57,187.
	2	Less: Contributions	57,187.		57,187.
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	64,608.		64,608.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			64,608.
	11	Net income summary. Subtract line 10 from line 3, column (d)			-64,608.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number

41-1738791

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

b If any of the boxes on 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

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.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on 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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- 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.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on 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?
- b** Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued 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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017 NEIGHBORHOOD DEVELOPMENT CENTER, INC. 41-1738791

Part I 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 on 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 aren't 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 on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(i) MIRHALLO TEMALI PRESIDENT & CEO	161,692.	0.	0.	0.	23,690.	185,382.	0.
(ii)		0.	0.	0.	0.	0.	0.
(iii)							
(iv)							
(v)							
(vi)							
(vii)							
(viii)							
(ix)							
(x)							
(xi)							
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(xliiii)							
(xliv)							
(xlv)							
(xlvi)							
(xlvii)							
(xlviii)							
(xlvix)							
(xli)							
(xlii)							
(xliiii)							
(xliiii)							

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number

41-1738791

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

NEIGHBORHOOD ECONOMIES FROM WITHIN.

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

ENTREPRENEUR TRAINING PROGRAM - OFFERS WEEKLY TRAINING SESSIONS WHICH
GUIDE PARTICIPANTS IN HOW TO OWN AND OPERATE THEIR OWN BUSINESS. BY
THE END OF THE TRAINING SESSION, THE PARTICIPANT WILL HAVE DEVELOPED A
BUSINESS PLAN AND HAVE HAD INDIVIDUAL SESSIONS WITH A PROFESSIONAL
TRAINING CONSULTANT. NDC WORKS WITH NEIGHBORHOOD PARTNERS TO ENHANCE
THEIR CAPACITY TO CREATE AND CONDUCT ECONOMIC DEVELOPMENT INITIATIVES
WITHIN THEIR OWN COMMUNITIES. NDC AND ITS NEIGHBORHOOD PARTNERS OFFERED
29 ENTREPRENEUR TRAINING CLASSES TO 357 ENROLLED ASPIRING ENTREPRENEURS
FROM VARIOUS ETHNIC GROUPS AND NEIGHBORHOODS. NDC OFFERED 65 WORKSHOPS
IN TWO LOCATIONS IN SAINT PAUL TO OVER 306 INDIVIDUALS/BUSINESSES.
EXPENSES \$ 525,294. INCLUDING GRANTS OF \$ 0. REVENUE \$ 28,556.

FORM 990, PART VI, SECTION A, LINE 2:

A KEY EMPLOYEE OF THIS ORGANIZATION SITS ON THE BOARD OF A SECOND
ORGANIZATION. A KEY EMPLOYEE OF THE SECOND ORGANIZATION SITS ON THE BOARD
OF THIS ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE OF THE BOARD REVIEWS A COPY OF THE DRAFT 990 AND
RECOMMENDS TO THE BOARD FOR APPROVAL BEFORE IT IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Employer identification number

41-1738791

EMPLOYEES AND BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

BASED ON A PEER REVIEW AND SALARY SURVEY FROM MINNESOTA COUNCIL OF NONPROFITS, THE BOARD SET THE SALARY STRUCTURE FOR THE PRESIDENT/CEO.

BASED ON THE ABOVE SURVEY THE PRESIDENT/CEO SET THE SALARY STRUCTURE FOR THE REST OF THE STAFF IN CONSULTATION WITH THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATIONS GOVERNING DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

EQUITY IN EARNINGS OF SUBSIDIARY -30,000.

FORM 990, PART XII, LINE 2C

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR PERIOD.

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.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization
NEIGHBORHOOD DEVELOPMENT CENTER, INC.
Employer identification number
41-1738791

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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
FROGTOWN ENTREPRENEUR CENTER - 41-1864918 663 UNIVERSITY AVE, SUITE 200 SAINT PAUL, MN 55104	OPERATE COMMERCIAL RENTAL REAL ESTATE	MINNESOTA	132,102.	559,087.	NEIGHBORHOOD DEVELOPMENT CENTER
NDC RED I, LLC - 20-3036178 663 UNIVERSITY AVE, SUITE 200 SAINT PAUL, MN 55104	REAL ESTATE LENDING	MINNESOTA	0.	3,108.	NEIGHBORHOOD DEVELOPMENT CENTER
NDC RED I, LLC - 20-1262668 663 UNIVERSITY AVE, SUITE 200 SAINT PAUL, MN 55104	REAL ESTATE LENDING	MINNESOTA	2,880.	108,929.	NEIGHBORHOOD DEVELOPMENT CENTER
MCS, LLC - 20-3259619 663 UNIVERSITY AVE, SUITE 200 SAINT PAUL, MN 55104	OPERATE COMMERCIAL RENTAL REAL ESTATE	MINNESOTA	8,017.	118,788.	NEIGHBORHOOD DEVELOPMENT CENTER

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

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.

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

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)				
(2)				
(3)				
(4)				
(5)				
(6)				

Mail To:

Minnesota Attorney General's Office
Charities Division
445 Minnesota Street, Suite 1200
St. Paul, MN 55101-2130

**STATE OF MINNESOTA
CHARITABLE ORGANIZATION
ANNUAL REPORT FORM**

C2

(Pursuant to Minn. Stat. ch. 309)

Website Address:

www.ag.state.mn.us/charity

SECTION A: Organization Information

Legal Name of Organization NEIGHBORHOOD DEVELOPMENT CENTER, INC.

Federal EIN: 41-1738791

Fiscal Year-End: 12312017

mm/dd/yyyy

Did the organization's fiscal year-end change? Yes No

Mailing Address: TESHITE WAKO	Physical Address: TESHITE WAKO
Contact Person 663 UNIVERSITY AVENUE, NO. 200	Contact Person 663 UNIVERSITY AVENUE, SUITE 200
Street Address SAINT PAUL, MN 55104	Street Address SAINT PAUL, MN 55104
City, State, and ZIP Code 651-379-8421	City, State, and ZIP Code 651-379-8421
Phone Number TWAKO@NDC-MN.ORG	Phone Number TWAKO@NDC-MN.ORG
Email Address	Email Address

1. Organization's website: WWW.NDC-MN.ORG

2. List all of the organization's alternate and former names (attach list if more space is needed).

Alternate Former
 Alternate Former

3. List all names under which the organization solicits contributions (attach list if more space is needed).

NEIGHBORHOOD DEVELOPMENT CENTER, INC.

4. Is the organization incorporated pursuant to Minn. Stat. ch. 317A? Yes No

5. Total amount of contributions the organization received from Minnesota donors: \$ 1,760,582.

6. Has the organization's tax-exempt status with the IRS changed?

Yes No If yes, attach explanation.

7. Has the organization significantly changed its purpose(s) or program(s)?

Yes No If yes, attach explanation.

CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)

8. Has the organization been denied the right to solicit contributions by any court or government agency?
 Yes No If yes, attach explanation.

9. Does the organization use the services of a professional fundraiser (outside solicitor or consultant) to solicit contributions in Minnesota? Yes No
If yes, provide the following information for each (attach list if more space is needed):

Name of Professional Fundraiser	Compensation
Street Address	City, State, and ZIP Code

10. Is the organization a food shelf? Yes No
If yes, is the organization required to file an audit? Yes, audit attached No

Note: An organization that has total revenue of more than \$750,000 is required to file an audit prepared in accordance with generally accepted accounting principles by an independent CPA or LPA. The value of donated food to a nonprofit food shelf may be excluded from the total revenue if the food is donated for subsequent distribution at no charge and is not resold.

11. Do any directors, officers, or employees of the organization or its related organization(s) receive total compensation* of more than \$100,000? Yes No
If yes, provide the following information for the five highest paid individuals:

Name and title	Compensation*	Other compensation
MIHAILO TEMALI PRESIDENT & CEO	161,692.	23,690.

*Compensation is defined as the total amount reported on Form W-2 (Box 5) or Form 1099-MISC (Box 7) issued by the organization and its related organizations to the individual. See Minn. Stat. § 309.53, subd. 3(i) and Minn. Stat. § 317A.011 for definitions.

CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)

SECTION B: Financial Information

This section must be completed by organizations that file an IRS Form 990-EZ, 990-PF, or 990-N.

Organizations that file an IRS Form 990 may skip Section B and go directly to Section C.

INCOME

1. Contributions Received	\$ _____	1
2. Government Grants	\$ _____	2
3. Program Service Revenue	\$ _____	3
4. Other Revenue	\$ _____	4
5. TOTAL INCOME	\$ _____	5

EXPENSES

6. Program Expenses	\$ _____	6
7. Management & General Expenses	\$ _____	7
8. Fund-raising Expenses	\$ _____	8
9. TOTAL EXPENSES	\$ _____	9
10. EXCESS or DEFICIT	\$ _____	10

(Line 5 minus Line 9)

ASSETS

11. Cash	\$ _____	11
12. Land, Buildings & Equipment	\$ _____	12
13. Other Assets	\$ _____	13
14. TOTAL ASSETS	\$ _____	14

LIABILITIES

15. Accounts Payable	\$ _____	15
16. Grants Payable	\$ _____	16
17. Other Liabilities	\$ _____	17
18. TOTAL LIABILITIES	\$ _____	18

FUND BALANCE/NET WORTH

(Line 14 minus Line 18) \$ _____

**CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)**

Section B (continued): Statement of Functional Expenses

This expense statement must be prepared in accordance with generally accepted accounting principles. Each column must be completed, and Columns B, C, and D must equal Column A. The amount on Line 25, Column A must match Line 17 of IRS Form 990-EZ or Line 26 of IRS Form 990-PF.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1. Grants and other assistance to governments and organizations in the U.S.				
2. Grants and other assistance to individuals in the U.S.				
3. Grants and other assistance to governments, organizations, and individuals outside the U.S.				
4. Benefits paid to or for members				
5. Compensation of current officers, directors, trustees, and key employees				
6. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))				
7. Other salaries and wages				
8. Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9. Other employee benefits				
10. Payroll taxes				
11. Fees for services (non-employees):				
a. Management				
b. Legal				
c. Accounting				
d. Lobbying				
e. Professional fundraising services				
f. Investment management fees				
g. Other				
12. Advertising and promotion				
13. Office expenses				
14. Information technology				
15. Royalties				
16. Occupancy				
17. Travel				
18. Payments of travel or entertainment expenses for any federal, state, or local public officials				
19. Conferences, conventions, and meetings				
20. Interest				
21. Payments to affiliates				
22. Depreciation, depletion, and amortization				
23. Insurance				
24. Other expenses. Itemize expenses not covered above. Expenses labeled miscellaneous may not exceed 5% of total expenses (Line 25).				
a. _____				
b. _____				
c. _____				
d. _____				
25. Total functional expenses. Add lines 1 through 24d				
26. Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in Column B joint costs from a combined educational campaign and fundraising solicitation				

CHARITABLE ORGANIZATION ANNUAL REPORT FORM
(Continued)

Section C: Board of Directors Signatures and Acknowledgment

The form must be executed pursuant to a resolution of the board of directors, trustees, or managing group and must be signed by two officers of the organization. See Minn. Stat. § 309.52, subd. 3.

We, the undersigned, state and acknowledge that we are duly constituted officers of this organization, being the

President and CEO (Title) and Treasurer (Title) respectively, and

that we execute this document on behalf of the organization pursuant to the resolution of the

Board of Directors (Board of Directors, Trustees, or Managing Group) adopted on the 15th

day of November, 2018 approving the contents of the document, and do hereby certify that the

Board of Directors (Board of Directors, Trustees, or Managing Group) has assumed, and will continue

to assume, responsibility for determining matters of policy, and have supervised, and will continue to supervise, the operations and finances of the

organization. We further state that the information supplied is true, correct and complete to the best of our knowledge.

MIHAILO TEMALI

Name (Print)

Signature

PRESIDENT AND CEO

Title

Date

11/15/18

JULIANA TANNING

Name (Print)

Signature

Title

Date

Treasurer

11/15/18

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATED FINANCIAL STATEMENTS

**FOR THE YEAR ENDED
DECEMBER 31, 2017**

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

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Mahoney Ulbrich Christiansen Russ P.A.

