

# IRS e-file Signature Authorization for an Exempt Organization

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](http://www.irs.gov/Form8879EO) for the latest information.

# 2017

Department of the Treasury  
Internal Revenue Service

Name of exempt organization  
**LOCAL INITIATIVES SUPPORT CORPORATION**

Employer identification number  
**13-3030229**

Name and title of officer  
**LILY LIM, SVP & CONTROLLER**

### 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>154610978.</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 KPMG LLP to enter my PIN 

2	6	6	2	6
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 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 ▶ 11/5/2018

### 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. 

5	4	0	2	8	0	1	3	5	5	6
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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 ▶ 11/01/2018

**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 **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2017

**Open to Public Inspection**

**A** For the **2017** calendar year, or tax year beginning , **2017**, and ending , **20**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization LOCAL INITIATIVES SUPPORT CORPORATION			<b>D</b> Employer identification number 13-3030229	
	Doing Business As			<b>E</b> Telephone number (212) 455-9800	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite		
	501 SEVENTH AVENUE		7TH FL		
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10018				
<b>F</b> Name and address of principal officer: MAURICE JONES 501 SEVENTH AVENUE NEW YORK, NY 10018			<b>G</b> Gross receipts \$ 156,360,242.		
<b>I</b> 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			<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>J</b> Website: WWW.LISC.ORG			<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: 1979 <b>M</b> State of legal domicile: NY		
<b>H(c)</b> Group exemption number ▶					

## Part I Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: TO ASSIST COMMUNITY RESIDENTS THROUGHOUT URBAN AND RURAL AREAS OF THE UNITED STATES TO TRANSFORM DISTRESSED NEIGHBORHOODS INTO HEALTHY AND SUSTAINABLE COMMUNITIES.				
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	26.		
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	25.		
	<b>5</b> Total number of individuals employed in calendar year 2017 (Part V, line 2a)	<b>5</b>	702.		
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>			
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	286,741.		
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.			
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	162,840,503.	Current Year	106,451,418.
	<b>9</b> Program service revenue (Part VIII, line 2g)		35,455,709.		45,970,582.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)		543,796.		1,961,419.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		240,804.		227,559.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		199,080,812.		154,610,978.
	Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		95,047,838.	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			0.		0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			42,542,809.		47,765,472.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			55,331.		26,900.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 8,679,913.					
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			44,023,118.		46,787,654.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			181,669,096.		146,056,292.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12		17,411,716.		8,554,686.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	702,543,640.	End of Year	732,361,177.
	<b>21</b> Total liabilities (Part X, line 26)		423,303,856.		444,722,288.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20		279,239,784.		287,638,889.

**COPY FOR PUBLIC INSPECTION**

## 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.

<b>Sign Here</b>	Signature of officer	11/05/2018			
	Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name NICOLE FITZMAURICE	Preparer's signature <i>Nicole Fitzmaurice</i>	Date 11/01/2018	Check <input type="checkbox"/> if self-employed	PTIN P01491005
	Firm's name ▶ KPMG LLP	Firm's EIN ▶ 13-5565207			
	Firm's address ▶ 345 PARK AVENUE NEW YORK, NY 10154	Phone no. 703-286-8000			

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (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](http://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](http://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.

Type or print	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	LOCAL INITIATIVES SUPPORT CORPORATION	13-3030229
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
501 SEVENTH AVENUE 7TH FL		
City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
NEW YORK, NY 10018		

Enter the Return Code for the return that this application is for (file a separate application for each return) . . . . .

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 (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

LILY LIM

- The books are in the care of ▶ 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK NY 10018

Telephone No. ▶ 212 455-9800 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

<b>3a</b> 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.	<b>3a</b>	\$	0.
<b>b</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.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	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.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

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:

LOCAL INITIATIVES SUPPORT CORPORATION (LISC) IS DEDICATED TO HELPING COMMUNITY RESIDENTS TRANSFORM DISTRESSED NEIGHBORHOODS INTO HEALTHY AND SUSTAINABLE COMMUNITIES OF CHOICE AND OPPORTUNITY. SEE SCHEDULE O FOR MORE INFORMATION.

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 \$ 52,166,840. including grants of \$ ) (Revenue \$ 23,774,392. )

PROJECT DEVELOPMENT AND INVESTMENT. LISC PROVIDES TECHNICAL ASSISTANCE AND OTHER PROGRAM SERVICES TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO ASSIST THEM IN TRANSFORMING THEIR COMMUNITIES INTO HEALTHY AND SUSTAINABLE COMMUNITIES OF CHOICE AND OPPORTUNITY, INCLUDING EFFORTS TO PROMOTE SAFER STREETS; HELP RESIDENTS ACHIEVE ECONOMIC STABILITY; IMPROVE HEALTH AND ENCOURAGE HEALTHY LIFESTYLES; AND INCENTIVIZE CHANGE THROUGH ARTS AND CULTURE. SEE SCHEDULE O FOR MORE INFORMATION.

4b (Code: ) (Expenses \$ 51,476,266. including grants of \$ 51,476,266. ) (Revenue \$ )

PROJECT GRANTS. LISC PROVIDES GRANTS TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO SUPPORT THEIR EFFORTS TO TRANSFORM DISTRESSED COMMUNITIES. IN 2017, LISC ISSUED GRANTS TO 570 ENTITIES THROUGHOUT THE COUNTRY TO SUPPORT THE DEVELOPMENT OF 2,462 UNITS OF AFFORDABLE HOMES AND APARTMENTS; 621,247 SQUARE FEET OF COMMERCIAL, COMMUNITY, AND EDUCATIONAL FACILITY SPACE; AND THE CAPACITY BUILDING, OPERATIONS, AND OTHER COMMUNITY DEVELOPMENT ACTIVITIES OF NON-PROFIT COMMUNITY BASED ORGANIZATIONS.

4c (Code: ) (Expenses \$ 14,249,535. including grants of \$ ) (Revenue \$ 22,148,356. )

LENDING. LISC PROVIDES LOANS, LINES OF CREDIT, AND OTHER RECOVERABLE FINANCING AT ALL STAGES OF DEVELOPMENT - FROM PREDEVELOPMENT TO PERMANENT - TO SUPPORT PROJECTS AND PROGRAMS THAT REVITALIZE LOW- AND MODERATE-INCOME COMMUNITIES AND BENEFIT LOW- AND MODERATE-INCOME INDIVIDUALS. SEE SCHEDULE O FOR MORE INFORMATION.

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

4e Total program service expenses 117,892,641.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? . . . . .	X	
<b>3</b> 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
<b>4</b> <b>Section 501(c)(3) organizations.</b> 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	
<b>5</b> 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
<b>6</b> 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
<b>7</b> 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
<b>8</b> 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
<b>9</b> 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
<b>10</b> 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
<b>11</b> 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.		
<b>a</b> 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>b</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
<b>c</b> 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	
<b>d</b> 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	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> . . . . .	X	
<b>f</b> 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	
<b>12a</b> 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>b</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	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> . . . . .		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
<b>b</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	
<b>15</b> 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
<b>16</b> 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
<b>17</b> 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	
<b>18</b> 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
<b>19</b> 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
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i> . . . . .		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .		
<b>21</b> 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	
<b>22</b> 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	
<b>23</b> 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	
<b>24a</b> 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>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>b</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
<b>26</b> 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
<b>27</b> 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
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
<b>b</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
<b>c</b> 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
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
<b>30</b> 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
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> . . . . .		X
<b>32</b> 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
<b>33</b> 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	
<b>34</b> 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	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	X	
<b>b</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> . . . . .	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> 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	
<b>37</b> 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
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> 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 line numbers (1a-14b), descriptions, and Yes/No checkboxes. Includes questions about Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 720, and Form 702.

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 (26), 1b (25), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 1
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:

LILLY LIM 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018 212-455-9800



**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) MAURICE JONES PRESIDENT & CEO	35.00 0.	X		X			525,768.	0.	34,892.	
(2) ROBERT RUBIN CHAIRMAN & DIRECTOR	1.00 0.	X		X			0.	0.	0.	
(3) LISA CASHIN VICE CHAIR & DIRECTOR	1.00 0.	X					0.	0.	0.	
(4) GREGORY BELINFANTI DIRECTOR	1.00 0.	X		X			0.	0.	0.	
(5) AUDREY CHOI DIRECTOR	1.00 0.	X					0.	0.	0.	
(6) LARRY DALE DIRECTOR	1.00 0.	X					0.	0.	0.	
(7) MICHELLE DE LA UZ DIRECTOR	1.00 0.	X					0.	0.	0.	
(8) SALLY DURDAN DIRECTOR	1.00 0.	X					0.	0.	0.	
(9) TOMAS ESPINOZA DIRECTOR	1.00 0.	X					0.	0.	0.	
(10) DEAN ESSERMAN DIRECTOR	1.00 0.	X					0.	0.	0.	
(11) ELLEN GILLIGAN DIRECTOR	1.00 0.	X					0.	0.	0.	
(12) LISA GLOVER DIRECTOR	1.00 0.	X					0.	0.	0.	
(13) COLVIN W. GRANNUM DIRECTOR	1.00 0.	X					0.	0.	0.	
(14) LISA HASEGAWA DIRECTOR	1.00 0.	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			
( 15) TIM MCFADDEN ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 16) BRANDEE MCHALE ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 17) KATHRYN E. MERCHANT ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 18) RONALD PHILLIPS ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 19) ANDREW PLEPPER ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 20) REY RAMSEY ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 21) RICHARD RAPSON ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 22) LATA REDDY ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 23) NILDA RUIZ ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 24) GEORGE WALKER ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 25) DENNIS WHITE ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
<b>1b Sub-total</b> .....							525,768.	0.	34,892.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							6,766,133.	1,058,859.	1,690,995.	
<b>d Total (add lines 1b and 1c)</b> .....							7,291,901.	1,058,859.	1,725,887.	

**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 ▶ 66

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> 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	
<b>5</b> 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
ATTACHMENT 2		

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 19

**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			
( 26) JERRY RICKETT ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
( 27) DENISE NOTICE-SCOTT ----- EXECUTIVE VP	35.00 ----- 0.			X			314,377.	0.	39,152.	
( 28) MICHAEL LEVINE ----- EVP/GEN COUNSEL	35.00 ----- 0.			X			293,376.	0.	43,564.	
( 29) MICHAEL HEARNE ----- EXECUTIVE VP & CFO	35.00 ----- 0.			X			296,720.	0.	31,409.	
( 30) MATTHEW JOSEPHS ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			215,248.	0.	60,918.	
( 31) ELISE BALBONI ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			223,991.	0.	56,160.	
( 32) MARYJO ALLEN ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			225,133.	0.	35,193.	
( 33) DONNA GIANNONE ----- VICE PRESIDENT	35.00 ----- 0.			X			102,873.	0.	4,501.	
( 34) JOE DIFILIPPI ----- SENIOR VICE PRESIDENT & CIO	35.00 ----- 0.			X			193,376.	0.	43,478.	
( 35) GERALDINE BAUM ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			230,728.	0.	39,664.	
( 36) BETH MARCUS ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			214,779.	0.	56,237.	
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**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 **▶** 66

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		X
<b>4</b> 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	
<b>5</b> 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 in compensation from the organization **▶**

**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			
( 37) KEVIN JORDAN ----- SENIOR VICE PRESIDENT	35.00 0.			X			161,525.	0.	12,334.	
( 38) LILY LIM ----- SENIOR VICE PRES/CONTROLLER	35.00 0.			X			205,399.	0.	54,904.	
( 39) RICHARD MANSON ----- VICE PRESIDENT	35.00 0.			X			173,215.	0.	42,090.	
( 40) DENISE ALTAY ----- SENIOR VICE PRESIDENT	35.00 0.			X			224,811.	0.	41,000.	
( 41) CHARLES VLIK ----- VICE PRESIDENT	35.00 0.			X			171,900.	0.	18,526.	
( 42) CELAYNE HILL ----- VICE PRESIDENT/ASST. SECRETARY	35.00 0.			X			158,566.	0.	31,896.	
( 43) CHRISTOPHER PLUMMER ----- VICE PRESIDENT	35.00 0.			X			166,367.	0.	39,405.	
( 44) JOSEPH HORIYE ----- VICE PRESIDENT	35.00 0.			X			164,414.	0.	23,803.	
( 45) REENA ABRAHAM ----- VICE PRESIDENT	35.00 0.			X			163,228.	0.	53,598.	
( 46) CALVIN PARKER ----- VICE PRESIDENT	35.00 0.			X			147,209.	0.	26,320.	
( 47) CONSTANCE MAX ----- VICE PRESIDENT & CCO	35.00 0.			X			182,606.	0.	55,195.	
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**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 ► 66

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		X
<b>4</b> 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	
<b>5</b> 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 in compensation from the organization ►

**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			
( 48) SUZANNE ANARDE ----- VICE PRESIDENT	35.00 0.			X			168,441.	0.	29,048.	
( 49) CHRISTINA TRAVERS ----- VICE PRESIDENT & TREASURER	35.00 0.			X			154,240.	0.	21,156.	
( 50) COURTNEY BRANKER ----- ASSISTANT TREASURER	35.00 0.			X			132,213.	0.	44,372.	
( 51) MICHAEL TANG ----- VICE PRESIDENT	35.00 0.			X			146,469.	0.	27,215.	
( 52) KENNETH PATRICK MAHER ----- VICE PRESIDENT/SECRETARY	35.00 0.			X			170,414.	0.	31,767.	
( 53) ORAMENTA NEWSOME ----- VICE PRESIDENT	35.00 0.			X			171,276.	0.	42,294.	
( 54) WILLIAM TAFT ----- VICE PRESIDENT	35.00 0.			X			160,141.	0.	49,270.	
( 55) JULIA RYAN ----- VICE PRESIDENT	35.00 0.			X			150,433.	0.	50,226.	
( 56) MIKE HUMBERSTONE ----- VICE PRESIDENT	35.00 0.			X			140,421.	0.	37,065.	
( 57) MORGAN HARPER ----- VICE PRESIDENT	35.00 0.			X			124,932.	0.	7,787.	
( 58) ANNA ALEKSEYEVA ----- VICE PRESIDENT	35.00 0.			X			39,049.	0.	813.	
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**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 ► 66

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		X
<b>4</b> 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	
<b>5</b> 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 in compensation from the organization ►

**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			
( 59) JOSEPH HAGAN ----- SENIOR VICE PRESIDENT	1.00 39.00			X				0.	615,306.	220,780.
( 60) KEVIN BOES ----- SENIOR VICE PRESIDENT	1.00 39.00			X				0.	443,553.	57,147.
( 61) RICHARD PINNER ----- ASSISTANT SECRETARY	35.00 0.			X				122,246.	0.	22,095.
( 62) SAM MARKS ----- EXECUTIVE DIRECTOR	35.00 0.					X		174,515.	0.	58,805.
( 63) MEGHAN HARTE ----- EXECUTIVE DIRECTOR	35.00 0.					X		186,181.	0.	39,394.
( 64) JOHN CHRISTOPHER WALKER ----- DIRECTOR OF RESEARCH	35.00 0.					X		173,580.	0.	47,492.
( 65) COLLETTE WILLIAMS ----- ASSISTANT CONTROLLER	35.00 0.					X		167,083.	0.	43,480.
( 66) JEANNE COLA ----- EXECUTIVE DIRECTOR	35.00 0.					X		154,658.	0.	51,442.
-----										
-----										
-----										
-----										
<b>1b Sub-total</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

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 ▶ 66

	Yes	No
3 Did the organization list any <b>former</b> 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 in 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.

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; Program Service Revenue; and Other Revenue.

**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	50,497,128.	50,497,128.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	979,138.	979,138.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	0.			
<b>4</b> Benefits paid to or for members . . . . .	0.			
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	7,643,234.	3,299,496.	3,446,860.	896,878.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0.			
<b>7</b> Other salaries and wages . . . . .	29,686,632.	19,676,088.	6,277,231.	3,733,313.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,023,287.	1,358,496.	408,596.	256,195.
<b>9</b> Other employee benefits . . . . .	5,987,499.	3,842,960.	1,404,592.	739,947.
<b>10</b> Payroll taxes . . . . .	2,424,820.	1,507,055.	616,839.	300,926.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .	5,201,569.	4,673,255.	528,314.	
<b>b</b> Legal . . . . .	138,255.	85,856.	35,255.	17,144.
<b>c</b> Accounting . . . . .	409,730.		409,730.	
<b>d</b> Lobbying . . . . .	229,651.	142,613.	58,561.	28,477.
<b>e</b> Professional fundraising services. See Part IV, line 17.	26,900.			26,900.
<b>f</b> Investment management fees . . . . .	573,074.		573,074.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	10,846,034.	6,865,308.	2,681,172.	1,299,554.
<b>12</b> Advertising and promotion . . . . .	57,741.	35,857.	14,724.	7,160.
<b>13</b> Office expenses . . . . .	1,165,909.	768,172.	244,350.	153,387.
<b>14</b> Information technology . . . . .	985,190.	615,888.	246,322.	122,980.
<b>15</b> Royalties . . . . .	0.			
<b>16</b> Occupancy . . . . .	4,025,249.	2,671,420.	820,406.	533,423.
<b>17</b> Travel . . . . .	2,189,829.	1,359,884.	558,406.	271,539.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
<b>19</b> Conferences, conventions, and meetings . . . . .	738,844.	458,822.	188,405.	91,617.
<b>20</b> Interest . . . . .	9,984,429.	9,984,429.		
<b>21</b> Payments to affiliates . . . . .	0.			
<b>22</b> Depreciation, depletion, and amortization . . . . .	488,531.	298,529.	130,392.	59,610.
<b>23</b> Insurance . . . . .	387,000.		387,000.	
<b>24</b> 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.)				
<b>a</b> OTHER EXPENSES	1,560,848.	966,476.	453,509.	140,863.
<b>b</b> PROV. FOR LOSS ON RECEIVABLE	4,290,993.	4,290,993.		
<b>c</b> PROV. FOR RECOVERABLE GRANTS	867,558.	867,558.		
<b>d</b> OTHER PROGRAM EXPENSES	2,647,220.	2,647,220.		
<b>e</b> All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	146,056,292.	117,892,641.	19,483,738.	8,679,913.
<b>26 Joint costs.</b> 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) . . . . .	0.			



**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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing . . . . .	18,950,271.	<b>1</b>	13,742,068.
	<b>2</b> Savings and temporary cash investments . . . . .	143,248,275.	<b>2</b>	106,187,753.
	<b>3</b> Pledges and grants receivable, net . . . . .	21,838,663.	<b>3</b>	37,412,313.
	<b>4</b> Accounts receivable, net . . . . .	37,908,417.	<b>4</b>	27,820,758.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0.	<b>5</b>	0.
	<b>6</b> 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 . . . . .	0.	<b>6</b>	0.
	<b>7</b> Notes and loans receivable, net . . . . .	0.	<b>7</b>	0.
	<b>8</b> Inventories for sale or use . . . . .	0.	<b>8</b>	0.
	<b>9</b> Prepaid expenses and deferred charges . . . . .	1,899,021.	<b>9</b>	955,711.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 5,982,329.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 3,719,426.	1,603,282.	<b>10c</b> 2,262,903.
	<b>11</b> Investments - publicly traded securities . . . . .	115,267,509.	<b>11</b>	116,471,470.
	<b>12</b> Investments - other securities. See Part IV, line 11 . . . . .	16,349,515.	<b>12</b>	17,574,396.
	<b>13</b> Investments - program-related. See Part IV, line 11 . . . . .	281,871,782.	<b>13</b>	339,148,268.
	<b>14</b> Intangible assets . . . . .	0.	<b>14</b>	0.
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	63,606,905.	<b>15</b>	70,785,537.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	702,543,640.	<b>16</b>	732,361,177.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	10,687,375.	<b>17</b>	15,128,507.
	<b>18</b> Grants payable . . . . .	76,008,680.	<b>18</b>	48,387,660.
	<b>19</b> Deferred revenue . . . . .	117,500.	<b>19</b>	153,922.
	<b>20</b> Tax-exempt bond liabilities . . . . .	0.	<b>20</b>	0.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	0.	<b>21</b>	0.
	<b>22</b> 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 . . . . .	0.	<b>22</b>	0.
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	32,964,448.	<b>23</b>	36,271,580.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	276,353,919.	<b>24</b>	336,308,469.
	<b>25</b> 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 . . . . .	27,171,934.	<b>25</b>	8,472,150.
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	423,303,856.	<b>26</b>	444,722,288.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	131,715,816.	<b>27</b>	141,504,794.
	<b>28</b> Temporarily restricted net assets . . . . .	147,523,968.	<b>28</b>	146,134,095.
	<b>29</b> Permanently restricted net assets . . . . .	0.	<b>29</b>	0.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	279,239,784.	<b>33</b>	287,638,889.	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	702,543,640.	<b>34</b>	732,361,177.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	154,610,978.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	146,056,292.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	8,554,686.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	279,239,784.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-155,581.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0.
<b>7</b>	Investment expenses	<b>7</b>	0.
<b>8</b>	Prior period adjustments	<b>8</b>	0.
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	287,638,889.