CERTIFIED PUBLIC ACCOUNTANTS

10 River Park Plaza, Suite 800 | Saint Paul, MN 55107
Phone: 651.227.6695 Fax: 651.227.9796 | www.mucr.com

INDEPENDENT AUDITOR'S REPORT

Board of Directors
Neighborhood Development Center, Inc.
Saint Paul, Minnesota

Report on the Financial Statements

We have audited the accompanying consolidated financial statements of Neighborhood Development Center, Inc. and its affiliates, which comprise the consolidated statement of financial position as of December 31, 2017, and the related consolidated statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to consolidated financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

(Continued)

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Neighborhood Development Center, Inc. and its affiliates as of December 31, 2017, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Report on Summarized Comparative Information

We have previously audited the 2016 consolidated financial statements of Neighborhood Development Center, Inc. and its affiliates and we expressed an unmodified opinion on those audited financial statements in our report dated August 8, 2017. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2016, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Report on Consolidating Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating information shown on pages 23 through 25 is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, changes in net assets, and cash flows of the individual entities, and it is not a required part of the consolidated financial statements. The schedule of consolidated temporarily restricted net assets on page 26 is presented for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the consolidating information and schedule of consolidated temporarily restricted net assets are fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated September 26, 2018, on our consideration of Neighborhood Development Center, Inc. and its affiliates' internal control over financial reporting and on our tests of their compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Neighborhood Development Center, Inc. and its affiliates' internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Neighborhood Development Center, Inc. and its affiliates' internal control over financial reporting and compliance.

September 26, 2018

*Mahoney Ulbrich
Christiansen Russ P.A.*

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

December 31, 2017
(With Comparative Totals for 2016)

	2017	2016
ASSETS		
Current assets:		
Cash	\$ 628,439	\$ 468,295
Restricted cash	1,648,707	1,650,916
Contributions receivable, current portion	1,724,000	182,500
Other receivables, net	414,077	406,352
Loans receivable, current portion	1,156,297	1,098,410
Prepaid expense	27,532	54,970
Total current assets	5,599,052	3,861,443
Loans receivable, net, less current portion	4,322,005	4,302,022
Contributions receivable, less current portion	300,000	100,000
Rental properties, net	1,948,009	1,962,849
Property and equipment, net	26,930	37,457
Investments in other companies	141,970	109,000
Deposit	20,872	20,872
Total assets	\$ 12,358,838	\$ 10,393,643
LIABILITIES AND NET ASSETS		
Current liabilities:		
Accounts payable	\$ 264,838	\$ 384,352
Accrued expenses	158,577	89,034
Fiscal agent funds	312	13,641
Tenant security deposits	64,463	57,915
Undisbursed loan funds	37,087	140,623
Current portion of loans payable	920,112	649,198
Deferred revenue	33,687	53,206
Total current liabilities	1,479,076	1,387,969
Accrued interest, long-term	108,791	77,465
Loans payable, less current portion	4,196,342	3,618,492
Total liabilities	5,784,209	5,083,926
Net assets:		
Unrestricted - controlling interest	2,417,926	2,786,626
Noncontrolling interests	1,724,221	1,684,574
Total unrestricted net assets	4,142,147	4,471,200
Temporarily restricted	2,432,482	838,517
Total net assets	6,574,629	5,309,717
Total liabilities and net assets	\$ 12,358,838	\$ 10,393,643

See accompanying notes to consolidated financial statements.

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATED STATEMENT OF ACTIVITIES

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

	2017			2016
	Unrestricted	Temporarily restricted	Total	
Revenues and support:				
Contributions	\$ 659,986	\$ 1,783,000	\$ 2,442,986	\$ 873,787
Government grants	1,335,720	866,500	2,202,220	557,917
Net assets released upon satisfaction of time and program restrictions	1,055,535	(1,055,535)	-	-
Other revenues:				
Loan interest income	279,129	-	279,129	300,402
Other interest income	2,198	-	2,198	1,984
Class fees	28,556	-	28,556	33,275
Property management fees	193,768	-	193,768	153,390
Contract income	226,582	-	226,582	220,231
Other	129,265	-	129,265	109,709
Total revenues and support	<u>3,910,739</u>	<u>1,593,965</u>	<u>5,504,704</u>	<u>2,250,695</u>
Expenses:				
Program services:				
Entrepreneur training	525,294	-	525,294	431,192
Lending	788,821	-	788,821	658,603
Technical assistance	586,272	-	586,272	520,124
Real estate	844,116	-	844,116	724,546
Total program services	<u>2,744,503</u>	<u>-</u>	<u>2,744,503</u>	<u>2,334,465</u>
Management and general	649,968	-	649,968	626,833
Fundraising	146,832	-	146,832	132,085
Total expenses	<u>3,541,303</u>	<u>-</u>	<u>3,541,303</u>	<u>3,093,383</u>
Change in net assets before Midtown and subsidiaries	<u>369,436</u>	<u>1,593,965</u>	<u>1,963,401</u>	<u>(842,688)</u>
Midtown Global Market operating subsidy:				
Contributions and government grants	26,250	-	26,250	130,150
Operating subsidy payments	(649,833)	-	(649,833)	(99,735)
Midtown Global Market operating subsidy, net	<u>(623,583)</u>	<u>-</u>	<u>(623,583)</u>	<u>30,415</u>
Subsidiaries:				
Income:				
Rental revenues	1,498,129	-	1,498,129	1,599,653
Other revenues	25,737	-	25,737	64,612
Expenses:				
Operating expenses	(1,596,719)	-	(1,596,719)	(1,464,659)
Property tax expense	(92,371)	-	(92,371)	(124,839)
Interest expense	(36,919)	-	(36,919)	(36,257)
Interest expense - amortization of finance fees	-	-	-	(4,400)
Depreciation expense	(94,739)	-	(94,739)	(166,334)
Gain on sale of Bloom Lake property	-	-	-	76,906
Forgiveness of accounts payable	221,976	-	221,976	-
Loss from subsidiaries	<u>(74,906)</u>	<u>-</u>	<u>(74,906)</u>	<u>(55,318)</u>
Change in net assets	<u>(329,053)</u>	<u>1,593,965</u>	<u>1,264,912</u>	<u>(867,591)</u>
Net assets, beginning of year	<u>4,471,200</u>	<u>838,517</u>	<u>5,309,717</u>	<u>6,177,308</u>
Net assets, end of year	<u>\$ 4,142,147</u>	<u>\$ 2,432,482</u>	<u>\$ 6,574,629</u>	<u>\$ 5,309,717</u>

See accompanying notes to consolidated financial statements.

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

	2017					Total	2016
	Entrepreneur training	Lending	Program services Technical assistance	Real estate	Total		
Staffing	\$ 233,788	\$ 377,706	\$ 320,309	\$ 561,004	\$ 1,492,807	\$ 46,332	\$ 1,878,910
Payroll taxes	17,143	28,204	23,918	41,891	111,156	3,252	138,254
Benefits and related	45,357	74,620	63,280	110,892	294,149	9,076	369,780
	296,288	480,530	407,507	713,787	1,898,112	58,660	2,386,944
Professional fees	1,632	14,522	40,184	29,391	85,729	11,240	179,392
Office expenses	6,497	14,854	8,653	18,147	48,151	4,832	88,415
Rent	9,702	15,962	13,536	45,116	84,316	1,840	99,652
Postage	635	1,709	992	1,712	5,048	186	6,595
Education and conferences	1,504	2,470	304	1,396	5,674	1,705	19,882
Project expenses	189,770	9,625	93,321	-	292,716	8,738	360,849
Midtown operating subsidy payments	-	-	306,680	360,999	667,679	-	667,679
Travel	5,460	5,893	1,772	2,535	15,660	1,960	31,996
Subscriptions and dues	36	1,950	231	89	2,306	1,533	15,078
Insurance	5,961	9,806	8,316	14,565	38,648	1,131	48,070
Telephone	2,347	3,861	3,274	8,993	18,475	1,259	28,966
Depreciation	1,364	2,212	1,876	3,286	8,738	211	10,528
Equipment maintenance	3,720	364	5,636	4,138	13,858	1,881	29,536
Provision for receivable and loan losses	-	176,559	-	-	176,559	-	176,559
Interest	-	45,139	-	-	45,139	-	45,139
Miscellaneous	378	3,365	670	961	5,374	999	13,702
Expenses of subsidiaries	-	-	-	1,820,748	1,820,748	-	1,820,748
Total expenses	525,294	788,821	892,952	3,025,863	5,232,930	146,832	6,029,730
Less Midtown operating subsidy payments	-	-	(306,680)	(360,999)	(667,679)	-	(667,679)
Less expenses of subsidiaries	-	-	-	(1,820,748)	(1,820,748)	-	(1,820,748)
	\$ 525,294	\$ 788,821	\$ 586,272	\$ 844,116	\$ 2,744,503	\$ 146,832	\$ 3,541,303

See accompanying notes to consolidated financial statements.

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATED STATEMENT OF CASH FLOWS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

Increase (Decrease) in Cash

	2017	2016
Cash flows from operating activities:		
Change in net assets	\$ 1,264,912	\$ (867,591)
Adjustments to reconcile the change in net assets to net cash from operating activities:		
Depreciation	105,267	175,168
Amortization of finance fees	-	13,682
Provision for receivable and loan losses	176,559	117,835
Gain on sale of Bloom Lake property	-	(76,906)
Forgiveness of accounts payable	(221,976)	-
Changes in operating assets and liabilities:		
Contributions receivable	(1,741,500)	1,312,500
Other receivables	(14,377)	(158,408)
Loans receivable	(357,965)	(635,705)
Prepaid expenses	27,437	(3,803)
Accounts payable	109,115	68,831
Fiscal agent funds	(13,329)	(86,432)
Deferred revenue	(19,519)	(6,492)
Other liabilities	107,417	(113,265)
Net cash from operating activities	(577,959)	(260,586)
Cash flows from investing activities:		
Investment in Mercado Central, LLC	(32,970)	(27,000)
Proceeds on sale of Bloom Lake property	-	1,496,962
Purchase of property and equipment	(79,900)	(23,237)
Net cash from investing activities	(112,870)	1,446,725
Cash flows from financing activities:		
Borrowings on loans payable	1,062,000	670,000
Principal payments on loans payable	(213,236)	(1,753,871)
Net cash from financing activities	848,764	(1,083,871)
Net increase in cash	157,935	102,268
Cash at beginning of year	2,119,211	2,016,943
Cash at end of year	\$ 2,277,146	\$ 2,119,211
Reconciliation of cash to statement of financial position:		
Cash	\$ 628,439	\$ 468,295
Restricted cash	1,648,707	1,650,916
Cash at end of year	\$ 2,277,146	\$ 2,119,211

See accompanying notes to consolidated financial statements.

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

1. ORGANIZATION

Neighborhood Development Center, Inc. (NDC) is a nonprofit organization. NDC conducts entrepreneur training and lending, makes working capital available to targeted businesses in Saint Paul and Minneapolis, and develops other innovative economic development initiatives in these same neighborhoods. The primary programs are:

Entrepreneur training program offers 16-week training sessions which guide participants in how to own and operate their own business. By the end of the training session, the participant will have developed a business plan and have had individual sessions with a professional training consultant. NDC works with neighborhood partners to enhance their capacity to create and conduct economic development initiatives within their own communities.

Lending and profit based program provides funds to start-up and existing businesses. NDC has a revolving loan fund. Loans are granted to businesses that meet certain geographical, income, and ethnic requirements. A portion of available funds is used for Islamically acceptable financing.

Technical assistance program offers ongoing support to businesses. This includes marketing, accounting, legal, management advising, University Avenue business preparation collaborative (U7) and other expert advice.

Real estate development initiative program (REDI) provides funds for real estate projects in targeted neighborhoods. NDC invests in real estate by either taking an equity interest in the project or lending money to help someone acquire and/or renovate a building. In some cases, NDC will do both.

NDC has developed commercial, transit oriented and mixed use properties aimed at improving targeted areas in Saint Paul and Minneapolis. To achieve this purpose, NDC may partner with nonprofit and for profit organizations.

NDC's programs are supported primarily by contributions, government grants, rental revenues and fees for services.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Consolidation Method - The consolidated financial statements include the accounts of NDC and its controlled affiliates. All material intercompany transactions and balances have been eliminated in consolidation.

NDC has three wholly owned subsidiaries: Frogtown Entrepreneur Center, LLC (FEC); NDC REDI, LLC (REDI); and Neighborhood Commercial Spaces, LLC (NCS).

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

FEC owns two office buildings which are rented to participants in the entrepreneur training program.

NCS was formed to own and manage NDC's real estate properties. NCS owns NDC REDI II, LLC (REDI II). NCS has a 50% interest in Midtown Global Market, LLC (Midtown). The remaining 50% of Midtown is held by the Powderhorn Phillips Cultural Wellness Center. Midtown owns and operates a retail market in the historic Sears building located in Minneapolis, Minnesota.