**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
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**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)						
<b>Total</b>						

**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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	110,906,468.	105,519,668.	98,640,981.	162,840,503.	106,727,414.	584,635,034.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0.
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0.
<b>4 Total.</b> Add lines 1 through 3. . . . .	110,906,468.	105,519,668.	98,640,981.	162,840,503.	106,727,414.	584,635,034.
<b>5</b> 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). . . . .						93,051,682.
<b>6 Public support.</b> Subtract line 5 from line 4						491,583,352.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>7</b> Amounts from line 4. . . . .	110,906,468.	105,519,668.	98,640,981.	162,840,503.	106,727,414.	584,635,034.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .	1,552,516.	1,263,411.	1,480,272.	1,760,875.	1,877,085.	7,934,159.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						0.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . <b>ATCH. 1</b> . . . . .	185,606.	552,735.	171,524.	110,962.	666,087.	1,686,914.
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						594,256,107.
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	177,001,681.
<b>13 First five years.</b> 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 <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)). . . . .	<b>14</b>	82.72%
<b>15</b> Public support percentage from 2016 Schedule A, Part II, line 14 . . . . .	<b>15</b>	84.03%
<b>16a 33 1/3% support test - 2017.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization. . . . . ▶ <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test - 2016.</b> 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 <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test - 2017.</b> 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 <b>stop here</b> . 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>b 10%-facts-and-circumstances test - 2016.</b> 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 <b>stop here</b> . 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>18 Private foundation.</b> 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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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 . . . . .						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5. . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b. . . . .						
<b>8 Public support.</b> (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
<b>9</b> Amounts from line 6. . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (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**

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

**Section D. Computation of Investment Income Percentage**

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

**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
<b>1</b> 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>		
<b>2</b> 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>		
<b>3a</b> 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>b</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>		
<b>c</b> 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>		
<b>4a</b> 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>b</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>		
<b>c</b> 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>		
<b>5a</b> 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>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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>		
<b>7</b> 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>		
<b>8</b> 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>		
<b>9a</b> 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>b</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>		
<b>c</b> 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>		
<b>10a</b> 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>b</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
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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>11 a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11 b</b>	
<b>c</b> 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>	<b>11 c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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>	<b>1</b>	
<b>2</b> 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>	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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>	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?	<b>1</b>	
<b>2</b> 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>	<b>2</b>	
<b>3</b> 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>	<b>3</b>	

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.		Yes	No
<b>a</b> 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>2a</b>		
<b>b</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>	<b>2b</b>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> 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>3a</b>		
<b>b</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>	<b>3b</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.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3.	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> 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)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4).	<b>8</b>		

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

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

**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 <b>Total annual distributions.</b> 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 <b>Total</b> 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 <b>Excess distributions carryover to 2018.</b> 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.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2013	2014	2015	2016	2017	TOTAL
MISCELLANEOUS REVENUE	185,606.	552,735.	171,524.	110,962.	666,087.	1,686,914.
<b>TOTALS</b>	<u>185,606.</u>	<u>552,735.</u>	<u>171,524.</u>	<u>110,962.</u>	<u>666,087.</u>	<u>1,686,914.</u>

**Schedule of Contributors**

**2017**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

<b>Name of the organization</b> LOCAL INITIATIVES SUPPORT CORPORATION	<b>Employer identification number</b> 13-3030229
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**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).

<b>Name of organization</b> LOCAL INITIATIVES SUPPORT CORPORATION	<b>Employer identification number</b> 13-3030229
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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	_____	\$ 10,372,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____	\$ 5,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____	\$ 4,635,593.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____	\$ 4,325,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____	\$ 3,450,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____	\$ 2,205,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

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

Name of organization LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number  
13-3030229

**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 information once. See instructions.) ► \$ \_\_\_\_\_  
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 C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

**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](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

**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 LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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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. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities (see instructions) . . . . .

**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-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2017

**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.

<b>Limits on Lobbying Expenditures</b> <b>(The term "expenditures" means amounts paid or incurred.)</b>		<b>(a) Filing organization's totals</b>	<b>(b) Affiliated group totals</b>
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .		141,591.	141,591.
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .		494,427.	494,427.
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .		636,018.	636,018.
<b>d</b> Other exempt purpose expenditures . . . . .		145,420,274.	145,420,274.
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .		146,056,292.	146,056,292.
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	1,000,000.
<b>If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:</b>			
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.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) . . . . .		250,000.	250,000.
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .		0.	0.
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .		0.	0.
<b>j</b> 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 checked="" 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.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	<b>(a) 2014</b>	<b>(b) 2015</b>	<b>(c) 2016</b>	<b>(d) 2017</b>	<b>(e) Total</b>
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
<b>c</b> Total lobbying expenditures	625,153.	610,803.	609,706.	636,018.	2,481,680.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures	140,077.	123,224.	142,522.	141,591.	547,414.



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)).

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include questions about lobbying activities like volunteers, staff, media, mailings, etc.

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

Table with 3 rows and 3 columns: Question, Yes, No. Questions about dues, lobbying expenditures, and carryover.

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."

Table with 5 rows and 3 columns: Question, Yes, No. Questions about dues, non-deductible lobbying, and carryover.

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.

Horizontal lines for providing supplemental information.

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

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

Employer identification number

LOCAL INITIATIVES SUPPORT CORPORATION

13-3030229

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: Revenue, Assets. 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. 1b 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.

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

Schedule D (Form 990) 2017

**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		4,428,810.	3,526,122.	902,688.
d Equipment		1,095,355.	37,673.	1,057,682.
e Other		458,164.	155,631.	302,533.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,262,903.

**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)		
<b>Total.</b> (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) LOANS TO COMMUNITY DEV PROJ	330,837,212.	COST
(2) NMSC INVEST IN PROJECT P'SHIP	60,288.	COST
(3) RECOVERABLE GRANTS TO CDPS	8,250,768.	COST
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	339,148,268.	

**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) ACCRUED INTEREST RECEIVABLE	2,038,590.
(2) DUE FROM AFFILIATES	3,312,508.
(3) INVESTMENT IN AFFILIATES	61,808,348.
(4) OTHER RECEIVABLES	2,357,734.
(5) FEE RECEIVABLE	211,846.
(6) NOTES RECEIVABLE	1,056,511.
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶	70,785,537.

**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) DUE TO AFFILIATES	1,758,482.
(3) GOVT CONTRACTS & LOAN-RELATED	6,713,668.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	8,472,150.

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-d, e) for adjustments. Total revenue reported as 149,225,415 on line 1 and 149,105,000 on line 3. Total revenue after adjustments reported as 154,610,978 on line 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.

Table with 5 main rows and sub-rows (a-d, e) for adjustments. Total expenses reported as 140,826,310 on line 1 and 140,550,314 on line 3. Total expenses after adjustments reported as 146,056,292 on line 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.

SEE PAGE 5

Multiple horizontal lines provided for entering supplemental information.

**Part XIII Supplemental Information** (continued)

SCHEDULE D, PART X, LINE 1(2)

NATIONAL EQUITY FUND, INC. (NEF), AN AFFILIATE OF LISC PROVIDES MANAGEMENT SERVICES RELATED TO THE DAY-TO-DAY OPERATIONS OF NMSC. PURSUANT TO A MANAGEMENT SERVICES AGREEMENT, NMSC PAYS A QUARTERLY FEE EQUAL TO THE ALLOCABLE COSTS OF CERTAIN NEF EMPLOYEES, DIRECT AND INDIRECT OVERHEAD OF CERTAIN CORPORATE SERVICES, AND ALL OUT-OF POCKET EXPENSES INCURRED BY NEF. DUE TO AFFILIATES REPRESENTS MANAGEMENT SERVICES PAYABLE BY NMSC TO NEF.

SCHEDULE D, PART X, LINE 2

LISC IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE U.S. INTERNAL REVENUE CODE (THE CODE). LISC HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION AND HAS BEEN DESIGNATED A "PUBLICLY SUPPORTED" ORGANIZATION OF THE TYPE DESCRIBED IN SECTIONS 170(B)(1)(A)(VI) AND 509(A)(1) OF THE CODE.

THE ORGANIZATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE ORGANIZATION'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER INTERNAL REVENUE CODE SECTION 511. THE ORGANIZATION DID NOT RECOGNIZE ANY UNRELATED BUSINESS INCOME TAX LIABILITIES FOR THE PERIOD ENDING DECEMBER 31, 2017.

SCHEDULE D, PART XI, LINE 4B

LINE 4B CONSISTS OF REVENUE TOTALING \$9,232,782 FROM THE FOLLOWING LIMITED LIABILITY COMPANIES. LISC IS THE SOLE MEMBER OF EACH LLC AND CONSOLIDATES THESE ENTITIES ON ITS FORM 990 BUT NOT IN ITS STAND-ALONE

**Part XIII Supplemental Information** (continued)

FINANCIAL STATEMENTS (SEE SCHEDULE R).

NEW MARKETS SUPPORT COMPANY, LLC	\$9,125,342
LISC LOUISIANA LOAN FUND, LLC	\$ 43,263
NEIGHBORHOOD PROPERTIES, LLC	\$ 64,177
REDUCTION IN REVENUE DUE TO ELIMINATION ENTRIES FROM TRANSACTIONS AMONG DISREGARDED ENTITIES	\$(3,288,276)
	-----
SUB-TOTAL	\$5,944,506
RECLASSIFICATION OF RENTAL EXPENSES	\$ (438,528)
	-----
TOTAL	\$ 5,505,978

SCHEDULE D, PART XII, LINE 2D

RECLASSIFICATION OF RENTAL EXPENSES	\$ 438,528
-------------------------------------	------------

SCHEDULE D, PART XII, LINE 4B

LINE 4B CONSISTS OF EXPENSES TOTALING \$8,347,198 FROM THE FOLLOWING LIMITED LIABILITY COMPANIES. LISC IS THE SOLE MEMBER OF EACH LLC AND CONSOLIDATES THESE ENTITIES ON ITS FORM 990 BUT NOT IN ITS STAND-ALONE FINANCIAL STATEMENTS (SEE SCHEDULE R).

NEW MARKETS SUPPORT COMPANY, LLC	\$ 9,477,025
LISC LOUISIANA LOAN FUND, LLC	\$ 59,876
NEIGHBORHOOD PROPERTIES, LLC	\$ 22,455
REDUCTION IN EXPENSES DUE TO ELIMINATION ENTRIES FROM TRANSACTIONS AMONG DISREGARDED ENTITIES	\$(3,614,849)



**Part XIII** Supplemental Information *(continued)*

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TOTAL

-----  
\$ 5,944,506

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		5,136,087.
(2) EUROPE	0.	0.	INVESTMENTS		8,819,239.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .					13,955,326.
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c Totals</b> (add lines 3a and 3b)					13,955,326.

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

Schedule F (Form 990) 2017

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ \_\_\_\_\_

3 Enter total number of other organizations or entities . . . . . ▶ \_\_\_\_\_

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . .  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* . . . . .  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* . . . . .  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . .  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* . . . . .  Yes  No

**Part V** **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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.

**2017**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public Inspection**

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest instructions.

Name of the organization  
LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number  
13-3030229

**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  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2a 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			
1	ATTACHMENT 1						
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Total</b>						26,900.	-26,900.

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.

AZ, AR, CA, CT, DC, FL, IL, IN, KS, KY, LA, MA, MI, MN, MS, MO, NJ, NY, OH, PA, RI, TX, VA, WI,

**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
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	<b>1</b> Gross receipts . . . . .				
	<b>2</b> Less: Contributions . . . . .				
	<b>3</b> Gross income (line 1 minus line 2) . . . . .				
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				
	<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				

**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	<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> 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	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				
	<b>8</b> 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 ▶ \_\_\_\_\_

- 15 a 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 explanation 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 G, PART I, LINE 2B, COLUMN (IV)

LISC RECEIVES GROSS RECEIPTS FROM ITS FUNDRAISING ACTIVITIES, BUT IS NOT ABLE TO BREAK OUT GROSS RECEIPTS BY FUNDRAISER DUE TO THE NATURE OF PLANNED GIVING AND OTHER LONG-TERM FUNDRAISING ACTIVITIES.

990, SCHEDULE G, PART I - HIGHEST PAID FUNDRAISER

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS?		GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION
		YES	NO			
EVENERGY LLC 1712 MAIN STREET SUITE 325 KANSAS CITY MO 64108	EVENT PLANNING		X		13,106.	-13,106.
STRATEGY MATTERS LLC 560 HARRISON AVENUE SUITE 404 BOSTON MA 02118	GRANT WRITING		X		3,794.	-3,794.
MARY-KIM ARNOLD 66 SUMMIT STREET PAWTUCKET RI 02860	GRANT WRITING		X		5,000.	-5,000.
PATRICIA BEECH 222 E. SUPERIOR STREET SUITE 324 DULUTH MN 55802	RESEARCH PROP		X		5,000.	-5,000.

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Name of the organization

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Employer identification number

13-3030229

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(1) 1726 MERMAID LLC 1726 MERMAID AVENUE BROOKLYN NY 11224	81-1205396	LLC - PARTNERSH	20,000.				SEE PART IV
(2) A COMMUNITY OF FRIENDS 3701 WILSHIRE BLVD LOS ANGELES CA 90010	95-4203106	501(C)(3)	15,000.				SEE PART IV
(3) A NEW LEAF INC. 868 EAST UNIVERSITY DRIVE MESA AZ 85203	86-0256667	501(C)(3)	246,085.				SEE PART IV
(4) A SAFE HAVEN FOUNDATION 2750 W. ROOSEVELT ROAD CHICAGO IL 60608	36-4444200	501(C)(3)	25,000.				SEE PART IV
(5) ABC-PILSEN 1929 W. 23RD STREET CHICAGO IL 60608	46-2454231	501(C)(3)	7,000.				SEE PART IV
(6) ABILITY HOUSING INC. 76 SOUTH LAURA ST., JACKSONVILLE, FL 32202	59-3087085	501(C)(3)	20,000.				SEE PART IV
(7) ACADEMY OF HOPE ADULT PUBLIC CHARTER SCHOOL 2315 18TH PLACE NE WASHINGTON DC 20018	52-1730021	501(C)(3)	25,000.				SEE PART IV
(8) ACCE INSTITUTE 3655 S. GRAND AVE. LOS ANGELES CA 90007	27-1487442	501(C)(3)	52,500.				SEE PART IV
(9) ACE PREPARATORY INC. 5326 HILLSIDE AVENUE INDIANAPOLIS IN 46220	47-3128337	501(C)(3)	50,000.				SEE PART IV
(10) ACTION FOR BOSTON COMMUNITY DVLPMNT INC. 178 TREMONT ST., BOSTON, MA 02111	04-2304133	501(C)(3)	90,000.				SEE PART IV
(11) ADAMS BROWN COUNTIES ECONOMIC OPPORTUNITY I 406 W. PLUM ST, GEORGETOWN, OH 45121	31-0710683	501(C)(3)	52,525.				SEE PART IV
(12) AEON 901 NORTH 3RD ST., MINNEAPOLIS, MN 55401	41-1558711	501(C)(3)	45,000.				SEE PART IV

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

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(1) AFFORDABLE HOUSING AND SERVICES COLLABORATI 536 GRANITE ST. 3RD FL. BRAINTREE MA 02184	04-3555681	501(C)(3)	10,000.				SEE PART IV
(2) AFRICAN ECONOMIC DVLPMNT SOLUTIONS 1821 UNIVERSITY AVE W, ST. PAUL, MN 55104	80-0345712	501(C)(3)	45,000.				SEE PART IV
(3) AFRICAN REPERTORY TROUPE INC. 7 RIVERBANK PLACE MATTAPAN MA 02126	04-3468668	501(C)(3)	61,000.				SEE PART IV
(4) ALAMEDA COUNTY DEPUTY SHERIFF'S ACTIVITIES 16378 E. 14TH STREET SAN LEANDRO CA 94578	83-0410537	501(C)(3)	32,605.				SEE PART IV
(5) ALAMO COMMUNITY GROUP 4100 PIEDRAS DR. EAST SAN ANTONIO TX 78228	74-2569914	501(C)(3)	36,429.				SEE PART IV
(6) ALBANY COUNTY LAND BANK CORPORATION 255 ORANGE ST., ALBANY, NY 12210	47-1646099	501(C)(3)	15,697.				SEE PART IV
(7) ALBANY HOUSING AUTHORITY 200 SOUTH PEARL STREET ALBANY NY 12202	14-6003900	GOVERNMENT	615,000.				SEE PART IV
(8) ALISI TULUA 409 S. CMLTH AVE. LOS ANGELES CA 90020		INDIVIDUAL/SOLE	20,836.				SEE PART IV
(9) ALLIANCE FOR MULTICULTURAL COMMUNITY SERVIC 6440 HILLCROFT, HOUSTON, TX 77081	76-0171217	501(C)(3)	264,998.				SEE PART IV
(10) AMERICAN INDIAN COMMUNITY DVLPMNT CORP 1508 E. FRANKLIN AVE, MINNEAPOLIS, MN 55404	41-1716667	501(C)(3)	20,000.				SEE PART IV
(11) AMERICAN INDIAN COMMUNITY HOUSING ORG 202 WEST 2ND ST., DULUTH, MN 55805	41-1782394	501(C)(3)	7,415.				SEE PART IV
(12) AMOS HOUSE P.O. BOX 72873, PROVIDENCE, RI 02907	05-0387218	501(C)(3)	357,206.				SEE PART IV

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(1) ANACOSTIA COORDINATING COUNCIL INC. 2401 SHANNON PLACE SE, WASHINGTON, DC 20020	52-1591131	501(C)(3)	6,000.				SEE PART IV
(2) APPALACHIAN COMMUNITY ACTION & DEVELOPMENT 175 MILITARY LANE GATE CITY VA 24251	54-0785849	501(C)(3)	7,000.				SEE PART IV
(3) ARAB COMMUNITY CENTER FOR ECONOMIC AND SOCI 2651 SAULINO COURT DEARBORN MI 48120	23-7444497	501(C)(3)	20,813.				SEE PART IV
(4) ARCHWAY INVESTMENT CORPORATION INC. P.O. BOX 280569 LAKEWOOD CO 80228	46-4352926	501(C)(3)	40,000.				SEE PART IV
(5) ARLINGTON PARTNERSHIP FOR AFFORDABLE HOUSIN 4318 N CARLIN SPRINGS RD ARLINGTON VA 22203	54-1515133	501(C)(3)	35,000.				SEE PART IV
(6) ART 180 INC. 114 W. MARSHALL STREET RICHMOND VA 23220	54-1935207	501(C)(3)	6,000.				SEE PART IV
(7) ART OPPORTUNITIES, INC. 20 E. CENTRAL PKWY., CINCINNATI, OH 45202	31-1665900	501(C)(3)	16,500.				SEE PART IV
(8) ASIAN ECONOMIC DVLPMNT ASSOC 377 UNIVERSITY AVE. W., ST. PAUL, MN 55103	41-1911474	501(C)(3)	44,200.				SEE PART IV
(9) ASOCIACION DE PUERTORRIQUENOS EN MARCHA INC 1900 N. 9TH ST., PHILADELPHIA, PA 19122	23-1930630	501(C)(3)	248,295.				SEE PART IV
(10) ATLANTA INDEPENDENT SCHOOL SYSTEM 130 TRINITY AVENUE SW ATLANTA GA 30303	58-6000134	GOVERNMENT	50,000.				SEE PART IV
(11) AUNTIE APRIL'S 4618 3RD ST., SAN FRANCISCO, CA 94124	47-3479046	C CORP	72,700.				SEE PART IV
(12) AURORA/ST. ANTHONY NEIGHBORHOOD DVLPMNT COR 774 UNIVERSITY AVE W., ST. PAUL, MN 55104	41-1432372	501(C)(3)	30,000.				SEE PART IV

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(1) AUSTIN COMING TOGETHER 5049 W. HARRISON ST, CHICAGO IL 60644	45-0920919	501(C)(3)	138,750.				SEE PART IV
(2) AVENUE COMMUNITY DVLPMT CORP 2505 WASHINGTON AVE., HOUSTON, TX 77007	76-0380602	501(C)(3)	137,799.				SEE PART IV
(3) AVONDALE COMPREHENSIVE DVLPMT CORP 3494 READING RD., CINCINNATI, OH 45229	45-2412695	501(C)(3)	154,070.				SEE PART IV
(4) BACK OF THE YARDS NEIGHBORHOOD 1751 W. 47TH ST., CHICAGO, IL 60609	36-2079600	501(C)(3)	12,000.				SEE PART IV
(5) BAME RENAISSANCE COMMUNITY DVLPMT CORP 2754 IMPERIAL AVE, SAN DIEGO, CA 92102	33-0677938	501(C)(3)	55,000.				SEE PART IV
(6) BANANA KELLY COMMUNITY IMPROVEMENT ASSOC 863 PROSPECT AVE., BRONX, NY 10459	13-2934000	501(C)(3)	114,000.				SEE PART IV
(7) BARBARA GRATTA 5273 3RD ST., SAN FRANCISCO, CA 94124	42-1678096	INDIVIDUAL/SOLE	49,823.				SEE PART IV
(8) BAYVIEW OPERA HOUSE INC. 4702 3RD STREET SAN FRANCISCO CA 94124	94-3136172	501(C)(3)	216,050.				SEE PART IV
(9) BEACON INTERFAITH HOUSING COLLABORATIVE 2610 UNIVERSITY AVE. W., ST PAUL, MN 55114	41-1953599	501(C)(3)	50,000.				SEE PART IV
(10) BEDFORD STUYVESANT RESTORATION CORP 1368 FULTON ST., BROOKLYN, NY 11216	11-6083182	501(C)(3)	49,813.				SEE PART IV
(11) BELMONT HOUSING RESOURCES FOR WNY 1195 MAIN ST., BUFFALO, NY 14209	16-1080227	501(C)(3)	48,000.				SEE PART IV
(12) BERNADETTE SMITH 5267 3RD STREET SAN FRANCISCO CA 94124	94-3311787	INDIVIDUAL/SOLE	34,649.				SEE PART IV

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(1) BETTER HOUSING COALITION 23 WEST BROAD ST. STE 100 RICHMOND VA 23220	54-1479059	501(C)(3)	22,500.				SEE PART IV
(2) BEYOND THE BALL 2657 S. LAWNDALE, CHICAGO, IL 60623	26-1440472	501(C)(3)	15,000.				SEE PART IV
(3) BIG CAR MEDIA INC. 1125 S. CRUFT ST., INDIANAPOLIS, IN 46203	11-3725157	501(C)(3)	24,985.				SEE PART IV
(4) BLUE HILLS COMMUNITY SERVICES 5008 PROSPECT AVE., KANSAS CITY, MO 64130	51-0141323	501(C)(3)	53,344.				SEE PART IV
(5) BOARD OF EDUCATION OF BALTIMORE COUNTY 6901 N. CHARLES STREET TROWSON MD 21204	52-6000886	GOVERNMENT	50,000.				SEE PART IV
(6) BOARD OF EDUCATION OF PRINCE GEORGE'S COUNT 14201 SCHOOL LANE UPPER MARLBORO MD 20772	52-6000992	GOVERNMENT	250,000.				SEE PART IV
(7) BOSTON LOCAL DVLPMNT CORP 43 HAWKINS ST., BOSTON, MA 02114	04-2681311	501(C)(3)	287,500.				SEE PART IV
(8) BOYS AND GIRLS CLUBS OF LONG BEACH 3635 LONG BEACH BLVD LONG BEACH CA 90807	95-1643977	501(C)(3)	15,000.				SEE PART IV
(9) BOYS, GIRLS, ADULTS COMMUNITY DVLPMNT CENTE HIGHWAY 49, BLDG., 306, MARVELL, AZ 72366	71-0540330	501(C)(3)	25,225.				SEE PART IV
(10) BREAD FOR THE CITY INC. 1525 7TH STREET, NW WASHINGTON DC 20001	52-1138207	501(C)(3)	50,000.				SEE PART IV
(11) BREAKTHROUGH URBAN MINISTRIES 402 N. ST. LOUIS AVE., CHICAGO, IL 60624	36-3810926	501(C)(3)	22,000.				SEE PART IV
(12) BREVARD NEIGHBORHOOD DEVELOPMENT COALITION 1151 MASTERSON STREET MELBOURNE FL 32935	59-3483505	501(C)(3)	15,000.				SEE PART IV