REDI (Bloom Lake project) and REDI II (Midtown project) were formed to assist with financing of commercial properties used by participants in the entrepreneur program.

NDC also owns 90% of Market View, LLC (Bloom Lake). Market View owns 100% of Bloom Lake Historic Partners, LLC (BLHP). BLHP has been consolidated with Market View, LLC. BLHP owns and operates a 43,000 square foot, three story mixed commercial and office building located at 1516 East Lake Street, Minneapolis, Minnesota (the Bloom Lake Project). The building was sold on May 18, 2016, for \$1,750,000 less \$26,000 in closing costs.

The interests of the noncontrolling investors have been included in unrestricted net assets and the change in net assets.

Financial Statement Presentation - The accompanying financial statements have been prepared using the accrual basis of accounting.

Net assets, revenues and support are classified based on the presence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

- Unrestricted net assets are not restricted by donors or the donor-imposed restrictions have expired. Unrestricted net assets are available for programs and supporting services at the discretion of management and the board of directors.
- Temporarily restricted net assets are contributions restricted by donors for specific purposes or time periods. When donor restrictions expire, that is, when a time restriction ends or a purpose restriction is fulfilled, temporarily restricted net assets are reclassified to unrestricted net assets on the statement of activities. Contributions with donor-imposed restrictions that expire in the same fiscal year the contribution is recognized are reported as unrestricted net assets.
- Permanently restricted net assets arise from contributions that the donor has stipulated must be maintained in perpetuity. NDC has no permanently restricted net assets.

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Comparative Total Column - The consolidated financial statements include certain prior year summarized comparative information in total but not by net asset class or by functionalized expense. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the consolidated financial statements for the year ended December 31, 2016, from which the summarized information was derived.

Use of Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

The most significant estimates used in preparation of the financial statements are the determination of the allowance for loan losses, the estimated useful lives of depreciable assets, and the allocation of expenses by function.

Concentration of Credit Risk - NDC maintains its cash in bank deposit accounts at three financial institutions. At December 31, 2017 and 2016, cash balances were approximately \$2,003,000 and \$1,640,000 in excess of the insured amount. NDC has not experienced any losses as a result of these deposits.

Contributions and Other Receivables - Contributions and other receivables are stated at the amount management expects to collect. Management reviews receivable balances at year end and establishes an allowance for doubtful accounts based on expected collections. Receivables are written off as a charge to the allowance when, in management's estimation, it is probable that the receivable is worthless. The allowance for other receivables was \$73,304 at December 31, 2017 and \$98,973 at December 31, 2016. Management determined that an allowance was not necessary for contributions receivable.

Loans Receivable and Provision for Loan Losses - Loans are stated at the amount of unpaid principal, reduced by loan participations and a provision for loan losses. Loans are recorded in the period they are closed. Undisbursed loan funds represent loans that have been closed but not yet disbursed. Interest on loans is recorded when received.

The provision for loan losses is established through a charge to expense. Loans are charged to the provision for loan losses when management believes that the collectability of the entire principal balance is unlikely. The provision is an amount that management believes will be adequate to absorb possible losses on existing loans that may become uncollectible, based on evaluations of the collectability of individual loans and prior loan loss experience. The evaluations take into consideration such factors as overall portfolio quality, review of specific problem loans, and current economic conditions that may affect the borrowers' ability to pay. Loan write offs are forwarded to a collection company for potential recovery.

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Rental Properties - Rental properties are carried at cost, less impairment adjustments. Depreciation is computed on the straight-line method over the estimated useful lives of 5 to 50 years. The cost of maintenance and repairs is charged to expense as incurred; significant renewals or betterments are capitalized.

Management assesses for impairment losses when conditions warrant. No impairment losses were recorded in 2017 or 2016.

Property and Equipment - Property and equipment is carried at cost. Depreciation is computed on the straight-line method over the estimated useful lives of 3 to 10 years. Maintenance and repairs are expensed as incurred. Major renewals or betterments that extend the lives of property and equipment are capitalized.

Investments in Other Companies - NDC owns noncontrolling interests in LLC's. These investments are carried at cost. See Note 6.

Fiscal Agency Funds - NDC periodically acts as an agent for other organizations. These transactions are not included in the statement of activities since NDC has no discretion in determining how the funds are used. Such amounts are recorded as liabilities.

Forgivable Loans - Forgivable loans are loan agreements that do not require repayment if NDC remains in compliance with the terms of the agreement through the maturity date. Forgivable loans are recorded as loans payable and recognized as revenue at the time the loan is forgiven.

Contributions - Contributions are recognized in the period the promises are made. Contributions receivable are recorded at the promised amount because the difference between the promised amount and the net present value of the promise is immaterial.

Conditional promises to give are recognized as revenue when the conditions are substantially met.

Contributed Services - Unpaid volunteers have made significant contributions of their time to NDC's programs. The fair value of this contributed time is reflected in these statements only if the services create or enhance nonfinancial assets or require specialized skills and would typically need to be purchased if not provided by donation. No contributed services were recorded in 2017 and 2016.

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Government Grants - Government grants are generally considered exchange transactions and are recorded as revenue when earned. Revenue is earned when eligible expenditures, as defined in each grant or contract, are incurred. Funds received but not yet earned are recorded as contract advances.

Government grants received for the purpose of making loans are accounted for as contributions.

Other Revenue - Revenue from services is recognized in the period the service is performed. Rental revenues are recorded in accordance with the lease agreement. Generally accepted accounting principles require rent revenue to be recognized on the straight-line method. The difference between the two methods is not significant. Rental revenues received in advance are recorded as deferred revenue.

NDC provides property management, asset management, and other services for properties controlled by NDC and others. Revenue is recorded when earned in accordance with the agreements.

Functional Expenses - The majority of expenses can be directly identified with the program or supporting services to which they relate and are charged accordingly. Other expenses have been allocated among program and supporting services on the basis of employee time analysis as determined by management.

Income Taxes - NDC is classified as a tax-exempt organization under Minnesota Statute 290.05 and Section 501(c)(3) of the Internal Revenue Code; is exempt from private foundation status under Section 509(a)(1) of the Internal Revenue Code; and is subject to income taxes only on net unrelated business income.

FEC, REDI, REDI II, NCS and Market View are not taxpaying entities, thus, no provision for income taxes has been recorded in the financial statements. All tax effects of the companies are passed through to the members.

Management believes NDC did not have any uncertain tax positions or unrelated business income in 2017 or 2016. NDC is not currently under examination by any taxing jurisdiction. Federal and state tax authorities have the right to examine the current and prior three years of income tax returns.

3. RESTRICTED CASH

Cash is classified based on donor/grantor restrictions. As of December 31, 2017, restricted cash includes \$1,602,673 held by NDC for programs and loan funds, plus \$46,034 held by Midtown for security deposits. As of December 31, 2016, restricted cash includes \$1,611,057 held by NDC for programs and loan funds, plus \$39,859 held by Midtown for security deposits.

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

4. **LOANS RECEIVABLE**

Loans receivable consist of the following:

	2017	2016
Business loans	\$5,303,203	\$5,160,909
Less State of MN - UIP participation	(23,907)	(55,068)
Total business loans	5,279,296	5,105,841
NEDU, LLC - affiliated real estate loans	635,927	635,927
TIF revenue note from City of Minneapolis	103,821	131,115
Total loans	6,019,044	5,872,883
Less allowance for uncollectible loans	(540,742)	(472,451)
	5,478,302	5,400,432
Less current portion	(1,156,297)	(1,098,410)
	\$4,322,005	\$4,302,022
Number of loans outstanding	208	229

Business loans receivable represent fixed rate loans made to businesses in specified areas of Saint Paul and Minneapolis. Most borrowers would likely fail to meet commercial credit standards. Terms of these loans are generally five years. Business loans are secured by business assets, vehicles, and personal guarantees.

The affiliated real estate loans are secured and primarily payable upon maturity of the loan. The maturity dates range from 2018 to 2024.

The TIF revenue note is due in semi-annual payments through 2023.

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

4. LOANS RECEIVABLE (Continued)

This table presents the allowance for loan losses by portfolio segment in 2017 and in total for 2016:

	Business loans	Affiliated real estate loans	2017 Total	2016 Total
Beginning balance	\$ 433,251	\$ 39,200	\$ 472,451	\$ 370,507
Loan loss provision	176,559	-	176,559	117,835
Loans charged off	(108,268)	-	(108,268)	(15,891)
Ending balance	<u>\$ 501,542</u>	<u>\$ 39,200</u>	<u>\$ 540,742</u>	<u>\$ 472,451</u>

This table presents the aging of loans by portfolio segment at December 31, 2017 and in total for 2016:

	Business loans	Affiliated real estate loans	2017 Total	2016 Total
Current	\$4,941,254	\$ -	\$4,941,254	\$5,023,265
30 + days	152,864	-	152,864	110,689
60 + days	4,504	-	4,504	6,557
90 + days	83,061	-	83,061	3,683
120 + days	225,341	-	225,341	147,830
Not currently due	-	635,927	635,927	635,927
Total	<u>\$5,407,024</u>	<u>\$ 635,927</u>	<u>\$6,042,951</u>	<u>\$5,927,951</u>

This table and the accompanying explanations present informative data regarding the credit quality of loans receivable by portfolio segment at December 31, 2017 and in total for 2016:

Category	Business loans	Affiliated real estate loans	2017 Total	2016 Total
A	\$5,056,929	\$ 635,927	\$5,692,856	\$5,414,272
B	141,974	-	141,974	453,143
C	207,790	-	207,790	59,512
D	331	-	331	1,024
F	-	-	-	-
Total	<u>\$5,407,024</u>	<u>\$ 635,927</u>	<u>\$6,042,951</u>	<u>\$5,927,951</u>

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

4. LOANS RECEIVABLE (Continued)

The following categories are used to assess the risk profile of the loan portfolio:

Category	Description of Creditworthiness	Allowance %
A	Estimated 95% chance of collection	5
B	Estimated 75% chance of collection	25
C	Estimated 50% chance of collection	50
D	Estimated 10% chance of collection	90
F	Estimate almost no chance of collection (known default and /or write-off pending)	100

Other information as of December 31, 2017:

- All loans are individually reviewed for impairment monthly.
- Category D and F loans are considered impaired.
- There have been no purchases, sales, or reclassifications of financing receivables.

5. CONTRIBUTIONS RECEIVABLE

Contributions receivable of \$1,724,000 are scheduled to be collected in 2018 and \$300,000 in 2019.

6. INVESTMENTS IN OTHER COMPANIES

NDC has noncontrolling interests in the following entities. These investments are recorded at cost, which is \$141,970 and \$109,000 at December 31, 2017 and 2016.

- NDC holds a 25% (30% prior to 2015) interest in NEDU, LLC (the Frogtown Square project). The entity owns and operates commercial space in a mixed use building located in Saint Paul, Minnesota. The investment is carried at \$0.
- NDC holds a 25% interest in Mercado Central, LLC. Mercado Central, LLC owns and operates a commercial building in Minneapolis, Minnesota. The investment is carried at \$141,970 and \$109,000 at December 31, 2017 and 2016. In 2017 and 2016, NDC made an additional investment of \$32,970 and \$27,000 in Mercado Central, LLC.

These investments are recorded using the cost method rather than the equity method because NDC is not able to significantly influence operations of the entities.