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(1) BRIAN GUYER 1590 REDSTONE DR. APT. H PARK CITY UT 84098		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(2) BRIDGE STREET DEVELOPMENT CORPORATION 460 NOSTRAND AVE., BROOKLYN, NY 11216	11-3250772	501(C)(3)	35,000.				SEE PART IV
(3) BRIDGEPORT NEIGHBORHOOD TRUST, INC. 570 STATE ST., BRIDGEPORT, CT 06604	22-2809353	501(C)(3)	50,000.				SEE PART IV
(4) BRIGHTON CENTER INC. 741 CENTRAL AVE., NEWPORT, KY 41072	61-0673886	501(C)(3)	437,680.				SEE PART IV
(5) BRIGHTON PARK NEIGHBORHOOD COUNCIL 4477 S. ARCHER AVE., CHICAGO, IL 60632	36-4229387	501(C)(3)	7,300.				SEE PART IV
(6) BRYCE BUTLER 3529 SAMPLE WAY LOUISVILLE KY 40245		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(7) BUFFALO ERIE NIAGARA LAND IMPROVEMENT CORP 403 MAIN ST., BUFFALO, NY 14202	46-3582754	501(C)(3)	15,297.				SEE PART IV
(8) BUILD, INC. 5100 W HARRISON ST., CHICAGO, IL 60644	23-7022085	501(C)(3)	7,000.				SEE PART IV
(9) BUILDING BRIDGES ACROSS THE RIVER INC. 1901 MISSISSIPPI AVE SE WASHINGTONDC 20020	52-2013526	501(C)(3)	35,000.				SEE PART IV
(10) BUILDING FUTURES 1 ACORN STREET PROVIDENCE RI 02903	81-3939129	501(C)(3)	153,572.				SEE PART IV
(11) BUILDING HOPE A CHARTER SCHOOL FACILITIES F 910 17TH STREET WASHINGTON DC 20006	20-0367954	501(C)(3)	50,000.				SEE PART IV
(12) CABRILLO ECONOMIC DVLPMNT CORP 702 COUNTY SQ. DR., VENTURA, CA 93003	95-3681521	501(C)(3)	69,925.				SEE PART IV

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13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) CAL RIPKEN SR. FOUNDATION INC. 1427 CLARKVIEW RD BALTIMORE MD 21209	52-2310500	501(C)(3)	275,000.				SEE PART IV
(2) CALIFORNIA COALITION FOR RURAL HOUSING PROJ 717 K ST., SACRAMENTO, CA 95814	94-2832634	501(C)(3)	25,000.				SEE PART IV
(3) CALLE LIMPIA FOUNDATION INC. 1070 BROAD STREET PROVIDENCE RI 02905	46-5622712	501(C)(3)	6,500.				SEE PART IV
(4) CALVARY WOMEN'S SERVICES 1217 GOOD HOPE ROAD SE WASHINGTON DC 20020	52-1307706	501(C)(3)	25,000.				SEE PART IV
(5) CAP SERVICES INC. 2900 HOOVER ROAD STEVENS POINT WI 54481	39-1080897	501(C)(3)	37,000.				SEE PART IV
(6) CAPITOL HILL HOUSING IMPROVEMENT PROGRAM 1620 12TH AVE., SEATTLE, WA 98122	91-0979968	GOVERNMENT	52,000.				SEE PART IV
(7) CARLOS MASSEY 5265 3RD STREET SAN FRANCISCO CA 94121		INDIVIDUAL/SOLE	29,915.				SEE PART IV
(8) CATALYST IV CHANGE 43 BANCROFT ROAD STOUGHTON MA 02072	11-3693712	501(C)(3)	10,000.				SEE PART IV
(9) CATHOLIC BISHOP OF CHICAGO - ST. SABINA CHU 1210 W. 78TH PLACE, CHICAGO, IL 60620	36-2171123	501(C)(3)	7,000.				SEE PART IV
(10) CATHOLIC CHARITIES HOUSING SRVCS/DIOCESE OF 5301 TIETON DR., YAKIMA, WA 98908	91-1955616	501(C)(3)	40,750.				SEE PART IV
(11) CEIBA 147 W SUSQUEHANNA, PHILADELPHIA PA 19122	23-2732783	501(C)(3)	10,000.				SEE PART IV
(12) CENTER FOR CHANGING LIVES 1955 N. ST. LOUIS AVE., CHICAGO, IL 60647	36-3731388	501(C)(3)	324,269.				SEE PART IV

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

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Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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(1) CENTER FOR GREAT NEIGHBORHOODS OF COVINGTON 321 W. MLK BLVD, COVINGTON, KY 41011	61-0733046	501(C)(3)	255,687.				SEE PART IV
(2) CENTERSTONE OF SEATTLE 722 18TH AVE., SEATTLE, WA 98122	91-0786727	501(C)(3)	52,000.				SEE PART IV
(3) CENTRAL CITY NEIGHBORHOOD PARTNERS 501 S. BIXEL STREET LOS ANGELES CA 90017	95-4837709	501(C)(3)	75,000.				SEE PART IV
(4) CENTRAL DETROIT CHRISTIAN CDC 8840 SECOND AVE., DETROIT, MI 48202	38-3128822	501(C)(3)	58,260.				SEE PART IV
(5) CENTRAL MISSOURI COMMUNITY ACTION 807-B NO. PROVIDENCE RD, COLUMBIA, MO 65203	43-0835026	501(C)(3)	51,750.				SEE PART IV
(6) CENTRAL STATES SER-JOBS FOR PROGRESS 3948 WEST 26TH ST., CHICAGO, IL 60623	36-1211270	501(C)(3)	343,020.				SEE PART IV
(7) CHICAGO COMMONS ASSOC 515 EAST 50TH ST., CHICAGO, IL 60615	36-2169136	501(C)(3)	93,300.				SEE PART IV
(8) CHICAGO MEN IN ACTION P.O. BOX 101230, CHICAGO, IL 60610	27-1060296	501(C)(3)	7,000.				SEE PART IV
(9) CHICAGO METROPOLITAN HOUSING DEVELOPMENT CO 225 W. WACKER DR. STE 1550 CHICAGO IL 60606	36-3833156	501(C)(3)	15,000.				SEE PART IV
(10) CHICANOS POR LA CAUSA INC. 1112 EAST BUCKEYE PHOENIX AZ 85034	86-0227210	501(C)(3)	37,000.				SEE PART IV
(11) CHILDSAVERS - MEMORIAL CHILD GUIDANCE CLINI 200 NORTH 22ND STREET RICHMOND VA 23223	54-0505927	501(C)(3)	80,000.				SEE PART IV
(12) CHINATOWN COMMUNITY DVLPMNT CENTER 1525 GRANT AVE, SAN FRANCISCO, CA 94133	94-2514053	501(C)(3)	58,315.				SEE PART IV

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(1) CHINESE COMMUNITY CENTER, INC. 9800 TOWN PARK DR., HOUSTON, TX 77036	76-0067885	501(C)(3)	363,443.				SEE PART IV
(2) CHURCH COMMUNITY HOUSING CORP 50 WASHINGTON SQ., NEWPORT, RI 02840	05-0343709	501(C)(3)	75,000.				SEE PART IV
(3) CHWC INC. 2 SOUTH 14TH ST. KANSAS CITY KS 66102	48-0934993	501(C)(3)	15,200.				SEE PART IV
(4) CINCINNATI INSTITUTE OF FINE ARTS 20 EAST CENTRAL PKWY., CINCINNATI, OH 45202	31-0537138	C CORP	6,000.				SEE PART IV
(5) CINCINNATI WORKS INC. 708 WALNUT ST., CINCINNATI, OH 45202	31-1656186	501(C)(3)	65,934.				SEE PART IV
(6) CINCY STORIES 1310 SYCAMORE ST. #201 CINCINNATI OH 45202	81-1347493	501(C)(3)	5,500.				SEE PART IV
(7) CINDY WU 950 HARRISON ST #121 SAN FRANCISCO CA 94107		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(8) CITIZENS HOUSING & PLANNING COUNCIL 42 BRD.WAY, NEW YORK, NY 10004	13-1782468	501(C)(3)	26,775.				SEE PART IV
(9) CITY HEIGHTS COMMUNITY DVLPMNT CORP 4001 EL CAJON BLVD, SAN DIEGO, CA 92105	95-3661177	501(C)(3)	18,500.				SEE PART IV
(10) CITY OF LAKES COMMUNITY LAND TRUST 2017 EAST 38TH ST., MINNEAPOLIS, MN 55407	06-1665031	501(C)(3)	60,000.				SEE PART IV
(11) CITY OF PEORIA 419 FULTON ST. STE 300 PEORIA IL 61602	37-6001761	GOVERNMENT	100,000.				SEE PART IV
(12) CITY OF PHILADELPHIA 1515 ARCH ST., PHILADELPHIA, PA 19102	23-6003047	GOVERNMENT	15,000.				SEE PART IV

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(1) CITY OF PROVIDENCE 25 DORRANCE STREET PROVIDENCE RI 02903	05-6000329	GOVERNMENT	14,991.				SEE PART IV
(2) CITY OF RICHMOND, VA 900 EAST BROAD STREET RICHMOND VA 23219	54-6001556	GOVERNMENT	13,327.				SEE PART IV
(3) CITY OF SARATOGA SPRINGS 474 BRD.WAY, SARATOGA SPRINGS, NY 12866	14-6002423	GOVERNMENT	78,500.				SEE PART IV
(4) CLARETIAN ASSOCIATES 9108 S. BRANDON AVE., CHICAGO, IL 60617	36-4087259	501(C)(3)	12,000.				SEE PART IV
(5) CLARKE SQUARE NEIGHBORHOOD INITIATIVE INC. 2110 WEST SCOTT STREET MILWAUKEE WI 53204	46-4325662	501(C)(3)	23,250.				SEE PART IV
(6) COACHELLA VALLEY HOUSING COALITION 45-701 MONROE ST., INDIO, CA 92201	95-3814898	501(C)(3)	63,975.				SEE PART IV
(7) COALITION FOR NONPROFIT HOUSING & ECONOMIC 727 15TH ST. NW, WASHINGTON, DC 20005	52-1750323	501(C)(3)	26,500.				SEE PART IV
(8) COALITION FOR RESPONSIBLE COMMUNITY DEVELOP 3101 SOUTH GRAND AVE. LOS ANGELES CA 90007	20-2445113	501(C)(3)	163,270.				SEE PART IV
(9) COASTAL ENTERPRISES, INC. 36 WATER ST., WISCASSET, ME 04578	01-0347504	501(C)(3)	37,000.				SEE PART IV
(10) CODMAN SQUARE NEIGHBORHOOD DVLPMNT CORP 587 WASHINGTON ST., DORCHESTER, MA 02124	04-2752507	501(C)(3)	95,000.				SEE PART IV
(11) CODY ROUGE COMMUNITY ACTION ALLIANCE 19321 W. CHICAGO , DETROIT, MI 48228	27-1841875	501(C)(3)	14,000.				SEE PART IV
(12) COMITE DE BIEN ESTAR INC. 963 EAST B STREET SAN LUIS AZ 85349	86-0427342	501(C)(3)	37,000.				SEE PART IV

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<b>(1)</b> COMMONBOND COMMUNITIES 1080 MONTREAL AVE., ST. PAUL, MN 55116	41-1260469	501(C)(3)	42,500.				SEE PART IV
<b>(2)</b> COMUNIDADES LATINAS UNIDAS EN SERVICIO INC 797 EAST 7TH ST., ST PAUL, MN 55106	41-1386986	501(C)(3)	276,645.				SEE PART IV
<b>(3)</b> COMMUNITIES FIRST, INC. 310 E. THIRD ST., FLINT, MI 48502	27-3600343	501(C)(3)	40,000.				SEE PART IV
<b>(4)</b> COMMUNITIES UNLIMITED INC. 3 EAST COLT SQ. DR., FAYETTEVILLE, AR 72703	71-0464321	501(C)(3)	13,950.				SEE PART IV
<b>(5)</b> COMMUNITY ACTION DULUTH, INC. 2424 W. 5TH ST., DULUTH, MN 55806	41-1410670	501(C)(3)	444,602.				SEE PART IV
<b>(6)</b> COMMUNITY ASSET AND RESOURCE ENTERPRISE PAR 460 SOUTH BELLVIEW STREET MESA AZ 85204	86-0844208	501(C)(3)	11,001.				SEE PART IV
<b>(7)</b> COMMUNITY CAPITAL FUND 3200 WAYNE AVENUE KANSAS CITY MO 64109	45-4561134	501(C)(3)	7,500.				SEE PART IV
<b>(8)</b> COMMUNITY DVLPMT OF SOUTH BERKSHIRE 17 BRIDGE ST. , GREAT BARRINGTON, MA 01230	04-3010725	501(C)(3)	7,000.				SEE PART IV
<b>(9)</b> COMMUNITY HOUSING DEVELOPMENT CORPORATION O 1535-A FRED JACKSON WAY RICHMOND CA 94801	68-0235719	501(C)(3)	25,000.				SEE PART IV
<b>(10)</b> COMMUNITY HOUSING IMPROVEMENT PROGRAM INC. 1001 WILLOW ST. , CHICO, CA 95928	94-2223398	501(C)(3)	53,275.				SEE PART IV
<b>(11)</b> COMMUNITY HOUSING IMPRVMT SYSTEMS & PLANNIN 295 MAIN ST., SALINAS, CA 93901	94-2631608	501(C)(3)	25,000.				SEE PART IV
<b>(12)</b> COMMUNITY INITIATIVES INC. 222 S. RIVERSIDE PLAZA CHICAGO IL 60606	30-0103115	501(C)(3)	250,000.				SEE PART IV

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(1) COMMUNITY SERVICES LEAGUE 404 N. NOLAND RD, INDEPENDENCE, MO 64050	43-0976396	501(C)(3)	80,000.				SEE PART IV
(2) COMMUNITY STABILIZATION PROJECT 501 N DALE ST., ST. PAUL, MN 55104	41-1729493	501(C)(3)	10,000.				SEE PART IV
(3) COMPASS HOUSING ALLIANCE 77 SOUTH WASHINGTON ST. SEATTLE WA 98104	91-0578229	501(C)(3)	25,000.				SEE PART IV
(4) CONNECTING FOR CHILDREN AND FAMILIES 46 HOPE ST., WOONSOCKET, RI 02895	05-0475365	501(C)(3)	7,258.				SEE PART IV
(5) CONNECTING FOR GOOD INC. 3210 MICHIGAN AVENUE KANSAS CITY MO 64109	45-3684984	501(C)(3)	24,981.				SEE PART IV
(6) COVENANT HOUSING CORPORATION OF CENTRAL NEW 1228 TEALL AVENUE SUITE 2 SYRACUSE NY 13206	16-1429861	501(C)(3)	27,000.				SEE PART IV
(7) CROSSROADS RHODE ISLAND 160 BRD. ST., PROVIDENCE, RI 02903	05-0259094	501(C)(3)	139,629.				SEE PART IV
(8) CYPRESS HILLS LOCAL DVLPMNT CORP 625 JAMAICA AVE., BROOKLYN, NY 11208	11-2683663	501(C)(3)	88,960.				SEE PART IV
(9) DARLENE BIRCHETT 901 NORTH 31ST STREET RICHMOND VA 23223	90-0772401	INDIVIDUAL/SOLE	25,000.				SEE PART IV
(10) DAYTON'S BLUFF DISTRICT 4 COMMUNITY COUNCIL 804 MARGARET ST., ST. PAUL, MN 55106	41-1434818	501(C)(3)	32,500.				SEE PART IV
(11) DAYTON'S BLUFF NEIGHBORHOOD HOUSING SERVICE 823 E. 7TH ST, ST. PAUL, MN 55106	41-1386097	501(C)(3)	50,000.				SEE PART IV
(12) DEANNA CUMMINGS 912 LINWOOD AVENUE SAINT PAUL MN 55105		INDIVIDUAL/SOLE	20,000.				SEE PART IV

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(1) DELTA COMMUNITY DVLPMNT AND LAW CENTER INC. 10515 WEST MARKHAM, LITTLE ROCK, AR 72205	27-0598497	501(C)(3)	44,000.				SEE PART IV
(2) DELTA HOUSING DEVELOPMENT CORP. 325 HIGHWAY 82 E, INDIANOLA, MS 38751	64-0508153	501(C)(3)	15,775.				SEE PART IV
(3) DEMOCRACY PREP HARLEM CHARTER SCHOOL 207 W 133RD STREET NEW YORK NY 10030	30-0624890	501(C)(3)	15,500.				SEE PART IV
(4) DENTAL CENTER OF NORTHWEST OHIO 2138 MADISON AVENUE TOLEDO OH 43604	34-4441883	501(C)(3)	11,000.				SEE PART IV
(5) DETROIT POLICE ATHLETIC LEAGUE INC 111 W. WILLIS DETROIT MI 48201	38-3314318	501(C)(3)	250,150.				SEE PART IV
(6) DETROIT STRATEGIC FRAMEWORK INC. 2990 W. GRAND BLVD. STE 2 DETROIT MI 48202	47-5050055	501(C)(3)	7,000.				SEE PART IV
(7) DOMINICAN CENTER FOR WOMEN INC. 2470 W. LOCUST ST., MILWAUKEE, WI 53206	41-1685734	501(C)(3)	50,500.				SEE PART IV
(8) DORCAS INTERNATIONAL INSTITUTE OF RI 645 ELMWOOD AVE., PROVIDENCE, RI 02907	05-0258886	501(C)(3)	146,151.				SEE PART IV
(9) DOWNTOWN KALAMAZOO INC. 141 E. MICHIGAN AVE KALAMAZOO MI 49007	38-2845664	501(C)(6)	10,000.				SEE PART IV
(10) DOWNTOWN PHOENIX COMMUNITY DVLPMNT CORP 1 EAST WASHINGTON ST., PHOENIX, AZ 85004	86-1027337	501(C)(4)	15,000.				SEE PART IV
(11) EAST BAY ASIAN LOCAL DVLPMNT CORP 1825 SAN PABLO AVE, OAKLAND, CA 94612	51-0171851	501(C)(3)	7,236.				SEE PART IV
(12) EAST BAY COMMUNITY ACTION PROGRAM 19 BRD.WAY, NEWPORT, RI 02840	05-0310024	501(C)(3)	38,871.				SEE PART IV

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1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) EAST BLUFF NEIGHBORHOOD HOUSING SERVICES IN 1839 N. WISCONSIN AVE., PEORIA, IL 61603	37-1192779	501(C)(3)	64,632.				SEE PART IV
(2) EAST LA COMMUNITY CORPORATION 2917 E 1ST ST. STE 101 LOS ANGELES CA 90033	95-4531076	501(C)(3)	110,750.				SEE PART IV
(3) ECOLIBRIUM3 2304 W. SUPERIOR ST., DULUTH, MN 55806	45-2746481	501(C)(3)	62,750.				SEE PART IV
(4) ECONOMIC AND COMMUNITY DVLPMNT INSTITUTE 1655 OLD LEOPARD AVE, COLUMBUS, OH 43219	31-1145544	501(C)(3)	10,000.				SEE PART IV
(5) ECONOMIC DEVELOPMENT CENTER OF WASHINGTON C P.O. BOX 933 GREENVILLE MS 38702	20-8973389	501(C)(6)	7,000.				SEE PART IV
(6) ECONOMIC DEVELOPMENT ON THIRD 4800 3RD ST UNIT 404 SAN FRANCISCO CA 94124	81-3198441	501(C)(3)	70,000.				SEE PART IV
(7) ECOWORKS 4835 MICHIGAN AVENUE DETROIT MI 48210	38-2412482	501(C)(3)	7,000.				SEE PART IV
(8) EDISON NEIGHBORHOOD ASSOCIATION INC. 816 WASHINGTON AVE. KALAMAZOO MI 49001	38-2108671	501(C)(3)	50,000.				SEE PART IV
(9) EDNA MARTIN CHRISTIAN CENTER 2605 E. 25TH ST, INDIANAPOLIS, IN 46218	35-1072577	501(C)(3)	323,490.				SEE PART IV
(10) EDWARD WATERS COLLEGE 1658 KINGS ROAD JACKSONVILLE FL 32209	59-1146751	501(C)(3)	73,000.				SEE PART IV
(11) ELDERHOMES CORPORATION 88 CARNATION ST., RICHMOND, VA 23225	54-1595851	501(C)(3)	57,500.				SEE PART IV
(12) EMERGE CDC 1101 W BDWAY AVE. N., MINNEAPOLIS, MN 55411	41-1277423	501(C)(3)	342,221.				SEE PART IV

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

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Schedule I (Form 990) (2017)



**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
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(1) ENGLEWOOD COMMUNITY DVLPMT CORP 57 N. RURAL ST., INDIANAPOLIS, IN 46201	35-2003744	501(C)(3)	159,226.				SEE PART IV
(2) ESPERANZA COMMUNITY HOUSING CORPORATION 3655 S. GRAND AVE #280 LOS ANGELES CA 90007	95-4230345	501(C)(3)	10,000.				SEE PART IV
(3) FALLS VILLAGE HOUSING TRUST INC. 309 ROUTE 7 NORTH FALLS VILLAGE CT 06031	82-1134822	501(C)(3)	6,000.				SEE PART IV
(4) FAMILY FOUNDATIONS OF NORTHEAST FLORIDA INC 40 E. ADAMS STREET JACKSONVILLE FL 32202	59-0768265	501(C)(3)	92,680.				SEE PART IV
(5) FAMILY HEALTH CENTER INC. 117 W. PATTERSON STREET KALAMAZOO MI 49007	23-7107569	501(C)(3)	50,000.				SEE PART IV
(6) FARM FRESH RHODE ISLAND 1005 MAIN ST. , PAWTUCKET, RI 02860	20-4625643	501(C)(3)	7,500.				SEE PART IV
(7) FATHERS' UPLIFT INCORPORATED 12 SOUTHERN AVENUE DORCESTER MA 02124	46-1407932	501(C)(3)	10,150.				SEE PART IV
(8) FAYETTE COUNTY COMMUNITY ACTION AGENCY INC. 108 NORTH BEESON AVE. UNIONTOWN PA 15401	25-1180898	501(C)(3)	77,400.				SEE PART IV
(9) FEDERATION OF APPALACHIAN HOUSING ENTERPRIS 319 OAK ST., BEREA, KY 40403	31-0986871	501(C)(3)	73,000.				SEE PART IV
(10) FELECIA MANN 712 N. 32ND STREET RICHMOND VA 23223	47-2921863	INDIVIDUAL/SOLE	12,000.				SEE PART IV
(11) FIFTH AVENUE COMMITTEE 621 DEGRAW ST., BROOKLYN, NY 11217	11-2475743	501(C)(3)	156,633.				SEE PART IV
(12) FIRST TENNESSEE HUMAN RESOURCE AGENCY 704 ROLLING HILLS DR. JOHNSON CITY TN 37604	62-0928394	501(C)(3)	15,000.				SEE PART IV

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(1) FLANNER HOUSE OF INDIANAPOLIS 2424 MLK JR. ST, INDIANAPOLIS, IN 46208	35-0942628	501(C)(3)	126,863.				SEE PART IV
(2) FOCUS: HOPE 1400 OAKMAN BLVD, DETROIT, MI 48238	38-1948285	501(C)(3)	219,973.				SEE PART IV
(3) FORDHAM-BEDFORD HOUSING CORPORATION 2751 GRAND CONCOURSE BRONX NY 10468	13-3010578	501(C)(3)	1,900,000.				SEE PART IV
(4) FOUR DIRECTIONS DEVELOPMENT CORPORATION 20 GODFREY DR., ORONO, ME 04473	01-0544468	501(C)(3)	20,250.				SEE PART IV
(5) FRANKLIN COUNTY COMMUNITY DEVELOPMENT CORPO 324 WELLS STREET GREENFIELD MA 01301	04-2678309	501(C)(3)	36,000.				SEE PART IV
(6) FRIENDS OF SCLARC INC. 2500 S. WESTERN AVE. LOS ANGELES CA 90018	20-5974027	501(C)(3)	130,000.				SEE PART IV
(7) FULL CIRCLE COMMUNITIES INC. 310 S. PEORIA ST STE 500 CHICAGO IL 60607	36-4382850	501(C)(3)	20,000.				SEE PART IV
(8) GARRETT COUNTY COMMUNITY ACTION COMMITTEE I 104 EAST CENTER STREET OAKLAND MD 21550	52-0820662	501(C)(3)	36,000.				SEE PART IV
(9) GENESEE COUNTY HABITAT FOR HUMANITY 101 BURTON ST., FLINT, MI 48503	38-2899387	501(C)(3)	25,000.				SEE PART IV
(10) GOLDEN STATE WARRIORS COMMUNITY FOUNDATION 1011 BROADWAY OAKLAND CA 94607	45-4001645	501(C)(3)	25,000.				SEE PART IV
(11) GOODWILL INDUSTRIES OF GREATER DETROIT 3111 GRAND RIVER AVE. DETROIT MI 48208	38-1362823	501(C)(3)	310,174.				SEE PART IV
(12) GOODWILL OF SOUTHWESTERN PA 118 52ND STREET PITTSBURGH PA 15201	25-1098928	501(C)(3)	45,000.				SEE PART IV

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(1) GOODWILL OF THE OLYMPICS AND RANIER REGION 714 SOUTH 27TH ST., TACOMA, WA 98409	91-0573106	501(C)(3)	38,750.				SEE PART IV
(2) GREATER SYRACUSE PROPERTY DVLPMT CORP 431 E. FAYETTE ST., SYRACUSE, NY 13202	46-2382007	501(C)(3)	14,497.				SEE PART IV
(3) GROUNDWORK MILWAUKEE 1845 N. FARWELL AVE MILWAUKEE WI 53202	32-0182692	501(C)(3)	20,000.				SEE PART IV
(4) GROW SOUTH DAKOTA 104 ASH STREET E SISSETON SD 57262	56-2667948	501(C)(3)	40,000.				SEE PART IV
(5) GUADALUPE CENTERS INC. 1015 AVE C E. CHAVEZ, KANSAS CITY, MO 64108	44-0610781	501(C)(3)	94,040.				SEE PART IV
(6) HABITAT FOR HUMANITY BUFFALO INC. 1675 SOUTH PARK AVENUE BUFFALO NY 14220	22-2746890	501(C)(3)	80,000.				SEE PART IV
(7) HABITAT FOR HUMANITY OF SAN ANTONIO 311 PROBANDT SAN ANTONIO TX 78204	74-1897502	501(C)(3)	40,000.				SEE PART IV
(8) HABITAT FOR HUMANITY PHILADELPHIA INC. 1829 N 19TH ST., PHILADELPHIA, PA 19121	42-1580163	501(C)(3)	25,400.				SEE PART IV
(9) HARRISON CENTER FOR THE ARTS INC. 1505 N. DELAWARE ST INDIANAPOLIS, IN 46202	01-0798626	501(C)(3)	40,500.				SEE PART IV
(10) HAWAIIAN COMMUNITY ASSETS, INC. 200 N. VINEYARD BLVD , HONOLULU, HI 96817	99-0348767	501(C)(3)	43,121.				SEE PART IV
(11) HAWTHORNE SOCIAL SERVICE ASSOCIATION INC 2440 WEST OHIO ST. INDIANAPOLIS IN 46222	35-0874274	501(C)(3)	20,813.				SEE PART IV
(12) HEART OF THE CITY NEIGHBORHOODS INC 191 NORTH ST., BUFFALO, NY 14201	16-1544656	501(C)(3)	10,000.				SEE PART IV

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<b>(1)</b> HELPING OVERCOME POVERTY'S EXISTENCE INC. P.O. BOX 743 680 W MAIN STREET VA 24382	54-1630342	501(C)(3)	16,500.				SEE PART IV
<b>(2)</b> HIGHLAND COMMUNITY BUILDERS INC. 1404 N. RANDOLPH AVENUE ELKINS WV 26241	20-3583045	501(C)(3)	52,625.				SEE PART IV
<b>(3)</b> HILLTOWN COMMUNITY DVLPMNT CORP 387 MAIN RD. , CHESTERFIELD, MA 01012	04-2741009	501(C)(3)	28,238.				SEE PART IV
<b>(4)</b> HISPANIC ASSOCIATION OF CONTRACTORS & ENTER 167 W ALLEGHENY AVE PHILADELPHIA PA 19140	23-2142317	501(C)(3)	25,000.				SEE PART IV
<b>(5)</b> HISTORIC LANDMARKS FOUNDATION OF INDIANA IN 1201 CENTRAL AVENUE INDIANAPOLIS IN 46202	35-1162873	501(C)(3)	10,000.				SEE PART IV
<b>(6)</b> HMONG AMERICAN PARTNERSHIP 1075 ARCADE STREET ST. PAUL MN 55106	41-1667580	501(C)(3)	50,000.				SEE PART IV
<b>(7)</b> HOMESTEAD AFFORDABLE HOUSING INC. 115 WEST 4TH ST., HOLTON, KS 66436	48-1206434	501(C)(3)	19,025.				SEE PART IV
<b>(8)</b> HOPE COMMUNITY INC. (MN) 611 E. FRANKLIN AVE. MINNEAPOLIS MN 55404	41-1292817	501(C)(3)	20,000.				SEE PART IV
<b>(9)</b> HOUSE OF HOPE CDC 3188 POST RD., WARWICK, RI 02886	05-0448151	501(C)(3)	30,000.				SEE PART IV
<b>(10)</b> HOUSEABOUTIT, INC. P.O. BOX 4342, LITTLE ROCK, AR 72214	56-2514622	501(C)(3)	14,750.				SEE PART IV
<b>(11)</b> HOUSING AUTHORITY OF THE CITY OF MILWAUKEE 809 NORTH BROADWAY MILWAUKEE WI 53202	39-1159751	501(C)(3)	70,000.				SEE PART IV
<b>(12)</b> HOUSING COUNSELING SERVICES INC. 2410 17TH ST NW STE 100 WASHINGTON DC 20009	52-0958568	501(C)(3)	50,000.				SEE PART IV

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(1) HOUSING TRUST SILICON VALLEY 95 S. MARKET ST. STE 610 SAN JOSE CA 95113	77-0545135	501(C)(3)	500,000.				SEE PART IV
(2) HOUSING VISIONS CONSULTANTS INC 1201 EAST FAYETTE STREET SYRACUSE NY 13210	16-1598458	501(C)(3)	1,294,025.				SEE PART IV
(3) HUAN QIANG LIN 2611 OCEAN AVENUE BROOKLYN NY 11229-4552		INDIVIDUAL/SOLE	7,900.				SEE PART IV
(4) HUMAN RESOURCE DVLPMNT COUNCIL OF DISTRICT 32 S. TRACY AVE., BOZEMAN, MT 59715	81-0350886	501(C)(3)	62,000.				SEE PART IV
(5) IMPACT SERVICES CORPORATION 1952 E ALLEGHENY AVE PHILADELPHIA PA 19134	23-2087348	501(C)(3)	45,946.				SEE PART IV
(6) INC. VILLAGE OF MASTIC BEACH 369 NEIGHBORHOOD RD MASTIC BEACH NY 11951	27-3727233	GOVERNMENT	149,628.				SEE PART IV
(7) INDEPENDENT SCHOOL DISTRICT NO. 625 360 COLBORNE STREET SAINT PAUL MN 55102	41-0901311	GOVERNMENT	250,000.				SEE PART IV
(8) INDIANA ASSOCIATION FOR COMMUNITY ECONOMIC 202 EAST MARKET ST. INDIANAPOLIS IN 46204	35-1695379	501(C)(3)	30,100.				SEE PART IV
(9) INDIANA UNIVERSITY 777 INDIANA AVE., INDIANAPOLIS, IN 46202	35-6001673	501(C)(3)	127,000.				SEE PART IV
(10) INDIANAPOLIS MUSEUM OF CONTEMPORARY ART INC 1043 VIRGINIA AVE INDIANAPOLIS IN 46203	35-2155600	501(C)(3)	40,000.				SEE PART IV
(11) INSTITUTE ON THE STUDY AND PRACTICE OF NONV 265 OXFORD ST., PROVIDENCE, RI 02905	05-0517863	501(C)(3)	29,406.				SEE PART IV
(12) INSTITUTO DEL PROGRESO LATINO 2520 S. WESTERN AVE., CHICAGO, IL 60608	36-2937375	501(C)(3)	341,684.				SEE PART IV

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(1) INTERNATIONAL INSTITUTE OF MINNESOTA 1694 COMO AVE., ST. PAUL, MN 55108	41-0693912	501(C)(3)	297,876.				SEE PART IV
(2) INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND ST., NEW YORK, NY 10168	13-5660870	501(C)(3)	424,683.				SEE PART IV
(3) IRVINGTON DEVELOPMENT ORGANIZATION 5855 E WASHINGTON ST INDIANAPOLIS IN 46219	76-0716202	501(C)(3)	17,500.				SEE PART IV
(4) ISLAMIC CULTURAL PRESERVATION & INFORMAT CO 4243 LANCASTER AVE., PHILADELPHIA, PA 19104	23-2710697	501(C)(3)	15,000.				SEE PART IV
(5) IVANHOE NEIGHBORHOOD COUNCIL 3700 WOODLAND , KANSAS CITY, MO 64109	43-1843831	501(C)(3)	169,000.				SEE PART IV
(6) JAIDA CURETON 3304 EAST MARSHALL ST., RICHMOND, VA 23223	30-0809627	S CORP	25,000.				SEE PART IV
(7) JANE ADDAMS RESOURCE CORPORATION 4432 N. RAVENSWOOD AVE., CHICAGO, IL 60640	36-3682559	501(C)(3)	336,697.				SEE PART IV
(8) JEFFERSON EAST, INC. 14628 E. JEFFERSON AVE., DETROIT, MI 48215	38-3231066	501(C)(3)	6,000.				SEE PART IV
(9) JENIFER WAGLEY 2302 HARRIER COURT KATY TX 77494		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(10) JEWISH VOCATIONAL SERVICE, INC. 29 WINTER ST., BOSTON, MA 02108	04-2104357	501(C)(3)	340,906.				SEE PART IV
(11) JOHN H. BONER COMMUNITY CENTER 2236 EAST TENTH ST., INDIANAPOLIS, IN 46201	23-7204495	501(C)(3)	529,825.				SEE PART IV
(12) JOURNEY HOUSE, INC. 2110 W. SCOTT ST., MILWAUKEE, WI 53204	39-1203539	501(C)(3)	71,386.				SEE PART IV

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1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) JUXTAPOSITION INC. 2007 EMERSON AVENUE N MINNEAPOLIS MN 55411	41-1851915	501(C)(3)	47,500.				SEE PART IV
(2) KABOOM! INC. 4301 CONNECTICUT AVE NW WASHINGTON DC 20008	52-1970904	501(C)(3)	8,500.				SEE PART IV
(3) KALAMAZOO COUNTY LAND BANK AUTHORITY 1523 RIVERVIEW DRIVE KALAMAZOO MI 49004	27-0721363	GOVERNMENT	27,900.				SEE PART IV
(4) KALAMAZOO COVENANT ACADEMY 400 W. CROSSTOWN PARKWAY KALAMAZOO MI 49001	47-4480487	C CORPORATION	10,000.				SEE PART IV
(5) KALAMAZOO LOAVES & FISHES INC. 901 PORTAGE STREET KALAMAZOO MI 49001	38-2420575	501(C)(3)	15,000.				SEE PART IV
(6) KANSAS CITY MUSEUM FOUNDATION INC. 4600 EAST 63RD STREET KANSAS CITY MO 64130	46-1878591	501(C)(3)	60,000.				SEE PART IV
(7) KEEP INDIANAPOLIS BEAUTIFUL INC. 1029 E FLETCHER AVE, INDIANAPOLIS, IN 46203	31-1005792	501(C)(3)	25,000.				SEE PART IV
(8) KENSINGTON SOUTH NEIGHBORHOOD ADVISORY COUN 1301 N. 2ND ST., PHILADELPHIA, PA 19122	22-2446719	501(C)(3)	20,000.				SEE PART IV
(9) KENTUCKY HIGHLANDS COMMUNITY DVLPMNT CORP 362 OLD WHITLEY RD., LONDON, KY 40744	61-1253192	501(C)(3)	69,075.				SEE PART IV
(10) KERRY MCLEAN 756 BRADY AVENUE APT. #508 BRONX NY 10462		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(11) KRISTIN HOUK 1408 HUDSON AVE., SAN FRANCISCO, CA 94124	45-4466217	INDIVIDUAL/SOLE	349,305.				SEE PART IV
(12) LA CASA DE DON PEDRO 75 PARK AVE., NEWARK, NJ 07104	23-7249368	501(C)(3)	71,000.				SEE PART IV

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Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
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1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) LA FAMILY HOUSING CORPORATION 7843 LANKERSHIM BLVD N. HOLLYWOOD CA 91605	95-3920560	501(C)(3)	65,000.				SEE PART IV
(2) LACONIA AREA COMMUNITY LAND TRUST INC. 658 UNION AVE., LACONIA, NH 03246	02-0426348	501(C)(3)	63,275.				SEE PART IV
(3) LAFAYETTE SQUARE AREA COALITION INC. 3610 GUION RD., INDIANAPOLIS, IN 46222	20-4008623	501(C)(3)	195,725.				SEE PART IV
(4) LAKE STREET COUNCIL 919 E. LAKE ST., MINNEAPOLIS, MN 55407	41-0975738	501(C)(3)	19,850.				SEE PART IV
(5) LA-MAS INC. 3051 N. COOLIDGE AVE. LOS ANGELES CA 90039	38-3886677	501(C)(3)	46,000.				SEE PART IV
(6) LAND REUTILIZATION CORPORATION OF CAP. REGI 433 STATE ST., SCHENECTADY, NY 12305	46-0775590	501(C)(3)	30,000.				SEE PART IV
(7) LASALLE STREET CHURCH 1111 N. WELLS ST STE 500 CHICAGO IL 60610	36-2601051	C CORPORATION	34,150.				SEE PART IV
(8) LATINO ECONOMIC DVLPMNT CENTER 1501 E. LAKE ST., MINNEAPOLIS, MN 55407	51-0467167	501(C)(3)	12,500.				SEE PART IV
(9) LAUNCH NEW YORK INC. 77 GOODELL ST. STE 201 BUFFALO NY 14203	45-3980649	501(C)(3)	80,000.				SEE PART IV
(10) LAWANDA DICKERSON 856 RUTLAND STREET SAN FRANCISCO CA 94134		INDIVIDUAL/SOLE	75,000.				SEE PART IV
(11) LEADERSHIP FOR URBAN RENEWAL NETWORK INC. ( 553 S. CLARENCE ST. LOS ANGELES CA 90033	27-0584116	501(C)(3)	20,000.				SEE PART IV
(12) LINK HOUSTON 2950 N. LOOP W. STE 5000 HOUSTON TX 77092	82-2124290	S CORPORATION	896,699.				SEE PART IV

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(1) LITCHFIELD HOUSING TRUST INC. P.O. BOX 1121 LITCHFIELD CT 06759	06-1258114	501(C)(3)	25,000.				SEE PART IV
(2) LOCAL FIRST ARIZONA FOUNDATION 12 W. CAMELBACK, PHOENIX, AZ 85013	26-1657951	501(C)(3)	81,000.				SEE PART IV
(3) LOGAN SQUARE NEIGHBORHOOD ASSOC 2840 N. MILWAUKEE AVE., CHICAGO, IL 60618	36-2638491	501(C)(3)	62,973.				SEE PART IV
(4) LSG ENTERPRISES LLC 3004 1ST AVENUE RICHMOND VA 23222	25-1905685	LLC - PARTNERSH	9,620.				SEE PART IV
(5) LUTHERAN SOCIAL SERVICE OF MINNESOTA 2485 COMO AVE., ST. PAUL, MN 55108	41-0872993	501(C)(3)	230,000.				SEE PART IV
(6) LUTHERAN SOCIAL SERVICES HOUSING 3911 20TH AVE. S, FARGO, ND 58103	26-2358686	501(C)(3)	22,850.				SEE PART IV
(7) LUTHERAN SOCIAL SERVICES OF NORTHEAST FLORI 4615 PHILIPS HIGHWAY JACKSONVILLE FL 32207	59-1965600	501(C)(3)	78,800.				SEE PART IV
(8) LUTHERAN SOCIAL SERVICES OF NORTHWESTERN OH 2149 COLLINGWOOD BLVD., TOLEDO, OH 43620	34-4428225	501(C)(3)	295,463.				SEE PART IV
(9) MADISONVILLE COMMUNITY URBAN REDVLPMT CORP 5906 MADISON RD., CINCINNATI, OH 45227	51-0178908	501(C)(3)	205,142.				SEE PART IV
(10) MANNA INC. 828 EVARTS ST., NE, WASHINGTON, DC 20018	52-1260698	501(C)(3)	62,500.				SEE PART IV
(11) MANTUA CIVIC ASSOCIATION P.O. BOX 7701 PHILADELPHIA PA 19104	46-1487152	501(C)(3)	15,000.				SEE PART IV
(12) MAPLE CORPORATION 1617 JOHN F. KENNEDY BLVD PHILA PA 19103	23-6432397	501(C)(3)	10,000.				SEE PART IV

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(1) MAPLETON-FALL CREEK DVLPMT CORP 130 EAST 30TH ST., INDIANAPOLIS, IN 46205	35-1654999	501(C)(3)	25,000.				SEE PART IV
(2) MARICOPA COUNTY 500 W. GUADALUPE ROAD TEMPE AZ 85283	86-6000536	GOVERNMENT	100,000.				SEE PART IV
(3) MARY RIGG NEIGHBORHOOD CENTER 1920 W. MORRIS ST, INDIANAPOLIS, IN 46221	35-0868954	501(C)(3)	304,000.				SEE PART IV
(4) MATRIX HUMAN SERVICES 13560 E. MCNICHOLS DETROIT MI 48205	38-1358015	501(C)(3)	26,000.				SEE PART IV
(5) MATTAPAN FOOD AND FITNESS COALITION 1234 HYDE PARK AVENUE HYDE PARK MA 02136	05-0588064	501(C)(3)	25,000.				SEE PART IV
(6) MATTIE RHODES MEMORIAL SOCIETY 1740 JEFFERSON ST, KANSAS CITY, MO 64108	44-0546343	501(C)(3)	88,783.				SEE PART IV
(7) MERCED HOUSING TEXAS 212 W. LAUREL SAN ANTONIO TX 78212	74-2740889	501(C)(3)	40,000.				SEE PART IV
(8) MERCY HOUSING AND HUMAN DEVELOPMENT INC. 1135 FORD STREET GULFPORT MS 39507	72-1354070	501(C)(3)	64,525.				SEE PART IV
(9) MERCY HOUSING CALIFORNIA 2512 RIVER PLAZA DRIVE SACRAMENTO CA 94833	94-3081666	501(C)(3)	45,000.				SEE PART IV
(10) MERCY STREET INC. 3801 HOLYSTONE STREET DALLAS TX 75212	45-0536344	501(C)(3)	250,000.				SEE PART IV
(11) MEREDITH LEVY 54 FOREST HILLS ST JAMAICA PLAIN MA 02130		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(12) METRO COMMUNITY DVLPMT INC. 503 S. SAGINAW ST., FLINT, MI 48502	38-3072010	501(C)(3)	25,000.				SEE PART IV