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

7. RENTAL PROPERTIES

The rental properties consist of the following:

	2017	2016
FEC:		
Land	\$ 51,466	\$ 51,466
625 University Avenue building	422,461	422,461
501 North Dale Street building	529,013	529,013
Furniture and equipment	40,554	40,554
Less accumulated depreciation	(522,743)	(491,614)
Net FEC	520,751	551,880
Midtown:		
Leasehold acquisition costs	110,237	110,237
Building	8,295,180	8,215,280
Tenant improvements	1,115,076	1,115,076
Less impairment	(5,111,288)	(5,111,289)
Less accumulated depreciation	(2,981,947)	(2,918,335)
Net Midtown	1,427,258	1,410,969
 Total rental properties	 \$ 1,948,009	 \$ 1,962,849

8. PROPERTY AND EQUIPMENT

Property and equipment consists of the following:

	2017	2016
Office equipment	\$ 257,267	\$ 257,267
Leasehold improvements	151,600	151,600
Computer software	25,283	25,283
	434,150	434,150
Less accumulated depreciation	(407,220)	(396,693)
	\$ 26,930	\$ 37,457

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

9. **LOANS PAYABLE**

Loans payable consist of the following:

	2017	2016
NDC:		
HUD Small Business Revolving Loan Fund	\$ 293,293	\$ 293,293
SBA Loan Fund #1	150,968	232,727
SBA Loan Fund #2	536,130	634,314
SBA Loan Fund #3	323,889	-
Living Cities Loan #1	700,000	700,000
Living Cities Loan #2	822,000	345,000
DEED Loan	252,500	247,500
City of Saint Paul	150,000	150,000
LISC	50,000	50,000
Saint Paul Foundation	1,062,000	1,062,000
Minneapolis Foundation	250,000	-
FEC:		
City of Saint Paul HRA	39,986	39,986
Star Loan	48,007	48,007
Star Loan	194,619	194,619
City of Saint Paul HRA Real Estate Commercial Loan	38,403	38,403
City of Saint Paul HRA	73,001	73,001
NDC REDI, LLC:		
Northwest Area Foundation	131,658	158,840
Total outstanding	5,116,454	4,267,690
Less current portion	(920,112)	(649,198)
Noncurrent portion	\$ 4,196,342	\$ 3,618,492

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

9. LOANS PAYABLE (Continued)

NDC:

HUD Small Business Revolving Loan Fund - with the City of Minneapolis - The City had previously loaned funds in the cumulative amount of \$500,000. During 2014 the previous loan plus accrued interest were adjusted to \$293,293 and the remaining amount (\$216,574) was forgiven by the City. The loan is noninterest bearing. The loan is repayable February 28, 2023. NDC must pay back the entire amount at the end of the contract (2023), with the exception of any defaulted loans. The loan is nonrecourse and unsecured.

Small Business Administration (SBA) Loan Fund #1 - Revolving fund for business loans with the SBA for \$700,000 dated October 8, 2009. Monthly payments of up to \$6,908 began in November 2010. Interest accrues at a maximum of 1.75% and may be reduced to zero percent if the average size of loans made is \$10,000 or less. Unpaid principal and interest is due on October 8, 2019.

Small Business Administration (SBA) Loan Fund #2 - Revolving fund for business loans with the SBA for \$1,250,000 dated June 7, 2013. Monthly payments of up to \$11,574 began in June 2014. Interest accrues at a maximum of .875% and may be reduced to zero percent if the average size of loans made is \$10,000 or less. Unpaid principal and interest is due on June 7, 2023.

Small Business Administration (SBA) Loan Fund #3 - Revolving fund for business loans with the SBA for \$1,000,000 dated October 12, 2016. Monthly payments of up to \$9,259 began in October 2017. Interest accrues at a maximum of 1.25% and may be reduced to zero percent if the average size of loans made is \$10,000 or less. Unpaid principal and interest is due on October 12, 2026.

Living Cities Loan #1 - Loan payable to Living Cities in the amount of \$700,000 dated May 23, 2011 with interest at 2%. The loan is payable in three equal installments due on December 31, 2018, 2019 and 2020. The loan agreement requires NDC to meet certain covenants.

Living Cities Loan #2 - Loan payable to Living Cities in the amount of \$345,000 dated April 25, 2016 with interest at 2%. The loan is due in full on December 2020. The loan agreement requires NDC to meet certain covenants.

DEED Loan - Loan payable to the Minnesota Department of Employment and Economic Development (DEED) under the Emerging Entrepreneurs Fund (EEF) in the amount of \$366,000 dated May 25, 2012 with no interest. Proceeds are to be used to fund eligible loans. NDC is not obligated to repay the portion of the loan that NDC is unable to recover from eligible borrowers. NDC has drawn \$252,500 as of December 31, 2017. The loan is due on May 25, 2022.

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

9. LOANS PAYABLE (Continued)

City of Saint Paul - Revolving loan payable to the City of Saint Paul to be used to make loans to qualifying businesses within the City of Saint Paul under the HUD Section 3 program. The loan term is for two years beginning in April 2013 and is subject to renewal. The loan was renewed and an additional \$50,000 was advanced by the City of Saint Paul in 2016. The loan will be forgiven once the project period is complete and closed out by the City of Saint Paul.

Local Initiatives Support Corporation (LISC) – Recoverable grant in the amount of \$50,000 dated January 8, 2014 with no interest. The grant is for predevelopment costs for a property at the corner of University and Dale in Saint Paul, Minnesota. The grant is repayable on December 31, 2018.

Saint Paul Foundation – Loan payable to the Saint Paul Foundation not to exceed \$1,063,837 dated February 19, 2014 with interest at 1.5%. Proceeds are to be used to make mid-market business loans in the East Metro area of Saint Paul. NDC has drawn \$1,062,000 as of December 31, 2017. The loan is due on December 31, 2024.

Minneapolis Foundation – Loan payable to the Minneapolis Foundation in the amount of \$250,000 dated April 1, 2017 with interest at 2.0%. Interest payments are due annually on April 1st of each year during the term of the loan. Proceeds are to be used to make loans to support minority owned business in Minneapolis. The loan is due on April 1, 2022.

FEC:

City of Saint Paul HRA - Loan payable in the original amount of \$49,000 with interest at 6.5%. Principal and interest were due December 31, 2017. NDC is currently in negotiation with the City of Saint Paul to extend the loan to December 31, 2020. Secured by the property.

Star Loan - Star loan with the City of Saint Paul in the original amount of \$86,500 with interest at 2%. Principal and interest were due December 31, 2017. NDC is currently in negotiation with the City of Saint Paul to extend the loan to December 31, 2020. Secured by the property.

Star Loan - Star loan with the City of Saint Paul in the original amount of \$154,500 with interest at 2%. Accrued interest of \$40,119 was added to the principal balance in 2010. Principal and interest were due December 31, 2017. NDC is currently in negotiation with the City of Saint Paul to extend the loan to December 31, 2020. Secured by the property.

City of Saint Paul HRA Real Estate Commercial Loan - Loan payable in the original amount of \$65,000 with interest at 4%. Principal and interest were due December 31, 2017. NDC is currently in negotiation with the City of Saint Paul to extend the loan to December 31, 2020. Secured by the property.

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

9. **LOANS PAYABLE (Continued)**

City of Saint Paul HRA - Loan payable in the original amount of \$124,000 with interest at 5%. Principal and interest were due December 31, 2017. NDC is currently in negotiation with the City of Saint Paul to extend the loan to December 31, 2020. Secured by the property.

NDC REDI, LLC:

Northwest Area Foundation - Note payable in the original amount of \$408,000. Payable with interest at 2% from receipts under the tax increment (TIF) limited revenue note with the City of Minneapolis (Note 4). Payments are due August 1 and February 1 each year through August 1, 2023. The amount of the payment is equal to the lesser of 1) the available tax increment, or 2) the amount necessary to pay the accrued interest and unpaid principal in full.

Maturities of the loans payable are as follows:

2018	\$ 920,112
2019	462,920
2020	1,216,807
2021	162,008
2022	411,050
Thereafter	1,793,557
Expected to be forgiven	150,000
	\$ 5,116,454

10. **RETIREMENT PLAN**

NDC sponsors a 401(k) employee retirement plan. The plan covers all employees after a specified period of service and attainment of minimum age requirements. NDC makes matching contributions to the Plan equal to the sum of 100% of each employee's deferred contribution up to 3% of the employee's compensation, plus 50% of each employee's deferred contribution that exceeds 3% up to 5% of the employee's compensation. Contributions to the plan were \$46,416 in 2017 and \$40,918 in 2016.

The Plan allows for discretionary additional matching contributions of each employee's compensation and discretionary nonelective contributions in amounts determined at the sole discretion of the Employer. No discretionary additional matching contributions or nonelective contributions were made in 2017 or 2016.

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

11. LEASE PAYABLE

NDC leases office space from Western Bank under a lease that expires March 31, 2019. NDC has an option to renew the lease through March 2021. NDC also pays a pro rata portion of operating expenses. Rent expense was \$99,652 and \$79,551 during 2017 and 2016.

Future minimum payments are as follows:

2018	\$ 80,190
2019	<u>20,170</u>
	<u>\$ 100,360</u>

12. NET ASSETS

Temporarily restricted net assets are available for use in future periods for:

	<u>2017</u>	<u>2016</u>
Loan programs	\$ 736,525	\$ 250,000
Central corridor	23,807	28,517
General operating support	<u>1,672,150</u>	<u>560,000</u>
	<u>\$ 2,432,482</u>	<u>\$ 838,517</u>

The following table presents changes in controlling and noncontrolling interests in unrestricted net assets:

	<u>2017</u>	<u>2016</u>
Noncontrolling interests (other owners):		
Beginning of year	\$ 1,684,574	\$ 1,734,678
Change in net assets	39,647	(50,104)
End of year	<u>1,724,221</u>	<u>1,684,574</u>
Controlling interest (NDC):		
Beginning of year	2,786,626	2,389,056
Change in net assets	(368,700)	397,570
End of year	<u>2,417,926</u>	<u>2,786,626</u>
	<u>\$4,142,147</u>	<u>\$4,471,200</u>

(Continued)

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

13. TRANSACTIONS WITH AFFILIATES

NDC has a \$635,927 loan receivable due from NEDU, LLC (an affiliated entity) at December 31, 2017 and 2016. See Notes 4 and 6. Interest income on this loan was \$12,720 in 2017 and \$13,973 in 2016.

NDC performs property management services for FEC, Midtown, NEDU, LLC, and Mercado Central, LLC. Property management fees from related entities were \$193,768 in 2017 and \$147,390 in 2016.

14. MINIMUM FUTURE RENTALS RECEIVABLE

The following is a schedule of estimated minimum future base rentals to be received on non-cancelable leases from tenants of the FEC and Midtown properties as of December 31, 2017:

	FEC	Midtown	Total
2018	\$ 79,046	\$ 521,592	\$ 600,638
2019	10,568	209,142	219,710
2020	-	136,692	136,692
2021	-	49,400	49,400
2022	-	26,000	26,000
Thereafter	-	-	-
	\$ 89,614	\$ 942,826	\$ 1,032,440

These leases are classified as operating leases. Minimum rents above do not include operating cost reimbursements.

15. CONTINGENCIES, COMMITMENTS AND CONCENTRATIONS

Governmental Compliance - Governmental program activities are subject to financial and compliance regulations. To the extent that any expenditure is disallowed or other compliance features are not met, a liability to the grantor agency could result.

Line of Credit - NDC has a line of credit for up to \$250,000 at American National Bank. The line of credit bears interest at the prime rate plus 0.75%. The line of credit matures September 15, 2018 and is secured by accounts receivable. There was one advance in 2017 for \$70,000 which was paid in full as of December 31, 2017. There were no advances in 2016.

Midtown - An agreement with U.S. Bancorp Community Development Corporation, BMO Harris Bank, and Wells Fargo Community Development Corporation to convert debt to an equity investment requires an allocation of annual profits of the Midtown Global Market project.

(Continued)

NEIGHBORHOOD DEVELOPMENT CENTER, INC. AND AFFILIATES

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

For the Year Ended December 31, 2017
(With Comparative Totals for 2016)

15. CONTINGENCIES, COMMITMENTS AND CONCENTRATIONS (Continued)

The agreement states that if annual profits exceed \$100,000 for any of the ten years beginning May 25, 2015, the profits will be allocated as follows:

- First, up to \$50,000 annually to an operating reserve until the balance reaches \$250,000,
- Second, up to \$100,000 annually to a replacement reserve until the balance reaches \$500,000,
- Finally, to be distributed equally between NCS / Powderhorn Phillips Cultural Wellness Center, and 50% between the three banks.

Midtown did not have profits exceeding \$100,000 in 2017 and 2016.

Concentrations – NDC received \$1,254,370 in 2017 (57% of government grant revenue in 2017) from the Department of Employment and Economic Development (DEED) and \$360,843 in 2016 (65% of government grant revenue in 2016) from the Department of Planning and Economic Development (DEED). The awards have been recorded as government grant revenue.

16. SUBSEQUENT EVENTS

Management has evaluated subsequent events through September 26, 2018, the date on which the financial statements were available for issue, and identified no further significant events or transactions to disclose.

SUPPLEMENTARY INFORMATION

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATING STATEMENT OF FINANCIAL POSITION

December 31, 2017

	Neighborhood Development Center	Frogtown Entrepreneur Center	Market View, LLC (Bloom Lake)	NDC REDI, LLC	NDC REDI II, LLC	NCS (Midtown)	Eliminations	Consolidated
ASSETS								
Current assets:								
Cash	\$ 545,107	\$ 24,268	\$ -	\$ 5,108	\$ 2,808	\$ 51,148	\$ -	\$ 628,439
Restricted cash	1,602,673	-	-	-	-	46,034	-	1,648,707
Contributions receivable, current portion	1,724,000	-	-	-	-	-	-	1,724,000
Other receivables	396,237	12,819	-	-	300	11,673	(6,952)	414,077
Loans receivable, current portion	1,129,003	-	-	27,294	-	-	-	1,156,297
Prepaid expense	21,283	1,249	-	-	-	5,000	-	27,532
Total current assets	5,418,303	38,336	-	32,402	3,108	113,855	(6,952)	5,599,052
Loans receivable, net, less current portion	4,314,727	-	-	76,527	-	-	(69,249)	4,322,005
Contributions receivable, less current portion	300,000	-	-	-	-	-	-	300,000
Rental properties, net	-	520,751	-	-	-	1,427,258	-	1,948,009
Property and equipment, net	26,930	-	-	-	-	-	-	26,930
Investments in other companies	133,111	-	-	-	-	-	8,859	141,970
Deposit	-	-	-	-	-	20,872	-	20,872
Total assets	\$ 10,193,071	\$ 559,087	\$ -	\$ 108,929	\$ 3,108	\$ 1,561,985	\$ (67,342)	\$ 12,358,838
LIABILITIES, MEMBERS' EQUITY AND NET ASSETS								
Current liabilities:								
Accounts payable	\$ 79,893	\$ 6,061	\$ -	\$ -	\$ -	\$ 185,836	\$ (6,952)	\$ 264,838
Accrued expenses	156,551	2,026	-	-	-	-	-	158,577
Fiscal agent funds	312	-	-	-	-	-	-	312
Tenant security deposits	2,500	9,341	-	-	-	52,622	-	64,463
Undisbursed loan funds	37,087	-	-	-	-	-	-	37,087
Current portion of loans payable	500,513	463,265	-	25,583	-	-	(69,249)	920,112
Total current liabilities	776,856	480,693	-	25,583	-	238,458	(76,201)	1,445,389
Deferred revenue	5,000	-	-	-	-	28,687	-	33,687
Accrued interest, long-term	-	108,791	-	-	-	-	-	108,791
Loans payable, less current portion	4,090,267	-	-	106,075	-	-	-	4,196,342
Total liabilities	4,872,123	589,484	-	131,658	-	267,145	(76,201)	5,784,209
Net assets:								
Unrestricted - controlling interest	2,888,466	-	-	-	-	-	(470,540)	2,417,926
Noncontrolling interests	-	-	-	-	-	1,724,221	-	1,724,221
Members' equity	-	(30,397)	-	(22,729)	3,108	(429,381)	479,399	-
Total unrestricted net assets	2,888,466	(30,397)	-	(22,729)	3,108	1,294,840	8,859	4,142,147
Temporarily restricted	2,432,482	-	-	-	-	-	-	2,432,482
Total net assets	5,320,948	(30,397)	-	(22,729)	3,108	1,294,840	8,859	6,574,629
Total liabilities and net assets	\$ 10,193,071	\$ 559,087	\$ -	\$ 108,929	\$ 3,108	\$ 1,561,985	\$ (67,342)	\$ 12,358,838

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATING STATEMENT OF ACTIVITIES

For the Year Ended December 31, 2017

	Neighborhood Development Center	Frogtown Entrepreneur Center	Market View, LLC (Bloom Lake)	NDC REDI, LLC	NDC REDI II, LLC	NCS (Midtown)	Eliminations	Consolidated
Revenues and support:								
Contributions	\$ 2,442,986	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,442,986
Government grants	2,202,220	-	-	-	-	-	-	2,202,220
Other revenues:								
Loan interest income	279,129	-	-	-	-	-	-	279,129
Other interest income	2,198	-	-	-	-	-	-	2,198
Class fees	28,556	-	-	-	-	-	-	28,556
Property management fees	193,768	-	-	-	-	-	-	193,768
Contract income	226,582	-	-	-	-	-	-	226,582
Other	129,265	-	-	-	-	-	-	129,265
Total revenues and support	5,504,704	-	-	-	-	-	-	5,504,704
Expenses:								
Program services:								
Entrepreneur training	525,294	-	-	-	-	-	-	525,294
Lending	788,821	-	-	-	-	-	-	788,821
Technical assistance	660,227	-	-	-	-	(73,955)	(73,955)	586,272
Real estate	844,116	-	-	-	-	-	-	844,116
Total program services	2,818,458	-	-	-	-	(73,955)	(73,955)	2,744,503
Management and general	649,968	-	-	-	-	-	-	649,968
Fundraising	146,832	-	-	-	-	-	-	146,832
Total expenses	3,615,258	-	-	-	-	(73,955)	(73,955)	3,541,303
Change in net assets before Midtown and subsidiaries	1,889,446	-	-	-	-	-	73,955	1,963,401
Midtown Global Market operating subsidy:								
Contributions and government grants	26,250	-	-	-	-	-	-	26,250
Operating subsidy payments	(667,678)	-	-	-	-	17,845	17,845	(649,833)
Midtown, net	(641,428)	-	-	-	-	-	17,845	(623,583)
Subsidiaries:								
Income:								
Rental revenues	-	127,260	-	-	-	1,370,869	-	1,498,129
Interest and other revenues	-	4,842	-	2,880	-	48,015	(30,000)	25,737
Expenses:								
Operating expenses	-	(90,590)	-	-	(55)	(1,506,074)	-	(1,596,719)
Property tax expense	-	(32,850)	-	-	-	(59,521)	-	(92,371)
Interest expense	-	(33,276)	(651)	(2,992)	-	-	-	(36,919)
Depreciation expense	-	(31,129)	-	-	-	(63,610)	-	(94,739)
Forgiveness of accounts payable	-	-	-	-	-	295,931	(73,955)	221,976
Equity in earnings of subsidiaries	(49,595)	-	-	-	-	-	49,595	-
Earnings (loss) from subsidiaries	(49,595)	(55,743)	(651)	(112)	(55)	85,610	(54,360)	(74,906)
Change in net assets	1,198,423	(55,743)	(651)	(112)	(55)	85,610	37,440	1,264,912
Net assets, beginning of year	4,122,525	25,346	651	(22,617)	3,163	1,209,230	(28,581)	5,309,717
Net assets, end of year	\$ 5,320,948	\$ (30,397)	\$ -	\$ (22,729)	\$ 3,108	\$ 1,294,840	\$ 8,859	\$ 6,574,629

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

CONSOLIDATING STATEMENT OF CASH FLOWS

For the Year Ended December 31, 2017

	Neighborhood Development Center	Frogtown Entrepreneur Center	Market View, LLC (Bloom Lake)	NDC REDI, LLC	NDC REDI II, LLC	NCS (Midtown)	Eliminations	Consolidated
Cash flows from operating activities:								
Change in net assets	\$ 1,198,423	\$ (55,743)	\$ (651)	\$ (112)	\$ (55)	\$ 85,610	\$ 37,440	\$ 1,264,912
Adjustments to reconcile the change in net assets to net cash from operating activities:								
Depreciation	10,528	31,129	-	-	-	63,610	-	105,267
Amortization of finance fees	-	-	-	-	-	-	-	-
Equity in loss of subsidiaries	37,440	-	-	-	-	-	(37,440)	-
Provision for loan losses	176,559	-	-	-	-	-	-	176,559
Forgiveness of accounts payable	-	-	-	-	-	(295,931)	73,955	(221,976)
Changes in operating assets and liabilities:								
Contributions receivable	(1,741,500)	-	-	-	-	-	-	(1,741,500)
Other receivables	(22,281)	(2,940)	-	-	-	10,844	-	(14,377)
Loans receivable, net	(385,259)	-	-	27,294	-	-	-	(357,965)
Prepaid expense	26,991	446	-	-	-	-	-	27,437
Accounts payable	(59,181)	625	-	-	-	241,626	(73,955)	109,115
Fiscal agent funds	(13,329)	-	-	-	-	-	-	(13,329)
Deferred revenue	(15,000)	-	-	-	-	(4,519)	-	(19,519)
Other liabilities	69,579	31,688	-	-	-	6,150	-	107,417
Net cash from operating activities	(717,030)	5,205	(651)	27,182	(55)	107,390	-	(577,959)
Cash flows from investing activities:								
Investment in Mercado Central, LLC	(32,970)	-	-	-	-	-	-	(32,970)
Purchase of property and equipment	-	-	-	-	-	(79,900)	-	(79,900)
Net cash from investing activities	(32,970)	-	-	-	-	(79,900)	-	(112,870)
Cash flows from financing activities:								
Borrowings on loans payable	1,062,000	-	-	-	-	-	-	1,062,000
Principal payments on loans payable	(186,054)	-	-	(27,182)	-	-	-	(213,236)
Net cash from financing activities	875,946	-	-	(27,182)	-	-	-	848,764
Net increase (decrease) in cash	125,946	5,205	(651)	-	(55)	27,490	-	157,935
Cash at beginning of year	2,021,834	19,063	651	5,108	2,863	69,692	-	2,119,211
Cash at end of year	\$ 2,147,780	\$ 24,268	\$ -	\$ 5,108	\$ 2,808	\$ 97,182	\$ -	\$ 2,277,146

See independent auditor's report.

**NEIGHBORHOOD DEVELOPMENT CENTER, INC.
AND AFFILIATES**

SCHEDULE OF CONSOLIDATED TEMPORARILY RESTRICTED NET ASSETS

For the Year Ended December 31, 2017

Donors	Program	Beginning temporarily restricted net assets	Contributions	Released from restriction	Ending temporarily restricted net assets
McKnight Foundation	General operating support	\$ 150,000	\$ 300,000	\$ 150,000	\$ 300,000
Trillium Family Foundation	General operating support	20,000	-	20,000	-
Minneapolis Foundation	General operating support	50,000	-	50,000	-
Otto Bremer Foundation	General operating support	-	83,000	10,000	73,000
Northwest Area Foundation	General operating support	200,000	-	100,000	100,000
Kellogg Foundation	General operating support	-	900,000	300,000	600,000
Kauffman Foundation	General operating support	-	500,000	20,000	480,000
Central Corridor Funders Collaborative	Central corridor	28,517	-	4,710	23,807
Catholic Campaign for Human Development	General operating support	12,500	-	12,500	-
Community Development Financial Institution (CDFI)	General operating support	127,500	129,975	138,325	119,150
Community Development Financial Institution (CDFI)	Loan programs	250,000	736,525	250,000	736,525
		<u>\$ 838,517</u>	<u>\$ 2,649,500</u>	<u>\$ 1,055,535</u>	<u>\$ 2,432,482</u>

See independent auditor's report.

Neighborhood Development Center Development Team Bios

Mihailo (Mike) Temali
Founder & CEO
NDC

Mike Temali, who was Neighborhood Development Center's (NDC) Executive Director since its inception in 1993, is NDC's Founder and CEO. He has over 25 years of experience in the field of community-based economic development. Prior to NDC, Mike was Executive Director of North End Area Revitalization, Inc. (NEAR). During his six year tenure he raised over \$3 million for programs which resulted in 130 commercial rehabilitation and expansion projects along Rice Street in Saint Paul. Mike and NEAR acted as lead developer of a retail shopping center on Rice Street, planned and implemented a streetscape project, and initiated and participated in the development of new Saint Paul's North End efforts focused on youth, single parents, employment, and industrial development. Prior to NEAR, Mike was on the staff of the University of Minnesota's Hubert H. Humphrey Institute of Public Affairs.

Mike has a master's degree in public affairs from the University of Minnesota's Hubert H. Humphrey Institute of Public Affairs and a bachelor's degree in sociology from Macalester College in Saint Paul. He recently received a Bush Fellowship to further study community economic development within inner city communities through Harvard University and the Massachusetts Institute of Technology. In 2002, his comprehensive book on the community economic development process was published by Wilder Research. Targeted to practitioners in the field and nominated for an award for its outstanding guidance, *The Community Economic Development Handbook: Strategies and Tools to Revitalize Your Neighborhood*, grew out of his work nationally and abroad during sabbaticals under his Bush Fellowship. Mike has been a Board member at nearly 30 organizations during his career.

Ben Johnson
Director of Real Estate
NDC

Ben Johnson leads NDC's efforts to create and maintain small business incubators. With an expertise in restaurant management, he also provides advice and project management for NDC's restaurant owners. In this capacity, Ben has helped restaurants such as Dilla's Ethiopian, Cook St. Paul and Hot Indian build out and expand their business. He also provides property management support for the Mercado Central. He has additional knowledge in financial analysis and management, restaurant marketing and real estate assessment.