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(1) METROPOLITAN AREA ADVISORY COMMITTEE 1355 THIRD AVE, CHULA VISTA, CA 91911	95-2457354	501(C)(3)	189,847.				SEE PART IV
(2) METROPOLITAN FAMILY SERVICES 1 NORTH DEARBORN, CHICAGO, IL 60602	36-2167940	501(C)(3)	364,788.				SEE PART IV
(3) MEXICAN AMERICAN OPPORTUNITY FOUNDATION 401 N. GARFIELD AVENUE MONTEBELLO CA 90640	95-2594166	501(C)(3)	75,000.				SEE PART IV
(4) MI CASA (MY HOUSE), INC. 6230 3RD ST. NW, WASHINGTON, DC 20011	52-1796840	501(C)(3)	11,000.				SEE PART IV
(5) MICHELLE PARRISH 713 CHIMBORAZO BLVD APT.D RICHMOND VA 23223		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(6) MICHIGAN COMMUNITY RESOURCES 615 GRISWOLD ST. , DETROIT, MI 48226	20-5764501	501(C)(3)	59,000.				SEE PART IV
(7) MIDTOWN INDIANAPOLIS INC. 3965 N MERIDIAN ST, INDIANAPOLIS, IN 46208	80-0228952	501(C)(3)	103,440.				SEE PART IV
(8) MIDWEST MINNESOTA CDC 119 GRAYSTONE PLAZA DETROIT LAKES MN 56501	41-0972298	501(C)(3)	36,000.				SEE PART IV
(9) MILDRED HELMS PARK RESURRECTION COMMITTEE C/O JAMES O. CRAWFORD NEWARK NJ 07112	01-0619649	501(C)(3)	39,850.				SEE PART IV
(10) MILL CREEK COMMUNITY PARTNERSHIP P.O. BOX 9382 PHILADELPHIA PA 19139	20-1893842	501(C)(3)	15,000.				SEE PART IV
(11) MILWAUKEE HABITAT FOR HUMANITY INC. 3726 N. BOOTH STREET MILWAUKEE WI 53212	38-1496741	501(C)(3)	20,316.				SEE PART IV
(12) MISSISSIPPI ACTION FOR COMMUNITY EDUCATION 119 S. THEOBALD ST, GREENVILLE, MS 38701	64-0465680	501(C)(3)	29,000.				SEE PART IV

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(1) MISSISSIPPI COUNTY, ARKANSAS ECO OPPORTUN C 1400 N. DIVISION ST., BLYTHEVILLE, AR 72315	71-0386409	501(C)(3)	25,728.				SEE PART IV
(2) MODEL CITIES COMMUNITY DVLPMNT CORP 839 UNIVERSITY AVE. W, ST. PAUL, MN 55104	41-1936584	501(C)(3)	25,000.				SEE PART IV
(3) MON VALLEY INITIATIVE 303-305 E. EIGHTH AVE. HOMESTEAD PA 15120	25-1591350	501(C)(3)	95,000.				SEE PART IV
(4) MOUNT AIRY USA 6703 GERMANTOWN AVE PHILADELPHIA PA 19119	22-2526396	501(C)(3)	25,000.				SEE PART IV
(5) MOUNT VERNON MANOR INC. 3311 WALLACE ST., PHILADELPHIA, PA 19104	23-2037301	501(C)(3)	438,100.				SEE PART IV
(6) MOUNTAIN ASSOC FOR COMMUNITY ECONOMIC DVLPM 433 CHESTNUT ST., BEREA, KY 40403	31-0900246	501(C)(3)	39,000.				SEE PART IV
(7) MULTICULTURAL INSTITUTE 1920 SEVENTH STREET BERKELEY CA 94710	91-1823468	C CORPORATION	25,000.				SEE PART IV
(8) MUTUAL HOUSING ASSOC OF GREATER HARTFORD 95 NILES ST., HARTFORD, CT 06105	22-2925052	501(C)(3)	84,250.				SEE PART IV
(9) MUTUAL HOUSING ASSOC OF SOUTH CENTRAL CT 235 GRAND AVE., NEW HAVEN, CT 06513	22-3237413	501(C)(3)	10,000.				SEE PART IV
(10) MUTUAL HOUSING ASSOC OF SOUTHWESTERN CONNEC 63 STILLWATER AVE., STAMFORD, CT 06902	22-3035152	501(C)(3)	60,000.				SEE PART IV
(11) MUTUAL HOUSING CALIFORNIA 8001 FRUITRIDGE RD., SACRAMENTO, CA 95820	94-3093354	501(C)(3)	38,950.				SEE PART IV
(12) MY CONNECT COMMUNITY 6700 BELLAIRE BLVD HOUSTON TX 77074	81-1424233	501(C)(3)	11,500.				SEE PART IV

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(1) NATIONAL ALLIANCE OF COMMUNITY ECO DVLPMNT 1660 L ST., WASHINGTON, DC 20036	26-0159736	501(C)(3)	25,000.				SEE PART IV
(2) NATIONAL COALITION FOR HOMELESS VETERANS 1730 M ST, NW STE 705 WASHINGTON DC 20003	52-1826860	501(C)(3)	50,000.				SEE PART IV
(3) NATIONAL COMMUNITY RENAISSANCE OF CALIFORNI 9421 HAVEN AVE. RANCHO CUCAMONGA CA 91730	33-0521215	501(C)(3)	25,000.				SEE PART IV
(4) NATIONAL RURAL HOUSING COALITION 1331 G ST. NW, WASHINGTON, DC 20005	52-0952436	501(C)(3)	5,500.				SEE PART IV
(5) NATIVE AMERICAN CONNECTIONS, INC. 4520 N. CENTRAL AVE., PHOENIX, AZ 85012	86-0293585	501(C)(3)	50,000.				SEE PART IV
(6) NE SOUTH DAKOTA COMMUNITY ACTION PROGRAM 104 ASH ST. EAST, SISSETON, SD 57262	46-0282100	501(C)(3)	69,236.				SEE PART IV
(7) NEAR NORTH HEALTH SERVICE CORPORATION 1276 N. CLYBOURN CHICAGO IL 60610	36-3197647	501(C)(3)	15,000.				SEE PART IV
(8) NEAR WEST SIDE COMMUNITY DVLPMNT CORP 216 SOUTH HOYNE AVE., CHICAGO, IL 60612	36-3607203	501(C)(3)	7,000.				SEE PART IV
(9) NEAR WEST SIDE PARTNERS INC. 624 N. 24TH STREET MILWAUKEE WI 53233	47-2708769	501(C)(3)	60,320.				SEE PART IV
(10) NEIGHBORHOOD ECONOMIC DVLPMNT CORP 10 W MAIN ST., MESA, AZ 85201	86-0888028	501(C)(3)	51,464.				SEE PART IV
(11) NEIGHBORHOOD HOUSING SERVICES OF CHICAGO 1279 N. MILWAUKEE AVE, CHICAGO, IL 60622	23-7443009	501(C)(3)	156,000.				SEE PART IV
(12) NEIGHBORHOOD HOUSING SERVICES OF NEW HAVEN 333 SHERMAN AVE., NEW HAVEN, CT 06511	06-1021268	501(C)(3)	40,000.				SEE PART IV

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(1) NEIGHBORHOOD HOUSING SERVICES OF SAN ANTONI 851 STEVES AVENUE SAN ANTONIO TX 78210	74-2379794	501(C)(3)	35,000.				SEE PART IV
(2) NEIGHBORHOOD HOUSING SERVICES OF TOLEDO INC 704 2ND STREET TOLEDO OH 43605	34-1230687	501(C)(3)	470,550.				SEE PART IV
(3) NEIGHBORHOOD HOUSING SERVICES OF WATERBURY 161 NORTH MAIN ST., WATERBURY, CT 06702	06-1022915	501(C)(3)	30,000.				SEE PART IV
(4) NEIGHBORHOOD NONPROFIT HOUSING CORP 195 W. GOLF COURSE RD, LOGAN, UT 84321	87-0559307	501(C)(3)	15,750.				SEE PART IV
(5) NEIGHBORHOOD OF AFFORDABLE HOUSING 143 BORDER STREET EAST BOSTON MA 02128	04-2964630	501(C)(3)	10,000.				SEE PART IV
(6) NEIGHBORHOOD RECOVERY COMMUNITY DVLPMNT COR 5445 ALMEDA RD., HOUSTON, TX 77004	76-0377117	501(C)(3)	135,184.				SEE PART IV
(7) NEW COMMUNITY CORPORATION 233 WEST MARKET STREET NEWARK NJ 07103	22-1911104	501(C)(3)	168,599.				SEE PART IV
(8) NEW COVENT COMMUNITY DEVELOPMENT 1111 S. HOMAN, CHICAGO, IL 60624	80-0797774	501(C)(3)	85,000.				SEE PART IV
(9) NEW FRONTIERS PUBLIC SCHOOLS INC. 138 FAIR AVENUE SAN ANTONIO TX 78223	31-1598661	501(C)(3)	15,000.				SEE PART IV
(10) NEW KENSINGTON COMMUNITY DVLPMNT CORP 2515 FRANKFORD AVE., PHILADELPHIA, PA 19125	22-2610536	501(C)(3)	46,500.				SEE PART IV
(11) NEW LIFE CENTERS OF CHICAGOLAND NFP 4101 W. 51ST ST., CHICAGO, IL 60632	20-2380358	501(C)(3)	7,000.				SEE PART IV
(12) NEW NEIGHBORHOODS, INC. 76 PROGRESS DR., STAMFORD, CT 06902	06-0864050	501(C)(3)	21,707.				SEE PART IV

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Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
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(1) NEW YORK CITY DEPARTMENT OF EDUCATION 44-36 VERNON BLVD LONG ISLAND CITY NY 11101	13-6400434	GOVERNMENT	250,000.				SEE PART IV
(2) NEWTOWN COMMUNITY DEVELOPMENT CORPORATION 511 WEST UNIVERSITY DRIVE #4 TEMPE AZ 85281	86-0793043	501(C)(3)	75,000.				SEE PART IV
(3) NORRIS SQUARE COMMUNITY ALLIANCE 174 DIAMOND STREET PHILADELPHIA PA 19122	23-9233412	501(C)(3)	15,000.				SEE PART IV
(4) NORTH EAST COMMUNITY ACTION CORPORATION 16 NORTH COURT ST BOWLING GREEN MO 63334	43-1017571	501(C)(3)	50,525.				SEE PART IV
(5) NORTH FLINT REINVESTMENT CORP 1159 E. FOSS AVE., FLINT, MI 48505	61-1583065	501(C)(3)	25,000.				SEE PART IV
(6) NORTH FLORIDA EDUCATIONAL DEVELOPMENT CORPO P.O. BOX 550 GRETNA FL 32332	59-2801357	501(C)(3)	58,700.				SEE PART IV
(7) NORTH LAWDALE EMPLOYMENT NETWORK 3726 W. FLOURNOY ST., CHICAGO, IL 60624	36-4295189	501(C)(3)	672,721.				SEE PART IV
(8) NORTHEAST ENTREPRENEUR FUND INC. 202 WEST SUPERIOR ST., DULUTH, MN 55802	36-3566632	501(C)(3)	45,000.				SEE PART IV
(9) NORTHEAST FLORIDA COMMUNITY ACTION AGENCY I 4070 BOULEVARD CTR DR JACKSONVILLE FL 32201	59-1090517	C CORP	59,500.				SEE PART IV
(10) NORTHERN CAMBRIA CDC 4200 CRAWFORD AVE, N. CAMBRIA, PA 15714	25-1534235	501(C)(3)	61,475.				SEE PART IV
(11) NORTHERN ECONOMIC INITIATIVES CORPORATION 1401 PRESQUE ISLE AVE MARQUETTE MI 49855	38-3024786	501(C)(3)	43,000.				SEE PART IV
(12) NORTHSIDE ASSOCIATION FOR COMMUNITY DEVELOP 612 NORTH PARK STREET KALAMAZOO MI 49007	38-2536811	501(C)(3)	26,600.				SEE PART IV

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(1) NORTHSIDE EDUCATION FOUNDATION 6632 BANDERA RD BLDG A SAN ANTONIO TX 78238	74-2591569	501(C)(3)	25,000.				SEE PART IV
(2) NORTHSIDE INSTITUTIONS NEIGHBORHOOD ALLIANC 20 SARGEANT ST., HARTFORD, CT 06105	22-3887275	501(C)(3)	102,500.				SEE PART IV
(3) NORTHWEST JACKSONVILLE CDC 3416 MONCRIEF RD., JACKSONVILLE, FL 32209	31-1809770	501(C)(3)	164,903.				SEE PART IV
(4) NORTHWEST MONTANA HUMAN RESOURCES 214 MAIN STREET KALISPELL MT 59901	81-0366018	501(C)(3)	37,000.				SEE PART IV
(5) NOVA WORKFORCE INSTITUTE OF NORTHEAST LOUIS 212 WALNUT ST., MONROE, LA 71201	30-0462723	501(C)(3)	20,000.				SEE PART IV
(6) NPU INC. 88 5TH STREET SAN FRANCISCO CA 94103	46-5400833	S CORPORATION	350,000.				SEE PART IV
(7) NUBIA MIRANDA 4508 3RD STREET SAN FRANCISCO CA 94124	20-4963289	INDIVIDUAL/SOLE	84,520.				SEE PART IV
(8) NUESTRA COMUNIDAD DVLPMNT CORP 56 WARREN ST. STE, ROXBURY, MA 02119	04-2741543	501(C)(3)	90,000.				SEE PART IV
(9) NUEVA ESPERANZA INC. 4261 NORTH 5TH ST., PHILADELPHIA, PA 19140	23-2552707	501(C)(3)	25,000.				SEE PART IV
(10) OAKLAND PLANNING AND DVLPMNT CORP 235 ATWOOD ST., PITTSBURG, PA 15213	25-1382510	501(C)(3)	93,300.				SEE PART IV
(11) OAKLAND PUBLIC EDUCATION FUND 1000 BROADWAY SUITE 300 OAKLAND CA 94607	43-2014630	501(C)(3)	25,000.				SEE PART IV
(12) OCCUR 1433 WEBSTER ST STE 100 OAKLAND CA 94612	20-0960930	501(C)(3)	250,000.				SEE PART IV

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(1) OLNEYVILLE HOUSING CORPORATION 66 CHAFFEE ST., PROVIDENCE, RI 02909	22-3010422	501(C)(3)	23,570.				SEE PART IV
(2) ONE ROOF COMMUNITY HOUSING 12 E. 4TH ST., DULUTH, MN 55805	41-1678328	501(C)(3)	79,000.				SEE PART IV
(3) OPAL COMMUNITY LAND TRUST P.O. BOX 1133, EASTSOUND, WA 98245	94-3116010	501(C)(3)	25,000.				SEE PART IV
(4) OPENDOORS 485 PLAINFIELD ST., PROVIDENCE, RI 02909	52-2374370	501(C)(3)	92,814.				SEE PART IV
(5) OPERATION ABLE OF MICHIGAN 4750 WOODWARD AVE., DETROIT, MI 48201	38-2861705	501(C)(3)	208,033.				SEE PART IV
(6) OPERATION NEW HOPE, INC. 1830 N. MAIN ST, JACKSONVILLE, FL 32206	59-3590360	501(C)(3)	494,272.				SEE PART IV
(7) OPPORTUNITYSPACE INC. 50 MILK STREET 15TH FLOOR BOSTON MA 02127	46-3441895	C CORPORATION	470,310.				SEE PART IV
(8) OSBORN NEIGHBORHOOD ALLIANCE 13560 E. MCNICHOLS DETROIT MI 48205	81-4399151	C CORPORATION	50,000.				SEE PART IV
(9) OUR CASAS RESIDENT COUNCIL INC. 2300 W. COMMERCE ST SAN ANTONIO TX 78207	74-2585308	501(C)(3)	40,000.				SEE PART IV
(10) OZARK ACTION INC. 710 EAST MAIN STREET WEST PLAINS MO 65775	43-0838508	501(C)(3)	38,500.				SEE PART IV
(11) PATH VENTURES 340 N. MADISON AVENUE LOS ANGELES CA 90004	20-1892523	501(C)(3)	62,458.				SEE PART IV
(12) PATHFINDER SERVICES INC. 2824 THEATER AVE., HUNTINGTON, IN 46750	35-1122311	501(C)(3)	37,000.				SEE PART IV

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(1) PATHSTONE CORPORATION 7 PRINCE ST., ROCHESTER, NY 14607	16-0984913	501(C)(3)	137,000.				SEE PART IV
(2) PATHWAYS - VA INC. 1200 WEST WASHINGTON ST PETERSBURG VA 23803	54-1868900	501(C)(3)	90,000.				SEE PART IV
(3) PAWTUCKET CENTRAL FALLS DVLPMNT CORP 204 BRD. ST., PAWTUCKET, RI 02860	22-3241611	501(C)(3)	85,000.				SEE PART IV
(4) PEARL RIVER VALLEY OPPORTUNITY INC. 756 HWY 98 BYPASS, COLUMBIA, MS 39429	64-0433756	501(C)(3)	7,000.				SEE PART IV
(5) PENNS MANOR FOUNDATION 6003 ROUTE 553 HWY CLYMER PA 15728	51-0535496	501(C)(3)	275,000.				SEE PART IV
(6) PEOPLE INCORPORATED OF VIRGINIA 1173 WEST MAIN STREET ABINGDON VA 24210	54-0763686	501(C)(3)	7,000.				SEE PART IV
(7) PEOPLE UNITED FOR SUSTAINABLE HOUSING 271 GRANT STREET BUFFALO NY 14213	20-3558447	501(C)(3)	45,000.				SEE PART IV
(8) PEOPLES EMERGENCY CENTER COMMUNITY DVLPMNT 325 NORTH 39TH ST., PHILADELPHIA, PA 19104	23-2687223	501(C)(3)	396,135.				SEE PART IV
(9) PEORIA CITIZEN'S COMMITTEE FOR ECONOMIC OPP 711 W. MCBEAN ST., PEORIA, IL 61605	37-6058636	501(C)(3)	453,061.				SEE PART IV
(10) PEORIA FRIENDSHIP HOUSE OF CHRISTIAN SERVIC 800 NE MADISON AVENU, PEORIA, IL 60603	37-0799752	501(C)(3)	20,000.				SEE PART IV
(11) PHILADELPHIA HOSP & HEALTHCARE-DISTRICT 119 100 S. BRD. ST., PHILADELPHIA, PA 19110	23-7418594	501(C)(3)	325,417.				SEE PART IV
(12) PHOENIX CENTER ASSOCIATION 1202 N. 3RD STREET PHOENIX AZ 85004	86-0712649	501(C)(3)	30,000.				SEE PART IV

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(1) PICO NATIONAL NETWORK 110 MARYLAND AVE NE WASHINGTON DC 20002	94-2206497	C CORPORATION	62,500.				SEE PART IV
(2) PITTSBURGH PARTNERSHIP FOR NEIGHBORHOOD DVL 225 ROSS ST., PITTSBURG, PA 15219	25-1578436	501(C)(3)	30,000.				SEE PART IV
(3) PLACE 100 PORTLAND AVE S., MINNEAPOLIS, MN 55401	20-4361698	501(C)(3)	45,000.				SEE PART IV
(4) POLISH COMMUNITY CENTER OF BUFFALO 1081 BROADWAY BUFFALO NY 14212	16-1067572	501(C)(3)	1,000,000.				SEE PART IV
(5) PRAIRIELAND COUNCIL INC 201 E HURST AVENUE HAVANA IL 62644	35-2194442	501(C)(3)	10,000.				SEE PART IV
(6) PRATT AREA COMMUNITY COUNCIL INC. 1000 DEAN ST., BROOKLYN, NY 11238	11-2451752	501(C)(3)	41,500.				SEE PART IV
(7) PRESBYTERIAN HOMES AND FAMILY SERVICES INC. 150 LINDEN AVENUE LYNCHBURG VA 24503	54-0346118	501(C)(3)	128,196.				SEE PART IV
(8) PRESERVATION OF AFFORDABLE HOUSING 40 COURT ST., BOSTON, MA 02108	31-1616634	501(C)(3)	297,379.				SEE PART IV
(9) PRESS PASS TV INC. 130 WARREN STREET ROXBURY MA 02119	80-0214659	501(C)(3)	20,000.				SEE PART IV
(10) PRG INC. 2017 EAST 38TH ST., MINNEAPOLIS, MN 55407	41-1280596	501(C)(3)	30,000.				SEE PART IV
(11) PRICE HILL WILL 3724 ST LAWRENCE AV, CINCINNATI, OH 45205	20-1452663	501(C)(3)	209,200.				SEE PART IV
(12) PROJECT FOR PRIDE IN LIVING, INC. 1035 E FRANKLIN AVE, MINNEAPOLIS MN 55404	23-7232208	501(C)(3)	590,353.				SEE PART IV

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(1) PROJECT HOOD COMMUNITIES DEVELOPMENT CORP 6620 S. KING DRIVE CHICAGO IL 60637	45-3964886	501(C)(3)	7,000.				SEE PART IV
(2) PROJECT ROW HOUSES P.O. BOX 1011, HOUSTON, TX 77251	76-0411778	501(C)(3)	6,250.				SEE PART IV
(3) PROMEDICA HEALTH SYSTEM INC. 1801 RICHARDS ROAD TOLEDO OH 43607	34-1517671	501(C)(3)	66,640.				SEE PART IV
(4) PROSPERA HOUSING COMMUNITY SERVICES 8610 N. NEW BRAUNFELS AVENUE SA TX 78217	74-2685268	501(C)(3)	7,000.				SEE PART IV
(5) PROUNITAS INC. 4802 LOCKWOOD DR., HOUSTON, TX 77026	47-1573396	501(C)(3)	7,500.				SEE PART IV
(6) QUATRO LEX LIMITED PARTNERSHIP C/O HOPE COMMUNITY INC. 174 EAST NY 10029	13-3737414	PARTNERSHIP	5,658.				SEE PART IV
(7) RAMI NASHASHIBI C/O IMAN 2744 W. 63RD ST CHICAGO IL 60629		INDIVIDUAL/SOLE	20,000.				SEE PART IV
(8) REBUILDING TOGETHER PHILADELPHIA P.O. BOX 42752, PHILADELPHIA, PA 19101	23-2549594	501(C)(3)	25,000.				SEE PART IV
(9) RED LAKE BAND OF CHIPPEWA INDIANS P.O. BOX 574 RED LAKE MN 56671	41-0692381	GOVERNMENT	7,500.				SEE PART IV
(10) RENAISSANCE ENTREPRENEURSHIP CENTER 275 5TH ST., SAN FRANCISCO, CA 94103	94-2793122	501(C)(3)	45,000.				SEE PART IV
(11) RHODE ISLAND BLACK STORYTELLERS 393 BRD. ST., PROVIDENCE, RI 02907	05-0516630	501(C)(3)	38,500.				SEE PART IV
(12) RICHMOND PEACE EDUCATION CENTER 3500 PATTERSON AVENUE RICHMOND VA 23221	52-1199043	501(C)(3)	10,000.				SEE PART IV