Prior to NDC, he was the Director of Food Operations at Union Gospel Mission, where he oversaw three kitchens and the making of nearly 1,000 meals per day. Ben currently serves on the board of Finnegans Community Fund, where Finnegans beer donates 100% of their profits

to addressing hunger alleviation. Ben as also served as the president of the Grand Avenue Business Association and co-chair of the Ramsey County Healthy Meals Coalition. Together with his wife, Ben owns Le Town Talk French Diner & Drinkery on Lake Street. He holds a BA in Global Studies from the University of Minnesota and an MPA in Nonprofit Management and Leadership from the Humphrey Institute at the University of Minnesota.

John Gelderman

Principal

JFG Real Estate Advisors: Commercial Real Estate Services

A real estate development expert with 20+ years of experience, **John Gelderman** is an accomplished professional providing real estate development and project management services to clients throughout the Midwest. He has developed and consulted on a wide variety of projects ranging in size from 50 acre suburban sites to one acre urban redevelopment projects.

John offers a remarkable skill set that combines his financial, design and construction backgrounds. His unique insight into project management and development comes from 20 years of hands on experience, while his creative approach to problem solving ensures smooth execution, regardless of project size. Employment experience includes Senior development positions at both Opus Corporation and CSM Corporation. Past experience also includes overseeing the national expansion of Caribou Coffee and construction project management at Pepsico/Taco Bell.

John holds a BA in Architecture from the University of Minnesota and an MBA in Real Estate from the University of Denver. He also holds a Minnesota Real Estate Broker's License, is currently the Regional Chairman of the International Council of Shopping Centers and is an active member/past board member of the Minnesota Shopping Center Association.

Historic Saint Paul Corporation

HISTORIC SAINT PAUL CORPORATION

41-1903550

	2017	2016	DIFF
FORM 990-EZ REVENUE			
CONTRIBUTIONS, GIFTS, AND GRANTS.....	174,303	93,165	81,138
PROGRAM SERVICE REVENUE.....	10,461	33,461	-23,000
INVESTMENT INCOME.....	3,640	1,659	1,981
NET INCOME (LOSS) - SPECIAL EVENTS.....	284	0	284
TOTAL REVENUE.....	188,688	128,285	60,403
EXPENSES			
SALARIES AND EMPLOYEE BENEFITS.....	91,883	68,040	23,843
PROFESSIONAL FEES/PYMT TO CONTRACTORS....	14,503	10,610	3,893
OCCUPANCY/RENT/UTILITIES/MAINTENANCE.....	4,083	3,439	644
PRINTING, PUBLICATIONS, AND POSTAGE.....	1,186	0	1,186
OTHER EXPENSES.....	77,985	102,319	-24,334
TOTAL EXPENSES.....	189,640	184,408	5,232
NET ASSETS OR FUND BALANCES			
EXCESS OR (DEFICIT) FOR THE YEAR.....	-952	-56,123	55,171
NET ASSETS/FUND BAL. AT BEG. OF YEAR.....	63,287	200,289	-137,002
OTHER CHANGES IN NET ASSETS/FUND BAL.....	591	-80,879	81,470
NET ASSETS/FUND BAL. AT END OF YEAR.....	62,926	63,287	-361

2017

GENERAL INFORMATION

PAGE 1

HISTORIC SAINT PAUL CORPORATION

41-1903550

FORMS NEEDED FOR THIS RETURN

FEDERAL: 990-EZ, SCH A, 8868

CARRYOVERS TO 2018

NONE

2017

FEDERAL FILING INSTRUCTIONS

HISTORIC SAINT PAUL CORPORATION

41-1903550

ELECTRONICALLY FILED:

FORM 990-EZ - 2017 SHORT FORM RETURN OF ORGANIZATION EXEMPT FROM
INCOME TAX

THE ABOVE TAX RETURN WILL BE ELECTRONICALLY FILED WITH THE INTERNAL
REVENUE SERVICE UPON RECEIPT OF A SIGNED FORM 8879-E0 - IRS E-FILE
SIGNATURE AUTHORIZATION.

PAYMENT:

NO PAYMENT IS REQUIRED.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning _____, 2017, and ending _____, 20____

2017

Department of the Treasury
Internal Revenue Service

► Do not send to the IRS. Keep for your records.
► Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

Employer identification number

HISTORIC SAINT PAUL CORPORATION
Name and title of officer

41-1903550

CAROL CAREY

EXECUTIVE DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1 a Form 990 check here	► <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1 b _____
2 a Form 990-EZ check here	► <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2 b <u>188,688.</u>
3 a Form 1120-POL check here	► <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3 b _____
4 a Form 990-PF check here	► <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4 b _____
5 a Form 8868 check here	► <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5 b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize CARPENTER EVERT & ASSOCIATES to enter my PIN 00808 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ► _____ Date ► _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN 41480519475
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ► _____ Date ► _____

**ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2017)

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for *Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print <small>File by the due date for filing your return. See instructions.</small>	<small>Name of exempt organization or other filer, see instructions.</small> HISTORIC SAINT PAUL CORPORATION	<small>Employer identification number (EIN) or</small> 41-1903550
	<small>Number, street, and room or suite number. If a P.O. box, see instructions.</small> 75 WEST 5TH STREET #400	<small>Social security number (SSN)</small>
	<small>City, town or post office, state, and ZIP code. For a foreign address, see instructions.</small> ST. PAUL, MN 55102	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ▶ CAROL CAREY -----

Telephone No. ▶ 651-222-3049 Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ . If it is for part of the group, check this box ... ▶ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 6-month extension of time until 11/15, 2018, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ calendar year 2017 or
 - ▶ tax year beginning _____, 20____, and ending _____, 20_____.
- 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
 (except private foundations)

OMB No. 1545-1150

2017

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information

Department of the Treasury
Internal Revenue Service

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 2017, and ending 2017

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C HISTORIC SAINT PAUL CORPORATION 75 WEST 5TH STREET #400 ST. PAUL, MN 55102	D Employer identification number 41-1903550 <hr/> E Telephone number 651-222-3049 <hr/> F Group Exemption Number..... ▶
--	--	--

G Accounting Method: Cash Accrual Other (specify) ▶ _____ **H** Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ WWW.HISTORICSAINTPAUL.ORG

J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀(insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other _____

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 189,956.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

	Description	Line	Amount
REVENUE	1 Contributions, gifts, grants, and similar amounts received	1	174,303.
	2 Program service revenue including government fees and contracts.....	2	10,461.
	3 Membership dues and assessments.....	3	
	4 Investment income.....	4	3,640.
	5a Gross amount from sale of assets other than inventory.....	5a	
	b Less: cost or other basis and sales expenses.....	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a).....	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)....	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000).....	6b	1,552.
c Less: direct expenses from gaming and fundraising events.....	6c	1,268.	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c).....	6d	284.	
	7a Gross sales of inventory, less returns and allowances.....	7a	
	b Less: cost of goods sold.....	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a).....	7c	
8 Other revenue (describe in Schedule O).....	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8..... ▶	9	188,688.	
EXPENSES	10 Grants and similar amounts paid (list in Schedule O).....	10	
	11 Benefits paid to or for members.....	11	
	12 Salaries, other compensation, and employee benefits.....	12	91,883.
	13 Professional fees and other payments to independent contractors.....	13	14,503.
	14 Occupancy, rent, utilities, and maintenance.....	14	4,083.
	15 Printing, publications, postage, and shipping.....	15	1,186.
	16 Other expenses (describe in Schedule O)..... SEE SCHEDULE O	16	77,985.
17 Total expenses. Add lines 10 through 16..... ▶	17	189,640.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9).....	18	-952.	
ASSETS	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return).....	19	63,287.
	20 Other changes in net assets or fund balances (explain in Schedule O)..... SEE SCHEDULE O	20	591.
	21 Net assets or fund balances at end of year. Combine lines 18 through 20..... ▶	21	62,926.

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

Form 990-EZ (2017)

Part II Balance Sheets (see the instructions for Part II) Check if the organization used Schedule O to respond to any question in this Part II.

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	208,214.	48,500.
23 Land and buildings		
24 Other assets (describe in Schedule O) SEE SCHEDULE O	127,647.	448,834.
25 Total assets	335,861.	497,334.
26 Total liabilities (describe in Schedule O) SEE SCHEDULE O	272,574.	434,407.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	63,287.	62,926.

Part III Statement of Program Service Accomplishments (see the instructions for Part III) Check if the organization used Schedule O to respond to any question in this Part III.

		Expenses	
What is the organization's primary exempt purpose? SEE SCHEDULE O		(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.			
28	SEE SCHEDULE O		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28 a	141,367.
29			
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29 a	
30			
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30 a	
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31 a	
32	Total program service expenses (add lines 28a through 31a)	32	141,367.

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV) Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
TOM BROCK PRESIDENT	1	0.	0.	0.
TOM TARNOW VICE PRESIDENT	1	0.	0.	0.
ELYSE JENSEN TREASURER	1	0.	0.	0.
CORNIA SERRANO SECRETARY	1	0.	0.	0.
STEVEN BUETOW DIRECTOR	1	0.	0.	0.
AMANDA WELLS DIRECTOR	1	0.	0.	0.
KATE PEARCE DIRECTOR	1	0.	0.	0.

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in SEE SCHEDULE O the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V. []

33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O.
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name.
35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions.
b Did the organization file Form 1120-POL for this year?
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved.
39 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on line 9
b Gross receipts, included on line 9, for public use of club facilities
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
section 4911; section 4912; section 4955
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed

42 a The organization's books are in care of CAROL CAREY Telephone no. 651-222-3049
Located at 75 WEST 5TH ST. ST. PAUL MN ZIP + 4 55102
b 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)?
If 'Yes,' enter the name of the foreign country:
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
c At any time during the calendar year, did the organization maintain an office outside the United States?
If 'Yes,' enter the name of the foreign country:

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year.
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.
b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.
c Did the organization receive any payments for indoor tanning services during the year?
d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
b 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,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI.

	Yes	No
47 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.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
49 a Did the organization make any transfers to an exempt non-charitable related organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If 'Yes,' was the related organization a section 527 organization?	<input type="checkbox"/>	<input type="checkbox"/>
50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'		

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ **Yes** **No**

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	Signature of officer	Date
	CAROL CAREY <small>Type or print name and title</small>	EXECUTIVE DIRECTOR

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00373594	
	Firm's name ▶	CARPENTER EVERT & ASSOCIATES				
	Firm's address ▶	7760 FRANCE AVE. S. #940 BLOOMINGTON, MN 55435				
				Firm's EIN ▶	41-1534805	
				Phone no. (952)	831-0085	

May the IRS discuss this return with the preparer shown above? See instructions ▶ **Yes** **No**

SCHEDULE A
(Form 990 or 990-EZ)

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization HISTORIC SAINT PAUL CORPORATION	Employer identification number 41-1903550
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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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - 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 1-10 above (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		
(A)						
(B)						
(C)						
(D)						
(E)						
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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	111,014.	126,700.	186,874.	93,165.	174,303.	692,056.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 Total. Add lines 1 through 3.	111,014.	126,700.	186,874.	93,165.	174,303.	692,056.
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).						120,055.
6 Public support. Subtract line 5 from line 4.						572,001.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4.	111,014.	126,700.	186,874.	93,165.	174,303.	692,056.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	3,146.	3,138.	1,742.	1,659.	3,640.	13,325.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.						0.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI		1,500.			284.	1,784.
11 Total support. Add lines 7 through 10.						707,165.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)).	14	80.89 %
15 Public support percentage from 2016 Schedule A, Part II, line 14.	15	64.81 %
16a 33-1/3% support test—2017. 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. ▶ <input checked="" type="checkbox"/>		
b 33-1/3% support test—2016. 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. ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2017. 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. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2016. 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. ▶ <input type="checkbox"/>		
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. ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests—2017. 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—2016. 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If 'Yes,' answer (b) and (c) below.</i>		
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)? <i>If 'Yes,' describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ('foreign supported organization')? <i>If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If 'Yes,' provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If 'Yes,' provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If 'Yes,' answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
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	

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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
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 (explain in Part VI). **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):		
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).

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

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 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

BAA

Schedule A (Form 990 or 990-EZ) 2017

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.)

PART II, LINE 10 - OTHER INCOME

<u>NATURE AND SOURCE</u>	<u>2017</u>	<u>2016</u>	<u>2015</u>	<u>2014</u>	<u>2013</u>
MISC	\$ 284.			\$ 1,500.	
TOTAL	<u>\$ 284.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 1,500.</u>	<u>\$ 0.</u>

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Go to www.irs.gov/Form990 for the latest information.

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HISTORIC SAINT PAUL CORPORATION

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FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

ADVERTISING AND PROMOTION.....	\$	673.
BANK FEES.....		293.
DEPRECIATION.....		775.
DUES & SUBSCRIPTIONS.....		457.
INFORMATION TECHNOLOGY.....		1,516.
INSURANCE.....		1,326.
INTEREST.....		6.
IT EQUIPMENT AND SOFTWARE.....		576.
MORTGAGE SERVICING FEES.....		847.
OFFICE EXPENSES.....		792.
OTHER.....		128.
PROFESSIONAL DEVELOPMENT.....		11.
PROGRAM ACTIVITIES.....		70,540.
TRAVEL.....		45.
TOTAL	\$	77,985.

FORM 990-EZ, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

PRIOR PERIOD ADJUSTMENT.....	\$	591.
TOTAL	\$	591.

FORM 990-EZ, PART II, LINE 24
OTHER ASSETS

	<u>BEGINNING</u>	<u>ENDING</u>
ACCOUNTS RECEIVABLE.....	\$ 23,928.	\$ 150,583.
CONSTRUCTION ESCROW.....	0.	96,378.
FURNITURE AND FIXTURES.....	775.	0.
NOTES AND LOANS RECEIVABLE.....	81,209.	65,609.
PLEDGES AND GRANTS RECEIVABLE.....	16,340.	0.
PREPAID EXPENSES AND DEFERRED CHARGES.....	5,395.	136,264.
TOTAL	\$ 127,647.	\$ 448,834.

FORM 990-EZ, PART II, LINE 26
TOTAL LIABILITIES

	<u>BEGINNING</u>	<u>ENDING</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES.....	\$ 20,055.	\$ 8,912.
DEFERRED REVENUE.....	67,500.	60,000.
FOMP LIABILITY.....	0.	15,010.
SECURED MORTGAGES AND NOTES PAYABLE.....	185,019.	350,485.
TOTAL	\$ 272,574.	\$ 434,407.

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

HISTORIC SAINT PAUL IS A NONPROFIT ORGANIZATION WORKING TO PRESERVE, PROTECT, AND ENHANCE THE HISTORIC CHARACTER OF SAINT PAUL'S NEIGHBORHOODS. HISTORIC SAINT PAUL WORKS IN PARTNERSHIP WITH PRIVATE OWNERS, COMMUNITY ORGANIZATIONS, AND PUBLIC

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FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE (CONTINUED)

AGENCIES LEVERAGING SAINT PAUL'S CULTURAL AND HERITAGE RESOURCES AS ASSETS IN ECONOMIC DEVELOPMENT AND COMMUNITY BUILDING INITIATIVES.

HISTORIC SAINT PAUL SEEKS TO ADVANCE CREATIVE, SUSTAINABLE, LONG-TERM REHABILITATION STRATEGIES THAT:

- BUILD COMMUNITY PRIDE BY RETAINING A SENSE OF PLACE AND CELEBRATING CULTURAL HERITAGE;
- ENCOURAGE INVESTMENT INTO SAINT PAUL'S HERITAGE RESOURCES; AND
- REVITALIZE NEIGHBORHOODS AND BUSINESS CORRIDORS BY IMPROVING EXISTING HOMES AND COMMERCIAL BUILDINGS IN A MANNER THAT IS SENSITIVE TO CULTURAL AND ARCHITECTURAL CONTEXT.

FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

2017 PROGRAMS, ACTIVITIES, AND ACCOMPLISHMENTS:

NEIGHBORHOOD PRESERVATION

THROUGH ITS RESTORE SAINT PAUL LOAN PROGRAM AND OTHER BRICKS-AND-MORTAR INITIATIVES, HISTORIC SAINT PAUL (HSP) SECURES FINANCIAL RESOURCES AND PROVIDES TECHNICAL SUPPORT TO IMPROVE HISTORIC HOMES AND COMMERCIAL BUILDINGS, ENHANCING THE CHARACTER, ECONOMIC STABILITY AND PERCEPTION OF SAINT PAUL'S OLDEST NEIGHBORHOODS.

RESTORE SAINT PAUL LOAN PROGRAM

ACTIVITIES IN 2017 FOCUSED ON TWO FACADE REHAB PROJECTS. THE FIRST, 823 UNIVERSITY AVENUE, IN COLLABORATION WITH NEIGHBORHOOD DEVELOPMENT CENTER. THE PROJECT COST IS \$112,000, OF WHICH \$47,000 IS HSP FUNDING. THE SECOND WAS A CONTINUATION OF THE

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FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PREVIOUS JOE & STAN'S PROJECT; IN THIS PHASE, STUCCO WAS REMOVED FROM THE SECOND STORY AT A COST OF \$7,000.

PRESERVE FROGTOWN

A SIGNIFICANT ASPECT OF HSP'S RECENT NEIGHBORHOOD PRESERVATION ACTIVITY HAS BEEN WORKING IN PARTNERSHIP WITH FROGTOWN NEIGHBORHOOD ASSOCIATION AND OTHER PARTNERS TO IMPLEMENT THE PRESERVE FROGTOWN INITIATIVE. 2017 ACCOMPLISHMENTS OF THIS COLLABORATIVE INCLUDE:

REHABILITATING VULNERABLE VACANT PROPERTIES THAT REFLECT AND ENHANCE THE CHARACTER OF THE NEIGHBORHOOD:

- WE COMPLETED PRE-DEVELOPMENT WORK ON 690 LAFOND, WHICH WAS PURCHASED AND WILL BE COMPLETED IN 2018.
- WE CONTINUED TO WORK IN COLLABORATION WITH TWIN CITIES COMMUNITY LAND BANK (TCCLB) ON STRATEGIES TO MONITOR AND EVALUATE VACANT PROPERTIES WITH STRATEGIC REDEVELOPMENT POTENTIAL AND SECURE RESOURCES FOR THEIR REHABILITATION.

COORDINATING RESOURCES THAT REDUCE THE COST OF REHABILITATION AND HOME OWNERSHIP:

- WE WORKED WITH OUR PARTNERS FROGTOWN NEIGHBORHOOD ASSOCIATION, HABITAT FOR HUMANITY, AND NEIGHBORWORKS HOME PARTNERS TO PROMOTE RESOURCES THAT ARE AVAILABLE FOR HOME IMPROVEMENT AND FORECLOSURE PREVENTION TO RESIDENTS. AS PART OF THIS EFFORT, WE WORKED IN COLLABORATION ON THE CHARLES BLOCK PROJECT, AN INITIATIVE TO ACTIVELY ENGAGE AND RESIDENTS ALONG CHARLES AVENUE BETWEEN DALE AND KENT IN A PILOT "BLOCK LONG" NEIGHBORHOOD REGENERATION PROJECT. KEY GOALS OF THE CHARLES BLOCK PROJECT WERE TO:
 - ENCOURAGE RESIDENTS TO DETERMINE WHAT LONG AND SHORT-TERM GOALS THEY HAVE FOR

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FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

THEIR HOMES AND BLOCK.

- MOBILIZE THE EXPERTISE AND CAPACITY OF A COLLABORATION OF PARTNERS TO HELP RESIDENTS ACHIEVE THOSE GOALS.

- PROVIDE NEIGHBORS THE OPPORTUNITY TO BUILD AND/OR STRENGTHEN RELATIONSHIPS AND NEIGHBORHOOD COHESIVENESS AS THEY WORK TOGETHER TO PLAN AND IMPLEMENT IMPROVEMENTS.

- PRESERVE AND HIGHLIGHT THE ARCHITECTURAL CHARACTER AND FEATURES OF THE HOUSES, WORKING WITH RESIDENTS AND PARTNERS TO BUILD AWARENESS OF THEIR VALUE AND HISTORY, AND STRATEGIES TO MAINTAIN AND CELEBRATE THEM.

- ENHANCE AND EXPAND CAPACITIES OF PARTNER ORGANIZATIONS TO ACHIEVE IMPACT THROUGH COLLABORATION.

DAYTON'S BLUFF

HSP BEGAN REHABILITATION OF A FORECLOSED AND VACANT HOUSE IN THE DAYTON'S BLUFF HISTORIC DISTRICT, BUILT IN 1888, AND THREATENED WITH DEMOLITION BY THE CITY OF SAINT PAUL. HSP INVESTED OVER \$200,000 INTO THE PROJECT WHICH, WHEN COMPLETED, WILL RESULT IN A COMPLETELY UPDATED 4-BEDROOM HOME.

HSP CONTINUED WITH WORK (BEGUN IN 2015) TO SAVE SIX CITY-OWNED BUILDINGS IN THE DAYTON'S BLUFF HERITAGE PRESERVATION DISTRICT FROM DEMOLITION. HSP WORKED WITH CITY OFFICIALS, PRIVATE DEVELOPERS, AND HUD REPRESENTATIVES TO SECURE FUNDING TO COMPLETE TWO PROJECTS WHICH CONVERTED FORMER MIXED-USE BUILDINGS INTO RESIDENTIAL UNITS. HSP IS SERVING AS PROJECT MANAGER FOR THE REDEVELOPMENT OF ONE OF THE BUILDINGS, BUILT IN 1885, CATEGORIZED AS PIVOTAL TO THE CHARACTER OF THE DAYTON'S BLUFF HISTORIC DISTRICT, VACANT SINCE 2002, AND WILL BE RECONSTRUCTED AS 4 UNITS

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FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

OF AFFORDABLE RENTAL HOUSING.

HSP WORKED WITH RAMSEY COUNTY AND THE CITY OF SAINT PAUL ON EFFORTS TO PRESERVE A VACANT TAX-FORFEITED PROPERTY AT 735 MARGARET, ALSO IN THE DAYTON'S BLUFF HERITAGE PRESERVATION DISTRICT, THAT WAS THREATENED WITH DEMOLITION UNDER THE CITY'S VACANT BUILDING ORDINANCE.

412 GOODRICH

NEIGHBORS FROM THE LITTLE BOHEMIA NEIGHBORHOOD ASSOCIATION ALERTED HISTORIC SAINT PAUL OF THE PENDING DEMOLITION OF A TERRITORIAL HOMESTEAD PROPERTY, CONSTRUCTED IN 1856. HISTORIC SAINT PAUL WORKED WITH NEIGHBORS TO DEVELOP A PLAN FOR ITS PRESERVATION AND RECONSTRUCTION THAT WOULD TEMPORARILY STAY THE DEMOLITION, ACCEPTED THE DONATION OF THE PROPERTY FROM THE PREVIOUS OWNER, AND BEGAN RAISING FUNDS REQUIRED TO COMPLETE ITS REHABILITATION.

CULTURAL HERITAGE

HISTORIC SAINT PAUL PROMOTES AREAS OF CULTURAL INTEREST CITYWIDE AND WORKS WITH CITY OFFICIALS AND COMMUNITY PARTNERS TO LEVERAGE THEIR VALUE IN LOCAL ECONOMIC DEVELOPMENT AND COMMUNITY-BUILDING INITIATIVES.

SAINT PAUL HISTORICAL: WEB & MOBILE PROJECT

HSP DEVELOPED AND MAINTAINS AN INTERACTIVE WEB SITE AND MOBILE APP, SAINT PAUL HISTORICAL. THE PROJECT PROVIDES ONLINE ACCESS TO INFORMATION ON THE HISTORY OF SAINT PAUL'S OLDEST NEIGHBORHOODS. THE RESOURCE, WITH DESKTOP AND SMART-PHONE ACCESS, CONTAINS WALKING TOURS, AUDIO AND VIDEO RECORDINGS, AND OTHER INFORMATION CELEBRATING THE CITY'S CULTURAL HERITAGE. WE CONTINUE TO MAINTAIN AND EXPAND

Name of the organization

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FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

OFFERINGS ON THE SITE WHICH REACHED OVER 50,000 PEOPLE IN 2017.

SURVEY WORK

HSP WORKED CLOSELY WITH PARTNER AURORA SAINT ANTHONY NEIGHBORHOOD DEVELOPMENT CORPORATION (ASANDC) TO COMPLETE THE SAINT PAUL AFRICAN AMERICAN CONTEXT STUDY. THE STUDY WILL FORM A FOUNDATION FOR THE FUTURE PRESERVATION OF HISTORIC SITES AND PROVIDE TOOLS TO HELP PROMOTE AFRICAN AMERICAN CULTURAL HERITAGE AND HERITAGE TOURISM IN SAINT PAUL.