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<b>(1)</b> RILEY AREA DVLPMNT CORPORATION 875 MASSACHUSETTS AV, INDIANAPOLIS IN 46204	31-0963438	501(C)(3)	55,880.				SEE PART IV
<b>(2)</b> RISEBORO COMMUNITY PARTNERSHIP INC. 555 BUSHWICK AVENUE BROOKLYN NY 11221	11-2453853	501(C)(3)	42,500.				SEE PART IV
<b>(3)</b> RIVERWORKS DVLPMNT CORPORATION 526 E. CONCORDIA AVE., MILWAUKEE, WI 53212	39-1731739	501(C)(3)	89,488.				SEE PART IV
<b>(4)</b> ROCHESTER LAND BANK CORPORATION 30 CHURCH ST ROOM 125B ROCHESTER NY 14614	46-3600343	501(C)(3)	300,000.				SEE PART IV
<b>(5)</b> ROCKHURST UNIVERSITY 1100 ROCKHURST RD., KANSAS CITY, MO 64110	44-0545813	501(C)(3)	10,000.				SEE PART IV
<b>(6)</b> RUPCO INC. 289 FAIR ST., KINGSTON, NY 12401	22-2368174	501(C)(3)	53,000.				SEE PART IV
<b>(7)</b> RURAL COMMUNITY ASSISTANCE CORP 3120 FREEBRD DR., WEST SACRAMENTO, CA 95691	94-2512284	501(C)(3)	40,000.				SEE PART IV
<b>(8)</b> RURAL HOUSING DVLPMNT CORP 709 N. 1890 W, PROVO, UT 84601	87-0622732	501(C)(3)	51,225.				SEE PART IV
<b>(9)</b> RURAL NEIGHBORHOODS, INC. 19308 SW 380TH ST., FLORIDA CITY, FL 33034	65-1238417	501(C)(3)	79,325.				SEE PART IV
<b>(10)</b> SA YOUTH 3031 IH10 WEST SAN ANTONIO TX 78201	74-2333088	501(C)(3)	7,000.				SEE PART IV
<b>(11)</b> SACRED HEART COMMUNITY SERVICE 1381 SOUTH FIRST ST., SAN JOSE, CA 95110	23-7179787	501(C)(3)	55,813.				SEE PART IV
<b>(12)</b> SAFER FOUNDATION 571 W. JACKSON BLVD., CHICAGO, IL 60661	36-2762168	501(C)(3)	129,975.				SEE PART IV

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

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Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

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

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(1) SAINT ANTHONY HOSPITAL FOUNDATION 2875 WEST 19TH ST., CHICAGO, IL 60623	23-7448580	501(C)(3)	22,000.				SEE PART IV
(2) SAN DIEGO HOUSING FEDERATION 3939 IOWA ST., SAN DIEGO, CA 92104	33-0522932	501(C)(3)	12,500.				SEE PART IV
(3) SANTA MARIA COMMUNITY SERVICES 617 STRAINER AVE., CINCINNATI, OH 45204	31-0537141	501(C)(3)	190,800.				SEE PART IV
(4) SANTEE-LYNCHES AFFORDABLE HOUSING & CDC 255 BRD. ST., SUMTER, SC 29150	57-0951975	501(C)(3)	52,500.				SEE PART IV
(5) SAVING GRACE MINISTRIES INC. 2025 BAILEY AVENUE BUFFALO NY 14211	16-1573408	501(C)(3)	50,000.				SEE PART IV
(6) SELF-HELP ENTERPRISES 8445 W. ELOWIN COURT, VISALIA, CA 93291	94-1592676	501(C)(3)	67,475.				SEE PART IV
(7) SER METRO DETROIT 9301 MICHIGAN AVE., DETROIT, MI 48210	38-2080820	501(C)(3)	413,634.				SEE PART IV
(8) SER-JOBS FOR PROGRESS OF THE TEXAS GULF COA 201 BRD.WAY, HOUSTON, TX 77012	74-1590387	501(C)(3)	310,284.				SEE PART IV
(9) SEVEN HILLS NEIGHBORHOOD HOUSE 901 FINDLEY ST., CINCINNATI, OH 45214	31-0648619	501(C)(3)	120,000.				SEE PART IV
(10) SHELDON OAK CENTRAL, INC. 54 SOUTH PROSPECT ST., HARTFORD, CT 06106	06-1011060	501(C)(3)	102,500.				SEE PART IV
(11) SHERIFF'S YOUTH FOUNDATION OF LOS ANGELES C 211 WEST TEMPLE ST LOS ANGELES CA 90012	95-4047797	501(C)(3)	15,000.				SEE PART IV
(12) SINGLE ROOM OCCUPANCY HOUSING CORPORATION 1055 W. 7TH STREET LOS ANGELES CA 90017	95-3909215	501(C)(3)	25,000.				SEE PART IV

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(1) SKID ROW HOUSING TRUST 1317 E. 17TH ST, LOS ANGELES, CA 90021	95-4205316	501(C)(3)	20,000.				SEE PART IV
(2) SMITH HILL COMMUNITY DVLPMNT CORP 400 SMITH ST., PROVIDENCE, RI 02908	05-0466422	501(C)(3)	18,000.				SEE PART IV
(3) SO OTHERS MIGHT EAT INC. 71 O STREET, NW WASHINGTON DC 20001	23-7098123	501(C)(3)	100,000.				SEE PART IV
(4) SOUTH SIDE MISSION OF PEORIA, INC. 1127 S. LARAMIE ST., PEORIA, IL 61605	37-0663572	501(C)(3)	15,000.				SEE PART IV
(5) SOUTH SIDE OFFICE OF CONCERN 202 NE MADISON AVENUE PEORIA IL 61602	37-1173520	501(C)(3)	451,999.				SEE PART IV
(6) SOUTH SOUND OUTREACH SERVICES 1106 MLK JR. WAY, TACOMA, WA 98405	91-1741624	501(C)(3)	43,750.				SEE PART IV
(7) SOUTHEAST ALABAMA SELF HELP ASSOC INC. PO BOX 1080, TUSKEGEE INSTITUTE, AL 36087	63-0571776	501(C)(3)	48,775.				SEE PART IV
(8) SOUTHEAST COMMUNITY SERVICES 901 SHELBY ST., INDIANAPOLIS, IN 46203	35-1318068	501(C)(3)	20,300.				SEE PART IV
(9) SOUTHEAST NEIGHBORHOOD DEVELOPMENT INC. 1030 ORANGE STREET INDIANAPOLIS IN 46203	35-1557200	501(C)(3)	42,720.				SEE PART IV
(10) SOUTHERN MUTUAL HELP ASSOC INC. 3602 OLD JEANERETTE RD, NEW IBERIA LA 70563	72-0696092	501(C)(3)	36,832.				SEE PART IV
(11) SOUTHSIDE OUTREACH GROUP INC. P.O. BOX 375 SOUTH BOSTON VA 24592	54-1805314	501(C)(3)	17,500.				SEE PART IV
(12) SOUTHWEST BOSTON CDC 11 FAIRMOUNT AVE., HYDE PARK, MA 02136	04-3562853	501(C)(3)	35,250.				SEE PART IV

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(1) SOUTHWEST DETROIT BUSINESS ASSOC 7752 W. VERNOR HWY., DETROIT, MI 48209	38-2262287	501(C)(3)	36,180.				SEE PART IV
(2) SOUTHWEST ECONOMIC SOLUTIONS 2835 BAGLEY, DETROIT, MI 48216	46-2252476	501(C)(3)	641,178.				SEE PART IV
(3) SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BRD.WAY AVE, SLAYTON, MN 56172	41-1721815	501(C)(3)	53,625.				SEE PART IV
(4) SOUTHWEST ORGANIZING PROJECT 2609 W 63RD ST, CHICAGO, IL 60629	36-4090773	501(C)(3)	1,009,800.				SEE PART IV
(5) SPANISH SPEAKING UNITY COUNCIL OF ALAMEDA C 1900 FRUITVALE AVE, OAKLAND, CA 94601	94-1670490	501(C)(3)	51,500.				SEE PART IV
(6) SPIRAL Q PUPPET THEATER INC. 4100 HAVERFORD AVE., PHILADELPHIA, PA 19104	23-2890559	501(C)(3)	16,000.				SEE PART IV
(7) SPIRE DEVELOPMENT LLC P.O. BOX 2676 COLUMBUS OH 43216	47-1981923	LLC - S CORPORA	200,000.				SEE PART IV
(8) SPRINGBOARD FOR THE ARTS 308 PRINCE STREET STE 270 ST. PAUL MN 55101	41-1690483	501(C)(3)	8,800.				SEE PART IV
(9) SPRINGFIELD PRESERVATION & REVITALIZATION C 1321 N. MAIN ST., JACKSONVILLE, FL 32206	59-2024497	501(C)(3)	41,207.				SEE PART IV
(10) ST. NICK'S ALLIANCE 2 KINGSLAND AVE., BROOKLYN, NY 11211	51-0192170	501(C)(3)	5,500.				SEE PART IV
(11) ST. PAUL'S COMMUNITY OUTREACH 4427 FRANKLIN BLVD. CLEVELAND OH 44102	20-2904281	501(C)(3)	15,000.				SEE PART IV
(12) STATEN ISLAND CHAMBER OF COMMERCE FOUNDATIO P.O. BOX 41277 STATEN ISLAND NY 10304	13-4069282	501(C)(3)	50,000.				SEE PART IV

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(1) STOP WASTING ABANDONED PROPERTY INC. 439 PINE ST., PROVIDENCE, RI 02907	05-0370946	501(C)(3)	75,000.				SEE PART IV
(2) STOREFRONT FOR COMMUNITY DESIGN 205 E. BRD. ST., RICHMOND, VA 23219	45-2644809	501(C)(3)	40,000.				SEE PART IV
(3) SUNSHINE GOSPEL MINISTRIES P.O. BOX 377939 CHICAGO IL 60637	36-2317631	501(C)(3)	22,500.				SEE PART IV
(4) SURVIVORS & ADVOCATES FOR EMPOWERMENT INC. P.O. BOX 7412 WASHINGTON DC 20044	41-2226446	501(C)(3)	25,000.				SEE PART IV
(5) SWORDS TO PLOWSHARES VETERANS RIGHTS ORGANI 1060 HOWARD STREET SAN FRANCISCO CA 94103	94-2260626	501(C)(3)	80,000.				SEE PART IV
(6) TAMAQUA AREA COMMUNITY PARTNERSHIP 114 WEST BRD. ST., TAMAQUA, PA 18252	23-2820326	501(C)(3)	49,500.				SEE PART IV
(7) TEAMWORK ENGLEWOOD 815 W 63RD ST., CHICAGO, IL 60621	74-3102944	501(C)(3)	72,343.				SEE PART IV
(8) TELPOCHCALLI COMMUNITY EDUCATION PROJECT (T 2832 WEST 24TH BOULEVARD CHICAGO IL 60623	71-0961074	501(C)(3)	7,000.				SEE PART IV
(9) THE ARTS COMMISSION OF GREATER TOLEDO 1838 PARKWOOD AVE., TOLEDO, OH 43604	34-1358701	501(C)(3)	20,000.				SEE PART IV
(10) THE BRIDGE INC. 290 LENOX AVE. 3RD FLOOR NEW YORK NY 10027	13-1919799	501(C)(3)	47,500.				SEE PART IV
(11) THE CARA PROGRAM 237 S. DESPLAINES, CHICAGO, IL 60661	36-4268095	501(C)(3)	242,248.				SEE PART IV
(12) THE CENTER FOR YOUTH AND FAMILY SOLUTIONS 2610 W. RICHWOODS BLVD, PEORIA, IL 61604	45-3251182	501(C)(3)	23,387.				SEE PART IV

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(1) THE CHILDREN'S MUSEUM OF INDIANAPOLIS 3000 N MERIDIAN ST., INDIANAPOLIS, IN 46208	35-0867985	501(C)(3)	15,000.				SEE PART IV
(2) THE CITY OF CENTRAL FALLS 580 BRD. ST., CENTRAL FALLS, RI 02863	05-6000063	GOVERNMENT	6,000.				SEE PART IV
(3) THE COMMUNITY BUILDERS INC. 95 BERKLEY ST., BOSTON, MA 02116	04-2324773	501(C)(3)	7,000.				SEE PART IV
(4) THE CRENULATED COMPANY LTD. 1512 TOWNSEND AVE., BRONX, NY 10452	14-1719016	501(C)(3)	50,000.				SEE PART IV
(5) THE DOWNTOWN SHAREHOLDERS OF KANSAS CITY, I 726 ARMSTRONG, KANSAS CITY, MO 66044	41-2202699	501(C)(3)	105,708.				SEE PART IV
(6) THE ENTERPRISE CENTER CDC 4548 MARKET ST., PHILADELPHIA, PA 19139	30-0002632	501(C)(3)	25,400.				SEE PART IV
(7) THE GENESIS CENTER 620 POTTERS AVE., PROVIDENCE, RI 02907	22-3001721	501(C)(3)	334,067.				SEE PART IV
(8) THE NEIGHBORHOOD DEVELOPERS INC. 4 GERRISH AVE., CHELSEA, MA 02150	04-2660283	501(C)(3)	49,500.				SEE PART IV
(9) THE NEIGHBORHOOD SCOOP LLC 1301 OAKWOOD AVENUE RICHMOND VA 23223	82-1722049	LLC - PARTNERSH	25,000.				SEE PART IV
(10) THE PROVIDENCE PLAN 10 DAVOL SQ., PROVIDENCE, RI 02903	05-0467363	501(C)(3)	25,011.				SEE PART IV
(11) THE SANCTUARIES 1816 12TH STREET, NW WASHINTON DC 20009	82-1517803	501(C)(3)	20,000.				SEE PART IV
(12) THE STRIDE CENTER 1212 BROADWAY SUITE 400 OAKLAND CA 94612	94-3333571	501(C)(3)	8,000.				SEE PART IV

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<b>(1)</b> THE SUFFOLK COUNTY LANDBANK CORP 100 VETERANS MEML HWY, HAUPPAUGE NY 11788	46-3685941	501(C)(3)	14,497.				SEE PART IV
<b>(2)</b> THE WASHINGTON LLC 4138 3RD STREET SAN FRANCISCO CA 94124	36-4822676	LLC - SINGLE ME	23,353.				SEE PART IV
<b>(3)</b> THOR CONSTRUCTION INC. 5400 MAIN ST N.E. #203 MINNEAPOLIS MN 55421	41-1379796	C CORPORATION	25,000.				SEE PART IV
<b>(4)</b> TIERRA DEL SOL HOUSING CORPORATION 880 ANTHONY DR., ANTHONY, NM 88021	85-0227016	501(C)(3)	38,500.				SEE PART IV
<b>(5)</b> TINY WPA 3021 W. STILES ST., PHILADELPHIA, PA 19121	47-2560183	501(C)(3)	16,000.				SEE PART IV
<b>(6)</b> TOLEDO BOTANICAL GARDEN BOARD INC. 5403 ELMER DR., TOLEDO, OH 43615	34-1350559	501(C)(3)	8,000.				SEE PART IV
<b>(7)</b> TOUCHPOINTE FOR YOUTH 1524 GEORGETOWN DR, BLOOMFIELD HLS MI 48304	81-3824239	501(C)(3)	42,500.				SEE PART IV
<b>(8)</b> TOWN OF GOUVERNEUR 1227 US HWY 11 GOUVERNEUR NY 13642	15-6000965	GOVERNMENT	61,000.				SEE PART IV
<b>(9)</b> TOWN OF SOUTHAMPTON HOUSING AUTHORITY P.O. BOX 799 HAMPTON BAYS NY 11946	80-0101604	GOVERNMENT	2,500,000.				SEE PART IV
<b>(10)</b> TRANSITIONAL HOUSING CORPORATION 5101 16TH ST. NW, WASHINGTON, DC 20011	52-1675958	501(C)(3)	25,500.				SEE PART IV
<b>(11)</b> TRELIS 1405 E. MCDOWELL RD., PHOENIX, AZ 85006	51-0152395	501(C)(3)	85,415.				SEE PART IV
<b>(12)</b> TRINITY RESTORATION INC. 393 BRD. ST. , PROVIDENCE, RI 02907	05-0502019	501(C)(3)	14,000.				SEE PART IV

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1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) TUNICA COUNTY CDC POST OFFICE BOX 1402, TUNICA, MS 38676	64-0814239	501(C)(3)	15,300.				SEE PART IV
(2) TWIN CITIES HABITAT FOR HUMANITY INC. 1954 UNIVERSITY AVE, ST. PAUL, MN 55104	36-3363171	501(C)(3)	25,000.				SEE PART IV
(3) UMPQUA COMMUNITY DEVELOPMENT CORPORATION 605 SOUTH EAST KANE ST ROSEBURG OR 97470	93-1057208	501(C)(3)	39,500.				SEE PART IV
(4) UNITED COMMUNITY HOUSING COALITION 2727 SECOND AVE., DETROIT, MI 48202	38-2142140	501(C)(3)	25,000.				SEE PART IV
(5) UNITED NORTH CORPORATION 3106 LAGRANGE ST., TOLEDO, OH 43608	20-8567856	501(C)(3)	27,658.				SEE PART IV
(6) UNITED NORTH EAST CDC 3908 MEADOWS DR., INDIANAPOLIS, IN 46205	35-1961274	501(C)(3)	5,440.				SEE PART IV
(7) UNITED STREETS NETWORKING AND PLANNING 14901 E. WARREN, DETROIT, MI 48224	38-2810323	501(C)(3)	12,500.				SEE PART IV
(8) UNITED WAY OF GREATER TOLEDO 424 JACKSON TOLEDO OH 43604	34-4427947	501(C)(3)	12,000.				SEE PART IV
(9) UNIVERSITY ACADEMY 6801 HOLMES ROAD KANSAS CITY MO 64131	43-1867721	501(C)(3)	250,000.				SEE PART IV
(10) UNIVERSITY CITY DISTRICT 3940-42 CHESTNUT, PHILADELPHIA PA 19104	23-2913784	501(C)(3)	50,000.				SEE PART IV
(11) UPTOWN UNITED 4753 N. BRD.WAY, CHICAGO, IL 60640	36-4028056	501(C)(3)	15,000.				SEE PART IV
(12) URBAN ALLIANCE INC. 1009 STOCKBRIDGE AVE KALAMAZOO MI 49008	20-4969751	501(C)(3)	30,000.				SEE PART IV

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.

Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for the latest information.

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) URBAN HOMEWORKS INC. 2015 EMERSON AVENUE N MINNEAPOLIS MN 55411	41-1821520	501(C)(3)	120,000.				SEE PART IV
(2) URBAN LEAGUE OF ESSEX COUNTY 508 CENTRAL AVENUE NEWARK NJ 7107	22-1554540	501(C)(3)	191,209.				SEE PART IV
(3) URBAN LEAGUE OF GREATER SOUTHWESTERN OHIO 3458 READING RD., CINCINNATI, OH 45229	31-0565428	501(C)(3)	289,161.				SEE PART IV
(4) URBAN NEIGHBORHOOD INITIATIVES INC. 8300 LONGWORTH ST., DETROIT, MI 48209	38-3417161	501(C)(3)	14,000.				SEE PART IV
(5) URBAN ROOTS 227-229 W THOMPSON ST UNIT A PHILA PA 19122	46-0860594	501(C)(3)	275,000.				SEE PART IV
(6) URBAN STRATEGIES INC. 720 OLIVE ST STE 2600 ST. LOUIS MO 63101	43-1141027	501(C)(3)	6,520.				SEE PART IV
(7) VETERANS HOUSING DEVELOPMENT CORPORATION P.O. BOX 9007 SANTA ROSA CA 95406	26-1177340	501(C)(3)	25,000.				SEE PART IV
(8) VETERANS MULTI-SERVICE CENTER INC. 213-214 N. 4TH STREET PHILADELPHIA PA 19106	23-2764079	501(C)(3)	30,000.				SEE PART IV
(9) VILLAGE OF THE ARTS AND HUMANITIES 2544 GERMANTOWN AVE, PHILADELPHIA, PA 19133	22-3045318	501(C)(3)	89,000.				SEE PART IV
(10) VIRGINIA SUPPORTIVE HOUSING 1010 N. THOMPSON ST RICHMOND VA 23226	54-1444564	501(C)(3)	67,500.				SEE PART IV
(11) VOLUNTEERS OF AMERICA CHESAPEAKE 7901 ANNAPOLIS ROAD LANHAM MD 20706	52-0610547	501(C)(3)	50,000.				SEE PART IV
(12) VOLUNTEERS OF AMERICA OF ILLINOIS 47 W. POLK SUITE 250-2 CHICAGO IL 60605	36-2723047	501(C)(3)	55,000.				SEE PART IV

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 ▶

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Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

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Department of the Treasury  
Internal Revenue Service

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

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) VOLUNTEERS OF AMERICA TEXAS 300 E. MIDWAY DR., EULESS, TX 76039	75-0827469	501(C)(3)	75,000.				SEE PART IV
(2) WALNUT HILLS REDVLPMT FOUNDATION INC. 730 EAST MCMILLAN AVE, CINCINNATI, OH 45206	31-0921713	501(C)(3)	137,500.				SEE PART IV
(3) WASHINGTON SCHOOL FOR GIRLS INC. 1901 MISSISSIPPI AVE SE WA DC 20020	52-2031849	501(C)(3)	25,000.				SEE PART IV
(4) WAYNE METROPOLITAN COMMUNITY ACTION AGENCY 7310 WOODWARD SUITE 800 DETROIT MI 48202	38-1976979	501(C)(3)	10,000.				SEE PART IV
(5) WESLEY COMMUNITY CENTER INC. OF HOUSTON, TE 1410 LEE ST., HOUSTON, TX 77009	74-1132578	501(C)(3)	351,100.				SEE PART IV
(6) WEST ANGELES COMMUNITY DVLPMNT CORP 6028 CRENSHAW BLVD., LOS ANGELES, CA 90043	95-4486925	501(C)(3)	11,583.				SEE PART IV
(7) WEST BROADWAY BUSINESS & AREA COALITION 1011 WEST BWAY AVE, MINNEAPOLIS, MN 55411	41-1985423	501(C)(3)	34,800.				SEE PART IV
(8) WEST PHILADELPHIA FINANCIAL INSTITUTION 5200 WARREN STREET PHILADELPHIA PA 19131	23-2855262	501(C)(3)	20,000.				SEE PART IV
(9) WEST SIDE FEDERATION SENIOR & SUPPORTIVE HO 2345 BRD.WAY, 2ND FLOOR, NEW YORK, NY 10024	13-2926433	501(C)(3)	10,000.				SEE PART IV
(10) WESTBAY COMMUNITY ACTION INC. 224 BUTTONWOODS AVE., WARWICK, RI 02886	05-0311985	501(C)(3)	11,608.				SEE PART IV
(11) WESTSIDE COMMUNITY DVLPMNT CORP 2232 W MICHIGAN ST, INDIANAPOLIS, IN 46222	35-1643969	501(C)(3)	27,660.				SEE PART IV
(12) WHEELER KEARNS ARCHITECTS INC. 343 S. DEARBORN ST STE 200 CHICAGO IL 60604	36-3550629	S CORPORATION	15,000.				SEE PART IV

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 ▶

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Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

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Department of the Treasury  
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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](http://www.irs.gov/Form990) for the latest information.