ADVOCACY

HISTORIC SAINT PAUL ADVOCATES FOR PUBLIC POLICIES THAT PROTECT AND ENHANCE SAINT PAUL'S HISTORIC AND CULTURAL RESOURCES AND ENGAGES PROJECT PARTNERS TO IDENTIFY HISTORIC ASSETS, ANALYZE REUSE ALTERNATIVES, AND MOBILIZE PUBLIC AND PRIVATE SUPPORT AND RESOURCES FOR PRESERVATION PROJECTS.

IN 2017 HSP CONTINUED TO PROVIDE STAFF SUPPORT TO VICTORIA THEATER ARTS CENTER IN ITS EFFORTS TO REVIVE THIS LONG-VACANT, 1915 SILENT MOVIE THEATER AS A COMMUNITY ARTS CENTER. HSP WORKED WITH AS PART OF THE PROJECT TEAM TO COMPLETE A FACILITIES FEASIBILITY PLAN, A FUNDRAISING PLAN, AND REVISED BUSINESS PLAN. HSP PREPARED FUNDING PROPOSALS TO SECURE FINANCIAL RESOURCES NEEDED TO MOVE THE PROJECT FORWARD.

POPULATION AND COMMUNITIES SERVED BY HSP ACTIVITIES

HSP IS COMMITTED TO PRESERVING THE CULTURAL HISTORY, NEIGHBORHOODS AND LANDMARKS OF SAINT PAUL - AND IN OUR PROGRAMMING, SEEKS TO SERVE RESIDENTS THROUGHOUT THE

Name of the organization

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HISTORIC SAINT PAUL CORPORATION

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FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

CITY. HOWEVER, THE FOCUS OF OUR ACTIVITIES IS ON HISTORIC RESOURCES IN UNDER-RESOURCED NEIGHBORHOODS CONTAINING MUCH OF THE CITY'S OLDEST AND MOST DETERIORATED BUILDING STOCK AND HOME TO ITS MOST DIVERSE CONSTITUENCIES.

FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?..... NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?..... NO

Historic St. Paul Corporation (Rev)
Balance Sheet
As of December 31, 2017

	<u>Dec 31, 17</u>
ASSETS	
Current Assets	
Checking/Savings	
1010 · Checking (3285)	48,161.17
1030 · FOMP - Checking (2101)	10.00
1050 · PayPal	24.15
Total Checking/Savings	<u>48,195.32</u>
Accounts Receivable	
1110 · General Operating Receivables	27,011.26
1120 · Pledges Receivable	255.34
1160 · Unbilled Receivables	6,541.96
1170 · Mortgages Receivable	
1174 · Mortgages Receivable-Monthly	52,274.11
1178 · Mortgages Receivable-Deferred	64,500.00
Total 1170 · Mortgages Receivable	<u>116,774.11</u>
Total Accounts Receivable	<u>150,582.67</u>
Other Current Assets	
12000 · Undeposited Funds	305.00
1480 · WIP	
1481 · WIP - 689 Conway	114,413.84
1485 · WIP - 412 Goodrich	19,809.39
Total 1480 · WIP	<u>134,223.23</u>
1500 · Prepaid Expenses	2,040.67
Total Other Current Assets	<u>136,568.90</u>
Total Current Assets	<u>335,346.89</u>
Fixed Assets	
1800 · Furniture and Equipment	6,520.33
1890 · Accumulated Depreciation	-6,520.33
Total Fixed Assets	<u>0.00</u>
Other Assets	
1600 · Forgivable Loans	65,608.95
1900 · Construction Escrow	
1905 · 689 Conway - TC Land Bank	96,377.13
Total 1900 · Construction Escrow	<u>96,377.13</u>
Total Other Assets	<u>161,986.08</u>
TOTAL ASSETS	<u><u>497,332.97</u></u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 · Accounts Payable	7,603.68
Total Accounts Payable	<u>7,603.68</u>
Credit Cards	
2110 · Capital One Credit Card	1,307.88
Total Credit Cards	<u>1,307.88</u>

Historic St. Paul Corporation (Rev)

Balance Sheet

As of December 31, 2017

	<u>Dec 31, 17</u>
Other Current Liabilities	
2600 · Other Current Liabilities	
2620 · RSP Loan Fund	36,832.00
2640 · Deferred Grant Revenue	60,000.00
Total 2600 · Other Current Liabilities	<u>96,832.00</u>
2700 · FOMP Liability	15,010.00
Total Other Current Liabilities	<u>111,842.00</u>
Total Current Liabilities	120,753.56
Long Term Liabilities	
2910 · RSP Loan Fund Payable	48,544.71
2950 · Deferred Rev. - Forgivable Loan	65,608.95
2960 · Construction Loans	
2961 · 689 Conway - LT Loan	199,500.00
Total 2960 · Construction Loans	<u>199,500.00</u>
Total Long Term Liabilities	<u>313,653.66</u>
Total Liabilities	434,407.22
Equity	
31000 · Unrestricted Net Assets	
31100 · Available to Operating	
31100a · Available to Operating - Begin	-7,653.19
Total 31100 · Available to Operating	<u>-7,653.19</u>
31200 · Board Designated-Reserve Fund	22,718.00
31900 · Net Loan Assets	
31900a · Net Loan Assets - Begin	31,397.40
Total 31900 · Net Loan Assets	<u>31,397.40</u>
Total 31000 · Unrestricted Net Assets	<u>46,462.21</u>
33000 · Temp. Restricted Net Assets	
33110 · Sands Fund - Preserve Fgtn.	8,371.22
33210 · As to Purpose	
33210a · As to Purpose - Begin	8,092.32
Total 33210 · As to Purpose	<u>8,092.32</u>
Total 33000 · Temp. Restricted Net Assets	<u>16,463.54</u>
Total Equity	<u>62,925.75</u>
TOTAL LIABILITIES & EQUITY	<u><u>497,332.97</u></u>

Historic St. Paul Corporation (Rev)

Balance Sheet

As of December 31, 2018

Dec 31, 18

ASSETS

Current Assets

Checking/Savings

1010 · Checking (3285)	20,467.42
1030 · FOMP - Checking (2101)	3,799.48
1040 · FOMP - Savings	1,804.40
1050 · PayPal	9.48

Total Checking/Savings 26,080.78

Accounts Receivable

1110 · General Operating Receivables	15,000.00
1120 · Pledges Receivable	10,175.00
1170 · Mortgages Receivable	
1174 · Mortgages Receivable-Monthly	43,459.29
1178 · Mortgages Receivable-Deferred	64,500.00

Total 1170 · Mortgages Receivable 107,959.29

Total Accounts Receivable 133,134.29

Other Current Assets

12000 · Undeposited Funds	165.00
1400 · Due From/To- Preserve Frogtown	
1408 · 690 LaFond	15,538.98
Total 1400 · Due From/To- Preserve Frogtown	15,538.98
1480 · WIP	
1485 · WIP - 412 Goodrich	37,994.93
Total 1480 · WIP	37,994.93
1500 · Prepaid Expenses	1,620.52

Total Other Current Assets 55,319.43

Total Current Assets 214,534.50

Other Assets

1600 · Forgivable Loans	50,008.95
1950 · Investment - Preserve Frogtown	196.02

Total Other Assets 50,204.97

TOTAL ASSETS 264,739.47

LIABILITIES & EQUITY

Liabilities

Current Liabilities

Accounts Payable

2000 · Accounts Payable	25,016.50
Total Accounts Payable	25,016.50

Credit Cards

2110 · Capital One Credit Card	647.73
Total Credit Cards	647.73

Other Current Liabilities

2200 · Payroll Liabilities	
2205 · Payroll Clearing	2,859.49
Total 2200 · Payroll Liabilities	2,859.49

Historic St. Paul Corporation (Rev)

Balance Sheet

As of December 31, 2018

	<u>Dec 31, 18</u>
2600 · Other Current Liabilities	
2620 · RSP Loan Fund	43,246.79
2640 · Deferred Grant Revenue	21,891.48
Total 2600 · Other Current Liabilities	<u>65,138.27</u>
2700 · FOMP Liability	18,303.88
Total Other Current Liabilities	<u>86,301.64</u>
Total Current Liabilities	111,965.87
Long Term Liabilities	
2910 · RSP Loan Fund Payable	39,925.28
2950 · Deferred Rev. - Forgivable Loan	50,008.95
Total Long Term Liabilities	<u>89,934.23</u>
Total Liabilities	201,900.10
Equity	
31000 · Unrestricted Net Assets	
31100 · Available to Operating	
31100a · Available to Operating - Begin	-7,653.19
31100b · Available to Operating - YTD Ch	16,962.92
Total 31100 · Available to Operating	9,309.73
31200 · Board Designated-Reserve Fund	22,718.00
31900 · Net Loan Assets	
31900a · Net Loan Assets - Begin	31,397.40
31900b · Net Loan Assets - YTD Change	-6,610.18
Total 31900 · Net Loan Assets	<u>24,787.22</u>
Total 31000 · Unrestricted Net Assets	56,814.95
33000 · Temp. Restricted Net Assets	
33210 · As to Purpose	
33210a · As to Purpose - Begin	8,092.32
33210b · As to Purpose - YTD Change	-2,067.90
Total 33210 · As to Purpose	<u>6,024.42</u>
Total 33000 · Temp. Restricted Net Assets	<u>6,024.42</u>
Total Equity	<u>62,839.37</u>
TOTAL LIABILITIES & EQUITY	<u><u>264,739.47</u></u>

Historic Saint Paul
Carol Carey, Executive Director

Carey has been committed to implementing preservation-based community economic development efforts in Saint Paul for 25+ years.

For the past 17 years Carey has served as executive director of Historic Saint Paul Corporation (HSP), a citywide preservation organization with a mission to “preserve and promote the cultural heritage, character, and vitality of Saint Paul neighborhoods”.

Historic Saint Paul implements a range of programs that conserve and strengthen Saint Paul neighborhoods by celebrating their cultural heritage and catalyzing the improvement of historic homes, commercial buildings, and local landmarks. An important part of this work has been providing financial and technical assistance and project management services to property owners completing exterior improvements on their properties. To date HSP has invested over \$1 million in loan and grant funds and leveraged an additional \$3 million in investments into over 50 homes and 15 commercial properties in the Dayton’s Bluff, Payne Phalen, West 7th, and Frogtown neighborhoods.

In recent years Historic Saint Paul has been partnering with the Frogtown Neighborhood Association in Preserve Frogtown – a community building and economic development initiative. Carey serves as Chief Manager of Preserve Frogtown LLC, where she has developed and managed the rehabilitation of four vacant houses, carefully managing the scope and construction process to deliver code compliant, marketable, attractive affordable homes that are completed utilizing preservation principles and practices in a cost-efficient manner.

In 1992, Carey received an individual Leadership in Neighborhoods grant from Saint Paul Companies to explore historic preservation as a community development tool. From 1990-2001 she served as executive director of the Upper Swede Hollow Neighborhoods Association (USHNA) During her term there she developed and administered organizational initiatives including single and multi-family housing projects, lead hazard reduction education, watershed education, and natural resource reclamation. During this time, Carey developed and managed the rehabilitation of several properties including:

- Rehabilitation of 608 Bates Avenue through the City’s “Houses to Homes” Program
- Rehabilitation and conversion of a 4-unit rental property at 735-737 East 5th Street (preservation award winner) to a side by side two-owner structure with a common wall agreement
- Moving a duplex threatened with demolition on the parking lot of Metropolitan State University to 634-636 Bates Avenue, and rehabilitation as a two-owner condominium unit.
- Acquisition and rehabilitation of a chronic problem property (nine residential units), converted to four affordable residential units, office space for three community owned/and or non-profit businesses, and the Swede Hollow Café an adjacent community vegetable garden, and one of the first professionally designed and engineered rain-gardens in the city (preservation award winner).

Carey received a BA in Liberal Arts from Macalester College and studied Arts Education at the University of Minnesota. She has served on the board of directors for a number of local non-profit organizations, on advisory councils for city and community-based planning initiatives, and on the Saint Paul Heritage Preservation Commission.

In 2007 Carey received a [Distinguished Citizen Citation](#) from her alma mater, Macalester College. The Distinguished Citizen Citation recognizes alumni who have exercised leadership in civic, social, religious and professional activities.