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) WILSON COMMUNITY IMPROVEMENT ASSOC 504 E. GREEN ST., WILSON, NC 27893	56-1053307	501(C)(3)	57,500.				SEE PART IV
(2) WOMEN'S COMMUNITY REVITALIZATION INC. 100 W. OXFORD ST, PHILADELPHIA, PA 19122	22-2840188	501(C)(3)	22,500.				SEE PART IV
(3) WOMEN'S EMPLOYMENT NETWORK 920 MAIN ST., KANSAS CITY, MO 64105	43-1508734	501(C)(3)	110,813.				SEE PART IV
(4) WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORP 50 EAST 168TH STREET BRONX NY 10452	11-3099604	501(C)(3)	1,070,900.				SEE PART IV
(5) WOMEN'S INSTITUTE FOR HOUSING AND ECONOMIC 15 COURT SQUARE SUITE 210 BOSTON MA 02108	04-2733078	501(C)(3)	75,000.				SEE PART IV
(6) WOONASQUATUCKET VALLEY COMMUNITY BUILD INC. 27 SIMS AVENUE PROVIDENCE RI 02909	32-0015513	501(C)(3)	15,000.				SEE PART IV
(7) WOONSOCKET HEAD START CHILD DEVELOPMENT ASS 204 WARWICK STREET WOONSOCKET RI 02895	05-0354966	501(C)(3)	7,000.				SEE PART IV
(8) WOONSOCKET NEIGHBORHOOD DVLPMNT CORP 719 FRONT ST., WOONSOCKET, RI 02895	22-2907602	501(C)(3)	157,500.				SEE PART IV
(9) WORCESTER HOUSING AUTHORITY 40 BELMONT STREET WORCESTER MA 01605	04-6004472	GOVERNMENT	10,000.				SEE PART IV
(10) WORKING IN NEIGHBORHOODS 1814 DREMAN AVE., CINCINNATI, OH 45223	31-0962007	501(C)(3)	60,000.				SEE PART IV
(11) WSOS COMMUNITY ACTION COMMISSION INC. P.O. BOX 590 FREMONT OH 43420	34-0975934	501(C)(3)	37,000.				SEE PART IV
(12) XAVIER UNIVERSITY 3800 VICTORY PKWY., CINCINNATI, OH 45207	31-0537516	501(C)(3)	7,000.				SEE PART IV

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.

Schedule I (Form 990) (2017)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

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Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for the latest information.

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (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 noncash assistance	(h) Purpose of grant or assistance
(1) YEAR UP, INC. 40 FOUNTAIN ST., PROVIDENCE, RI 02903	04-3534407	501(C)(3)	25,386.				SEE PART IV
(2) YORK SCHOOL DISTRICT ONE P.O. BOX 770 YORK SC 29745	57-6003571	GOVERNMENT	50,000.				SEE PART IV
(3) YOUNG MEN'S CHRISTIAN ASSOC / GREATER HOUST 2600 NORTH LOOP WEST, HOUSTON, TX 77092	74-1109737	501(C)(3)	100,000.				SEE PART IV
(4) YOUTH POLICY INSTITUTE INC. 634 SOUTH SPRING ST., LOS ANGELES, CA 90014	52-1278339	501(C)(3)	124,476.				SEE PART IV
(5) ZORAIMA DIAZ-PINEDA 17 EBONY AVENUE BROWNSVILLE TX 78520		INDIVIDUAL/SOLE	20,856.				SEE PART IV
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 502.

3 Enter total number of other organizations listed in the line 1 table ▶ 43.

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

Schedule I (Form 990) (2017)



**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 non-cash assistance
1 AMERICORPS STIPENDS	31.	70,861.			
2 GRANTS	31.	908,277.			
3					
4					
5					
6					
7					

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

SUPPLEMENTAL INFORMATION 1

SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING GRANTS INSIDE THE US.

LISC STAFF CONDUCTS COMPLIANCE SITE VISITS TO ENSURE THAT GRANT FUNDS ARE SPENT FOR THE PURPOSE FOR WHICH THEY WERE GIVEN. IT IS ALSO A REQUIREMENT THAT GRANTEEES SUBMIT REPORTS ON THEIR ACTIVITIES. THESE REPORTS ARE COLLECTED AND REVIEWED BY LISC STAFF TO ENSURE COMPLIANCE WITH GRANT DOCUMENTS.

**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 non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

SUPPLEMENTAL INFORMATION 2

SCHEDULE I, PART II, LINE 1, COLUMN (H) - PURPOSE OF GRANTS PROJECT

GRANTS ARE MADE TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO SUPPORT THEIR EFFORTS TO TRANSFORM DISTRESSED COMMUNITIES. AWARDS ARE GIVEN TO ORGANIZATIONS AND INDIVIDUALS FOR THEIR WORK IN THE COMMUNITIES WE SERVE.

LISC ISSUES GRANTS TO SUPPORT THE DEVELOPMENT OF AFFORDABLE HOMES AND APARTMENTS, COMMERCIAL, COMMUNITY AND EDUCATIONAL FACILITIES SPACE; AND THE CAPACITY BUILDING, OPERATIONS AND OTHER COMMUNITY DEVELOPMENT

**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 non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

ACTIVITIES OF NON-PROFIT COMMUNITY BASED ORGANIZATIONS.

LISC PROVIDES CERTAIN AWARDS TO BUSINESSES, ORGANIZATIONS, AND INDIVIDUALS FOR THEIR NEIGHBORHOOD DEVELOPMENT WORK, ARCHITECTURAL ACHIEVEMENTS, AND OTHER EFFORTS IN THE COMMUNITIES LISC SERVES. AWARDEES ARE SELECTED BY COMMITTEES COMPRISED OF EXTERNAL MEMBERS AND INTERNAL LISC STAFF BASED ON CRITERIA DEVELOPED BY LISC, FUNDERS AND STAKEHOLDERS.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**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 checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" 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
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2017

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

For each individual whose compensation must be reported 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				
1	MAURICE JONES PRESIDENT & CEO	(i) 525,048.	0.	720.	0.	34,892.	560,660.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	DENISE NOTICE-SCOTT EXECUTIVE VP	(i) 312,314.	0.	2,063.	28,350.	10,802.	353,529.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3	MICHAEL LEVINE EVP/GEN COUNSEL	(i) 291,313.	0.	2,063.	28,350.	15,214.	336,940.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	MICHAEL HEARNE EXECUTIVE VP & CFO	(i) 295,376.	0.	1,344.	28,350.	3,059.	328,129.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	MATTHEW JOSEPHS SENIOR VICE PRESIDENT	(i) 214,798.	0.	450.	23,549.	37,369.	276,166.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6	ELISE BALBONI SENIOR VICE PRESIDENT	(i) 223,301.	0.	690.	23,862.	32,298.	280,151.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7	MARYJO ALLEN SENIOR VICE PRESIDENT	(i) 218,735.	0.	6,398.	22,766.	12,427.	260,326.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8	JOE DIFILIPPI SENIOR VICE PRESIDENT & CIO	(i) 189,884.	0.	3,492.	20,587.	22,891.	236,854.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9	GERALDINE BAUM SENIOR VICE PRESIDENT	(i) 228,748.	0.	1,980.	24,463.	15,201.	270,392.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10	BETH MARCUS SENIOR VICE PRESIDENT	(i) 213,489.	0.	1,290.	22,831.	33,406.	271,016.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11	KEVIN JORDAN SENIOR VICE PRESIDENT	(i) 161,131.	0.	394.	10,553.	1,781.	173,859.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12	LILY LIM SENIOR VICE PRES/CONTROLLER	(i) 204,109.	0.	1,290.	22,090.	32,814.	260,303.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13	RICHARD MANSON VICE PRESIDENT	(i) 171,235.	0.	1,980.	17,740.	24,350.	215,305.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14	DENISE ALTAY SENIOR VICE PRESIDENT	(i) 222,831.	0.	1,980.	21,648.	19,352.	265,811.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15	CHARLES VLIK VICE PRESIDENT	(i) 169,920.	0.	1,980.	17,842.	684.	190,426.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16	CELAYNE HILL VICE PRESIDENT/ASST. SECRETARY	(i) 157,276.	0.	1,290.	16,769.	15,127.	190,462.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

For each individual whose compensation must be reported 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					
1	CHRISTOPHER PLUMMER VICE PRESIDENT	(i)	164,387.	0.	1,980.	16,253.	23,152.	205,772.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
2	JOSEPH HORIYE VICE PRESIDENT	(i)	163,964.	0.	450.	17,530.	6,273.	188,217.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
3	REENA ABRAHAM VICE PRESIDENT	(i)	162,937.	0.	291.	17,220.	36,378.	216,826.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
4	CALVIN PARKER VICE PRESIDENT	(i)	145,603.	0.	1,606.	10,229.	16,091.	173,529.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
5	CONSTANCE MAX VICE PRESIDENT & CCO	(i)	181,916.	0.	690.	19,837.	35,358.	237,801.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
6	SUZANNE ANARDE VICE PRESIDENT	(i)	167,151.	0.	1,290.	17,719.	11,329.	197,489.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
7	CHRISTINA TRAVERS VICE PRESIDENT & TREASURER	(i)	153,972.	0.	268.	10,110.	11,046.	175,396.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
8	COURTNEY BRANKER ASSISTANT TREASURER	(i)	131,815.	0.	398.	14,220.	30,152.	176,585.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
9	MICHAEL TANG VICE PRESIDENT	(i)	145,787.	0.	682.	15,597.	11,618.	173,684.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
10	KENNETH PATRICK MAHER VICE PRESIDENT/SECRETARY	(i)	169,724.	0.	690.	18,265.	13,502.	202,181.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
11	ORAMENTA NEWSOME VICE PRESIDENT	(i)	169,296.	0.	1,980.	18,183.	24,111.	213,570.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
12	WILLIAM TAFT VICE PRESIDENT	(i)	159,451.	0.	690.	16,972.	32,298.	209,411.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
13	JULIA RYAN VICE PRESIDENT	(i)	150,133.	0.	300.	15,071.	35,155.	200,659.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
14	MIKE HUMBERSTONE VICE PRESIDENT	(i)	139,808.	0.	613.	14,839.	22,226.	177,486.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
15	JOSEPH HAGAN SENIOR VICE PRESIDENT	(i)	0.	0.	0.	0.	0.	0.	0.
		(ii)	361,896.	250,000.	3,410.	197,717.	23,063.	836,086.	0.
16	KEVIN BOES SENIOR VICE PRESIDENT	(i)	0.	0.	0.	0.	0.	0.	0.
		(ii)	258,253.	185,000.	300.	30,353.	26,794.	500,700.	0.

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

For each individual whose compensation must be reported 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				
1 SAM MARKS EXECUTIVE DIRECTOR	(i)	174,215.	0.	300.	19,353.	39,452.	233,320.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 MEGHAN HARTE EXECUTIVE DIRECTOR	(i)	185,731.	0.	450.	10,640.	28,754.	225,575.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 JOHN CHRISTOPHER WALKER DIRECTOR OF RESEARCH	(i)	169,880.	0.	3,700.	18,410.	29,082.	221,072.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 COLLETTE WILLIAMS ASSISTANT CONTROLLER	(i)	166,393.	0.	690.	18,137.	25,343.	210,563.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 JEANNE COLA EXECUTIVE DIRECTOR	(i)	153,968.	0.	690.	16,682.	34,760.	206,100.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 4B - NONQUALIFIED PLAN

NATIONAL EQUITY FUND, INC., AN ENTITY RELATED TO LISC, AWARDS A LONGEVITY

BONUS ACCRUED FOR AN ELIGIBLE EMPLOYEE. IN 2017, \$166,667 WAS ACCRUED FOR

JOSEPH HAGAN.



**SCHEDULE O  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

**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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

Employer identification number

13-3030229

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

LOCAL INITIATIVES SUPPORT CORPORATION (LISC) IS DEDICATED TO HELPING  
COMMUNITY RESIDENTS TRANSFORM DISTRESSED NEIGHBORHOODS INTO HEALTHY AND  
SUSTAINABLE COMMUNITIES OF CHOICE AND OPPORTUNITY - GOOD PLACES TO WORK,  
DO BUSINESS AND RAISE CHILDREN. LISC MOBILIZES CORPORATE, GOVERNMENT AND  
PHILANTHROPIC SUPPORT TO PROVIDE LOCAL COMMUNITY DEVELOPMENT  
ORGANIZATIONS WITH LOANS, GRANTS, AND EQUITY INVESTMENTS; LOCAL,  
STATEWIDE AND NATIONAL POLICY SUPPORT; AND TECHNICAL AND MANAGEMENT  
ASSISTANCE.

LISC IS A NATIONAL ORGANIZATION WITH A COMMUNITY FOCUS. OUR PROGRAM STAFF  
ARE BASED IN EVERY CITY AND MANY OF THE RURAL AREAS WHERE LISC-SUPPORTED  
COMMUNITY DEVELOPMENT TAKES SHAPE. IN COLLABORATION WITH LOCAL COMMUNITY  
DEVELOPMENT GROUPS, LISC STAFF HELP IDENTIFY PRIORITIES AND CHALLENGES,  
DELIVERING THE MOST APPROPRIATE SUPPORT TO MEET LOCAL NEEDS.

LISC IS BUILDING SUSTAINABLE COMMUNITIES BY ACHIEVING FIVE GOALS:

- (1) EXPANDING INVESTMENT IN HOUSING AND OTHER REAL ESTATE;
- (2) INCREASING FAMILY INCOME AND WEALTH;
- (3) STIMULATING ECONOMIC DEVELOPMENT;
- (4) IMPROVING ACCESS TO QUALITY EDUCATION; AND
- (5) SUPPORTING HEALTHY AND SAFE ENVIRONMENTS AND LIFESTYLES.

FORM 990, PART III, LINE 4A - PROJECT DEVELOPMENT AND INVESTMENT

LISC, THROUGH ITS AFFILIATES NATIONAL EQUITY FUND, INC. (NEF) AND NEW

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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MARKETS SUPPORT COMPANY, LLC (NMSC), ALSO PROVIDES EQUITY FINANCING TO SUPPORT THE DEVELOPMENT OF AFFORDABLE HOUSING AND COMMERCIAL AND COMMUNITY SPACE THROUGHOUT THE COUNTRY AND TO CREATE JOBS. IN 2017, NEF AND NMSC APPROVED EQUITY INVESTMENTS FOR 3,605 AFFORDABLE HOUSING UNITS AND 741,220 SQUARE FEET OF COMMERCIAL AND COMMUNITY SPACE.

FORM 990, PART III, LINE 4C - LENDING

IN 2017, LISC APPROVED 300,491,045 TO FINANCE 11,095 UNITS OF AFFORDABLE HOMES AND APARTMENTS, 2,941,674 SQUARE FEET OF COMMERCIAL, OFFICE, INDUSTRIAL, RECREATIONAL, AND OTHER COMMUNITY SPACE, SCHOOLS, AND CHILD CARE FACILITIES, GROCERY STORES AND FOOD MARKETS. CARE FACILITIES, GROCERY STORES AND FOOD MARKETS.

FORM 990, PART VI, SECTION B, LINE 11B - PROCESS TO REVIEW

THE FORM 990 THE ORGANIZATION'S FORM 990 IS INITIALLY PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY THE ORGANIZATION'S FINANCE DEPARTMENT. THE FINANCE DEPARTMENT AND LEGAL DEPARTMENT THEN REVIEW AND PROVIDE COMMENTS ON THE RETURN AS DRAFTED BY THE ACCOUNTING FIRM. THE ORGANIZATION'S SVP/CONTROLLER THEN REVIEWS AND APPROVES THE REVISED DRAFT RETURN. THE LISC BOARD OF DIRECTORS HAS DELEGATED TO THE LISC AUDIT COMMITTEE, A COMMITTEE OF THE BOARD OF DIRECTORS, THE AUTHORITY TO APPROVE LISC'S FINAL FORM 990. THE 990 IS PRESENTED TO THE AUDIT COMMITTEE FOR ITS REVIEW AND APPROVAL EACH YEAR BEFORE SUBMISSION TO THE IRS. A COPY IS ALSO PROVIDED TO THE BOARD OF DIRECTORS BEFORE FILING.

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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FORM 990, PART VI, SECTION B, LINE 12C - CONFLICT OF INTEREST

POLICY

ALL NEW EMPLOYEES ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST QUESTIONNAIRE, AT THE TIME OF HIRING, TO THE VP OF HUMAN RESOURCES DISCLOSING ANY OUTSIDE AFFILIATIONS. ALL CURRENT EMPLOYEES ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY TO THE GENERAL COUNSEL DISCLOSING ALL OUTSIDE AFFILIATIONS. IN ADDITION, EMPLOYEES ARE REQUIRED TO DISCLOSE TO THE VP OF HUMAN RESOURCES OR GENERAL COUNSEL ANY OUTSIDE AFFILIATIONS OR POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE THROUGHOUT THE YEAR. THE VP OF HUMAN RESOURCES AND/OR THE GENERAL COUNSEL REVIEWS THE OUTSIDE AFFILIATIONS TO DETERMINE IF THERE ARE ANY POTENTIAL CONFLICTS OF INTEREST OR VIOLATIONS OF THE CONFLICT OF INTEREST POLICY. IF SO, APPROPRIATE ACTION IS TAKEN TO RESOLVE ANY SUCH CONFLICTS OR VIOLATIONS, INCLUDING CAUSING AN EMPLOYEE TO TERMINATE HIS/HER OUTSIDE AFFILIATION OR TAKING APPROPRIATE DISCIPLINARY ACTION.

LISC'S GENERAL COUNSEL COLLECTS ANNUALLY FROM EACH LISC BOARD MEMBER A BOARD CONFLICT OF INTEREST QUESTIONNAIRE, WHICH REQUIRES EACH BOARD MEMBER TO LIST ANY DIRECT OR INDIRECT AFFILIATIONS SUCH BOARD MEMBER OR HIS/HER RESPECTIVE FAMILY MEMBERS HAVE THAT MIGHT GIVE RISE TO A CONFLICT OF INTEREST AS DEFINED IN THE BOARD-APPROVED BOARD CONFLICT OF INTEREST POLICY. IN ADDITION, BOARD MEMBERS ARE ASKED TO SUBMIT TO THE BOARD CHAIRPERSON OR THE LISC GENERAL COUNSEL ANY CHANGES IN SUCH AFFILIATIONS AS THEY ARISE. PURSUANT TO THE BOARD CONFLICT OF INTEREST POLICY, A BOARD MEMBER IS REQUIRED TO NOTIFY THE BOARD CHAIRPERSON OR COMMITTEE CHAIRPERSON, AS APPLICABLE, OF ANY MATTER BEFORE THE BOARD OR COMMITTEE

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WITH WHICH SUCH BOARD MEMBER HAS A CONFLICT OF INTEREST. SUCH BOARD MEMBER IS ALSO REQUIRED TO ABSTAIN FROM ANY DISCUSSION AND VOTE ON SUCH MATTER, AND MAY, AT THE DISCRETION OF THE BOARD CHAIRPERSON OR COMMITTEE CHAIRPERSON, BE REQUIRED TO LEAVE THE MEETING DURING DISCUSSION OF SUCH MATTER. THE LISC GENERAL COUNSEL MONITORS ANY POTENTIAL BOARD CONFLICT OF INTEREST WITH MATTERS BROUGHT BEFORE THE BOARD OR A BOARD COMMITTEE AND BOARD MEMBERS' COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SEC B, LINE 15 - PROCESS FOR DETERMINING COMPENSATION

THE ANNUAL PERFORMANCE OF THE PRESIDENT AND CEO OF LISC, THE TOP MANAGEMENT OFFICIAL, IS REVIEWED IN EXECUTIVE SESSION BY THE LISC BOARD OF DIRECTORS, WHICH IS COMPRISED OF INDEPENDENT PERSONS (WITH THE EXCEPTION OF THE PRESIDENT AND CEO, WHO DOES NOT VOTE ON HIS OR OTHER OFFICER COMPENSATION). AN ANNUAL INTERNAL PERFORMANCE REVIEW FOR ALL OTHER LISC OFFICERS IS CONDUCTED BY EACH OFFICER'S RESPECTIVE DIRECT SUPERVISOR.

BASED ON THE REVIEW OF THE PRESIDENT AND CEO BY THE BOARD OF DIRECTORS, AND THE INTERNAL REVIEWS FOR ALL OTHER OFFICERS BY THEIR RESPECTIVE SUPERVISORS, THE PRESIDENT AND CEO AND THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES PRESENT COMPENSATION RECOMMENDATIONS FOR THE PRESIDENT AND CEO AND EACH OTHER LISC OFFICER TO THE LISC BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. THE OFFICERS' COMPENSATION IS REVIEWED IN EXECUTIVE SESSION OF THE BOARD OF DIRECTORS, AND NO OFFICERS, OTHER THAN THE PRESIDENT AND CEO AND THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES, ARE PRESENT DURING SUCH

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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EXECUTIVE SESSION. THE PRESIDENT AND CEO AND THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES ARE NOT PRESENT DURING THE REVIEW OF THEIR RESPECTIVE COMPENSATION. THE DISCUSSIONS OF, AND DECISIONS REGARDING, OFFICERS' COMPENSATION ARE DOCUMENTED IN THE MINUTES OF THE MEETINGS OF THE BOARD OF DIRECTORS AT WHICH SUCH REVIEW IS CONDUCTED.

LISC MEASURES AND REWARDS JOB PERFORMANCE FOR EACH OFFICER AND NON-OFFICER POSITIONS ON THE BASIS OF JOB DUTIES AND RESPONSIBILITIES, AS DETERMINED BY AN INDEPENDENT OUTSIDE FIRM USING COMPARABILITY DATA FOR ORGANIZATIONS SIMILAR TO LISC. LISC TARGETS BASE SALARIES FOR ALL EMPLOYEES AT THE 75TH PERCENTILE FOR ALL NON-PROFIT ORGANIZATIONS, WHICH EQUATES TO APPROXIMATELY THE 25TH PERCENTILE OF ALL EMPLOYEES NATIONWIDE. LISC UTILIZES NATIONWIDE SALARY RANGES FOR EACH OFFICER AND NON-OFFICER POSITION (INCLUDING KEY EMPLOYEES) AND GUIDELINES FOR ADMINISTERING SALARIES WITHIN RANGES. SALARY RANGES FOR ALL OFFICER AND NON-OFFICER STAFF ARE REVIEWED PERIODICALLY BY THE OUTSIDE FIRM.

LISC MOST RECENTLY ENGAGED AN OUTSIDE FIRM TO CONDUCT A COMPARATIVE ANALYSIS OF LISC COMPENSATION FOR COMPENSATION EFFECTIVE APRIL 1, 2015. THE GRADES, RANGES, AND STRUCTURE DESCRIBED IN SUCH ANALYSIS WERE PRESENTED TO, AND APPROVED BY, THE LISC BOARD OF DIRECTORS AT ITS ANNUAL MEETING IN MARCH 2015. THE SALARY RANGES ARE PRESENTED ALONG WITH RECOMMENDED OFFICERS' COMPENSATION AT THE TIME OF APPROVAL. THE SENIOR VICE PRESIDENT FOR HUMAN RESOURCES ALONG WITH THE PRESIDENT AND CEO ANNUALLY REVIEW NON-OFFICER COMPENSATION WITHIN THE ESTABLISHED

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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GUIDELINES AND RANGES AS PART OF LISC'S ANNUAL PERFORMANCE REVIEW PROCESS. THE COMPENSATION POOL FOR NON-OFFICER STAFF IS APPROVED BY THE LISC BOARD OF DIRECTORS AS PART OF THE ANNUAL BUDGET.

FORM 990, PART VI, SECTION B, LINE 16B - JOINT VENTURES  
LISC HAS A JOINT VENTURE-TYPE ARRANGEMENT THROUGH NEW MARKETS SUPPORT COMPANY (NMSC). LISC IS THE SOLE MEMBER OF NMSC. FORM 990 INCLUDES NMSC. NMSC IS A SINGLE MEMBER LIMITED LIABILITY COMPANY THAT IS DISREGARDED FOR INCOME TAX PURPOSES. NMSC IS INVOLVED IN CERTAIN JOINT VENTURE-TYPE ARRANGEMENTS THAT FURTHER LISC'S TAX-EXEMPT MISSION BY USING NEW MARKETS TAX CREDIT (NMTC) AUTHORITY TO STIMULATE THE INVESTMENT OF PRIVATE CAPITAL IN THE DISTRESSED COMMUNITIES THAT LISC SERVES.

THE NMTC PROGRAM IS DESIGNED TO PROVIDE INVESTORS, SUCH AS BANKS, INSURANCE COMPANIES, INVESTMENT FUNDS, CORPORATIONS, AND INDIVIDUALS, WITH CREDITS AGAINST FEDERAL INCOME TAX IN RETURN FOR NEW INVESTMENTS MADE IN ELIGIBLE BUSINESSES AND COMMERCIAL PROJECTS IN LOW-INCOME AREAS. UNDER THE NMTC PROGRAM, INVESTMENTS IN LOW-INCOME AREAS ARE MADE THROUGH COMMUNITY DEVELOPMENT ENTITIES (CDES). NMSC SERVES AS THE MANAGING MEMBER IN CERTAIN CDES. A PIONEER IN THE CREATION AND USE OF THIS FEDERAL PROGRAM, LISC HAS FOCUSED ITS USE OF NMTC AUTHORITY ON FINANCING THE DEVELOPMENT OF COMMERCIAL AND COMMUNITY SPACE AND HOUSING THAT GENERATE JOBS, PROVIDE NEEDED GOODS AND SERVICES, AND REVERSE PHYSICAL DETERIORATION IN STRUGGLING COMMUNITIES IN LISC'S PROGRAM AREAS. MEMBERS OF LISC STAFF PLAY AN ACTIVE ROLE IN THE SELECTION AND REVIEW OF NMSC-SUPPORTED PROJECT INVESTMENTS TO ENSURE THAT THEY SUPPORT LISC'S

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CHARITABLE TAX-EXEMPT PURPOSES. LISC ALSO APPOINTS THE ENTIRE BOARD OF MANAGERS OF NMSC, THE MAJORITY OF WHICH ARE ALSO MEMBERS OF LISC STAFF.

FORM 990, PART VI, SECTION C, LINE 19 - DISCLOSURE  
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, FINANCIAL STATEMENTS, AND FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST. ALSO, THE FEDERAL FORM 990, WHICH INCLUDES FINANCIAL AND OTHER DISCLOSURES IS AVAILABLE ON THE ORGANIZATION'S WEBSITE.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AZ, AR, CA, CT,

DC, FL, IL, IN, KS, MA, MI,

MN, MS, NJ, NY, OH, PA,

VA, WI,

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
OPPORTUNITY RESOURCE FUND 330 MARSHALL STREET, SUITE 105 LANSING, MI 48912	LOAN ORGINATOR	592,128.
ONE DETROIT CREDIT UNION P.O. BOX 32584 DETROIT, MI 48232	LOAN ORIGINATOR	586,333.
COHNREZNICK LLP 1301 AVE OF AMERICAS NEW YORK, NY 10019	AUDIT SERVICE	313,500.
IRVING GONZALES 67A WATER STREET SAN FRANCISCO, CA 94133	ARCHITECT SERVICES	291,887.

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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ATTACHMENT 2 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
ADAM PARKER 19 HALF MOON HILL ACTON, MA 01720	FEASIBILITY STUDY	209,298.



**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

▶ 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](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

**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
(1) NEW MARKETS SUPPORT COMPANY, LLC 13-4251148 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, DE 60606	TAX CREDITS	IL	9,125,342.	8,333,039.	LISC
(2) LISC LOUISIANA LOAN FUND, LLC 20-8539633 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	FINANCING	NY	43,263.	1,849,183.	LISC
(3) NEIGHBORHOOD PROPERTIES, LLC 26-3674004 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	ASSET MGMT.	NY	64,177.	1,591,495.	LISC
(4)					
(5)					
(6)					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) THE RETAIL INITIATIVES, INC 13-3690780 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	CMTY DEVELOP	NY	501 (C) (3)	10	LISC	X	
(2) NATIONAL EQUITY FUND 36-3490231 10 S. RIVERSIDE PLAZE, SUITE 1 CHICAGO, IL 60606	CMTY DEVELOP	IL	501(C)(4)	N/A	LISC	X	
(3) LOCAL INITIATIVES MANAGED ASSET CORP. 11-2848981 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	CMTY DEVELOP	NY	501 (C) (3)	10	LISC	X	
(4) NEW YORK EQUITY FUND, INC. 36-4041986 10 S. RIVERSIDE PLAZA STE 1700 CHICAGO, IL 10018	LOWINCOMEHOUS	IL	501(C)(4)	N/A	NEF, INC.	X	
(5) NEF COMMUNITY INVESTMENTS, INC. 36-4229337 10 S. RIVERSIDE PLAZA SUITE 1 CHICAGO, IL 10018	LOWINCOMEHOUS	IL	501(C)(4)	N/A	NEF, INC.	X	
(6) OREGON CORP FOR AFFORDABLE HOUSING 93-1113844 10 S. RIVERSIDE PLAZA STE 1700 CHICAGO, OR 10018	LOWINCOMEHOUS	OR	501 (C) (3)	10	NEF, INC.	X	
(7)							

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	
(1) 335 GREENACRE ROAD LP 20-23768 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(2) ACD MIDWEST FUND I LP 36-48498 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) ALSTON LAKE LP 20-0740773 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(4) BANC OF AMERICA CHIF II LLC 20 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-278.	82,655.		X		X		.0100
(5) BANC OF AMERICA CHIF III LP 20 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-372.	6,632.		X		X		.0100
(6) BANK OF AMERICA CHIF IV LP 26- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-162.	84,176.		X		X		.0100
(7) BANK OF AMERICA CHIF V LP 26-3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

**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
(1) COMMUNITY DEVELOPMENT ADVOCATES CENTRAL 26-1793642 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(2) COMMUNITY DEVELOPMENT ADVOCATES EAST INC 26-0807410 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(3) COMMUNITY DEVELOPMENT ADVOCATES TCG INC 27-2082864 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(4) COMMUNITY DEVELOPMENT ADVOCATES MIDWEST 26-0807338 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(5) COMMUNITY DEVELOPMENT ADVOCATES SOUTH IN 26-0807437 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(6) COMMUNITY DEVELOPMENT ADVOCATES WEST INC 26-0807380 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(7) NEF ASSIGNMENT CORPORATION 36-4326848 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					

**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	
(1) BANK OF AMERICA CHIF VI LP 27-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	BOACHIF FUND MA	N/A				X			X	
(2) BANK OF AMERICA CHIF VII LP 90-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	BOACHIF FUND MA	N/A				X			X	
(3) BANK OF AMERICA CHIF VIII LP 3-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	BOACHIF FUND MA	N/A				X			X	
(4) BANK OF AMERICA CHIF IX LP 38-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	BOACHIF FUND MA	N/A				X			X	
(5) BANK OF AMERICA CHIF X LP 30-1-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	BOACHIF FUND MA	N/A				X			X	
(6) BELLE HAVEN LP 20-3927517-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	MN	CDA INC	N/A				X			X	
(7) CALIFORNIA EQUITY FUND 2000 LP-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED		-1.		X		X		.0001

**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
(1) NEF COMMUNITY CAPITAL INC. 36-4222908-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(2) NEF MORTGAGE COOPERATION 83-0337773-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(3) NEF SUPPORT CORPORATION 36-4326845-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(4) COMMUNITY DEVELOPMENT ADVOCATES, INC. 36-4009754-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(5) COMMUNITY DEVELOPMENT ADVOCATES DALE INC 45-2281616-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	MN	NEF, INC.	C CORP					
(6) COMMUNITY DEVELOPMENT ADVOCATES - CHI IN 27-2442712-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(7) COMMUNITY DEVELOPMENT ADVOCATES - SNAP, 30-0795331-10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	GA	NEF, INC.	C CORP					

**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	
(1) CALIFORNIA EQUITY FUND 2002 LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED		90.		X		X		.0001
(2) CALIFORNIA EQUITY FUND 2003 LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-1.	7,114.		X		X		.0001
(3) CALIFORNIA EQUITY FUND 2004 LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-3.	208.		X		X		.0001
(4) CALIFORNIA EQUITY FUND 2013 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) CALIFORNIA EQUITY FUND 2014 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) CALIFORNIA EQUITY FUND 2015 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) CALIFORNIA EQUITY FUND 2016 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2016 REGION	N/A				X			X	

**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
(1) COMMUNITY DEVELOPMENT ADVOCATES DC, INC. 61-1732817 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	NEF, INC.	C CORP					
(2) COMMUNITY DEVELOPMENT ADVOCATES MELORSE, 36-4793220 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	LA	NEF, INC.	C CORP					
(3) COMMUNITY DEVELOPMENT ADVOCATES OAKWOOD 38-3994951 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	OH	NEF, INC.	C CORP					
(4) NEW MARKETS INVESTMENT 86, LLC 46-5303240 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	CMTY DEVELOP	DE	NMSC	C CORP					
(5) NEW MARKETS INVESTMENT 96, LLC 47-3829370 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	CMTY DEVELOP	DE	NMSC	C CORP					
(6) NEW MARKETS INVESTMENT 106, LLC 81-1890795 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	CMTY DEVELOP	DE	NMSC	C CORP					
(7)									

**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	
(1) CALIFORNIA EQUITY FUND 2017 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2017 REGION	N/A				X			X	
(2) CASA PUEBLA INVESTORS LLC 36-4 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) CATHAY SHARED INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) CATHAY SHARED INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) CATHAY SHARED INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF FUND MANAGE	N/A				X			X	
(6) CHICAGO EQUITY FUND 2000 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) CHICAGO EQUITY FUND 2001 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) CHICAGO EQUITY FUND 2002 LP 30 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) CHICAGO EQUITY FUND 2003 LP 30 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) CHICAGO EQUITY FUND 2004 LP 32 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) CIBC BANK USA AFFORDABLE HOUSI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) CITIGROUP CCDE INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-100.	198,737.		X		X		.0100
(6) COVINGTON INVESTMENT FUND LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) CRESCENT COMMUNITY INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) FIFTH THIRD INVESTMENT FUND LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) FNBC LEASING INVESTMENT FUND L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-301.	175,277.		X		X		.0100
(3) FOUR EIGHTY-ONE HOUSING INVEST 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) FOUR EIGHTY-ONE HOUSING INVEST 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) FOUR EIGHTY-ONE HOUSING INVEST 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) FOUR EIGHTY-ONE HOUSING INVEST 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) GS-NYEF 2009 LLC 27-1086070 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) HAWAII AFFORDABLE HOUSING FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2017 REGION	N/A				X			X	
(2) HARBOR VIEW PHASE I 56-2281877 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	CDA TCG INC	N/A				X			X	
(3) HILLCREST COMMONS LP 20-043394 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	CDA TCG INC	N/A				X			X	
(4) HOMESTEAD EQUITY FND III PROPR 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(5) HOMESTEAD EQUITY FUND A-OREGON 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(6) HOMESTEAD EQUITY FUND A-WASHIN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(7) HOMESTEAD EQUITY FUND B-OREGON 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									



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(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	
(1) HOMESTEAD EQUITY FUND II LP 93 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(2) HOMESTEAD EQUITY FUND III LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(3) HOMESTEAD EQUITY FUND IV LP 72 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(4) HOMESTEAD EQUITY FUND LP 93-12 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(5) HOMESTEAD EQUITY FUND V LP 20- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(6) HOMESTEAD EQUITY FUND VI LP 20 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(7) HOMESTEAD EQUITY FUND VII LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) HOMESTEAD EQUITY FUND VIII LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(2) HOMESTEAD EQUITY FUND X LIMITE 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) HOMESTEAD EQUITY FUND XI LIMIT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) HOMESTEAD EQUITY FUND XII LIMI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) HOMESTEAD EQUITY FUND XIII LIM 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2016 REGION	N/A				X			X	
(6) HOMESTEAD EQUITY FUND XIV LIM 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2017 REGION	N/A				X			X	
(7) HOMESTEAD NORTHERN CALIFORNIA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	

**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
(1)									
(2)									
(3)									
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**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	
(1) HOMESTEAD PRESERVATION LLC 27-10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	OREGON AFF HSG	N/A				X			X	
(2) HOMESTEAD WESTERN COMMUNITIES 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(3) HORIZON VILLAGE ONE, LP 20-001 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	CDA TCG INC	N/A				X			X	
(4) IMANI NEIGHBORHOOD REVITALIZAT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	VA	CDA SOUTH INC	N/A				X			X	
(5) JP MORGAN CHASE LOW-INCOME HF 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-58.	198,730.		X		X		.0100
(6) KEY CDC INVESTMENT FUND LLC 95 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	12.	135,390.		X		X		.0100
(7) KEY USA INVESTMENT FUND LLC 95 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-5.	114,940.		X		X		.0100

**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
(1)									
(2)									
(3)									
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**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	
(1) MAURY SENIOR RETIREMENT 54-198 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	VA	CDA CENTRAL INC	N/A				X			X	
(2) METLIFE INVESTMENT FUND LLC 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-217,087.	220,701.		X		X		.0100
(3) MLI INVESTMENT FUND II LP 26-2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) MS CTR FUND I LLC 36-4860774 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MANAGER	N/A				X			X	
(5) MS CTR FUND II LLC 32-0530821 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MANAGER	N/A				X			X	
(6) MS SHARED INVESTMENT FUND I LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) MS SINGLE INVESTOR FUND I LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	MS FUND MANAGER	N/A				X			X	

**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
(1)									
(2)									
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**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	
(1) MS SINGLE INVESTOR FUND II LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MANAGER	N/A				X			X	
(2) MS SINGLE INVESTOR FUND III LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MANAGER	N/A				X			X	
(3) MS SINGLE INVESTOR FUND IV LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	MS FUND MANAGER	N/A				X			X	
(4) MS SINGLE INVESTOR FUND V LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MANAGER	N/A				X			X	
(5) NAHIF XVII - NEF LLC 90-606144 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	3,194,043.	535,751.		X		X		.0100
(6) NAHIF XX - NEF LLC 20-1651241 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NATIONAL AFFORDABLE HOUSING IN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

**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
(1)									
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**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	
(1) NATIONAL AFFORDABLE HOUSING IN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	1,047,391.	-1,173,266.		X		X		.0100
(2) NATIONAL CITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-1,886.	46,942.		X		X		1.0000
(3) NATIONAL EQUITY FUND 1994 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-2.	69,467.		X		X		.0100
(4) NATIONAL EQUITY FUND 1996 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	6,650.	-10,224.		X		X		.0100
(5) NATIONAL EQUITY FUND 1996 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	4,923.	-2,292.		X		X		.0100
(6) NATIONAL EQUITY FUND 1997 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-31.	-10,985.		X		X		.0100
(7) NATIONAL EQUITY FUND 1997 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-17.	370,231.		X		X		.0100

**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
(1)									
(2)									
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**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	
(1) NATIONAL EQUITY FUND 1999 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-26.	-4,987.		X		X		.0100
(2) NATIONAL EQUITY FUND 1999 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	77.	242,245.		X		X		.0100
(3) NATIONAL EQUITY FUND 2000 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-7.	72,728.		X		X		.0010
(4) NATIONAL EQUITY FUND 2001 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-3.	70,900.		X		X		.0001
(5) NATIONAL EQUITY FUND 2002 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-11.	2,559,963.		X		X		.0001
(6) NATIONAL EQUITY FUND 2003 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-15.	164,566.		X		X		.0001
(7) NATIONAL EQUITY FUND 2004 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-19.	3,854,143.		X		X		.0001

**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
(1)									
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**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	
(1) NATIONAL EQUITY FUND 2005 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) NATIONAL EQUITY FUND 2006 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) NATIONAL EQUITY FUND 2006 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NATIONAL EQUITY FUND 2007 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) NATIONAL EQUITY FUND 2007 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) NATIONAL EQUITY FUND 2008 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NATIONAL EQUITY FUND 2008 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

**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
(1)									
(2)									
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**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	
(1) NATIONAL EQUITY FUND 2009 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF 2009 LLC	N/A				X			X	
(2) NATIONAL EQUITY FUND 2011 INV 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2011FUNDMGR	N/A				X			X	
(3) NATIONAL EQUITY FUND 2011 LP 4 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2011 LLC	N/A				X			X	
(4) NATIONAL EQUITY FUND 2012 LP 9 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2012FUNDMGR	N/A				X			X	
(5) NATIONAL EQUITY FUND 2013 LP 9 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2013FUNDMGR	N/A				X			X	
(6) NATIONAL EQUITY FUND 2014 LP 6 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2014 FUND M	N/A				X			X	
(7) NATIONAL EQUITY FUND 2017 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF FUND MANAGE	N/A				X			X	

**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
(1)									
(2)									
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**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	
(1) NEF AFFORD HOUS INVST FUND LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) NEF AFFORD HOUS INVST FUND II 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) NEF AFFORDABLE HOUSING INV FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NEF CAPITAL ONE INVESTMENT FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF CHICAGO WEST TOWN FUND LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2017 REGION	N/A				X			X	
(6) NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-179.	1,503.		X		X		.0100
(7) NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-496.	-1,013.		X		X		.0100

**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
(1)									
(2)									
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**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	
(1) NEF COMPASS SHARED INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) NEF ENCANTO POINTE MIDDLE TIER 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFENCANTOPTMGR	N/A				X			X	
(3) NEF FIRST NIAGARA INVESTMENT F 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) NEF HEARTLAND FUND LLC 20-0083 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED		157,523.		X		X		.0001
(5) NEF INVESTMENT PARTNERS FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) NEF INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NEF INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

**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
(1)									
(2)									
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(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	
(1) NEF INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) NEF INVESTMENT PARTNERS FUND V 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) NEF INVESTMENT PARTNERS FUND V 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) NEF INVESTMENT PARTNERS FUND V 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF KEY SHARED INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF KEY FUND MA	N/A				X			X	
(6) NEF NATIONAL COMMUNITY INV FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NEF NATIONAL COMMUNITY INV FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEF NEIGHBORHOOD REVITALIZATI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) NEF NEIGHBORHOOD REVITALIZ. FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NN REVFUNDIIMGR	N/A				X			X	
(3) NEF NEW YORK SPECIAL TAX CREDI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NEF NEW YORK SPECIAL TAX CREDI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF ORCHARD WESTCHASE MIDDLE T 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFORCHARDWCMGR	N/A				X			X	
(6) NEF PRESERVATION FUND I LP 32- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF PRESERVATIO	N/A				X			X	
(7) NEF PRESERVATION FUND II LP 30 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF PRESERVATIO	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEF PRESERVATION MORTGAGE LOAN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF PRESERVATIO	N/A				X			X	
(2) NEF RBS CITIZENS INVESTMENT FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) NEF REGIONAL FUND I - CHICAGO 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) NEF REGIONAL FUND II - FLORIDA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF REGIONAL FUND IV - NORTHEA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2014 REGION	N/A				X			X	
(6) NEF REGIONAL FUND V - CHICAGO 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2014 REGION	N/A				X			X	
(7) NEF REGIONAL FUND VII - CHICAG 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2015 REGION	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
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**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	
(1) NEF REGIONAL FUND VIII - CHICA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2016 REGION	N/A				X			X	
(2) NEF REGIONAL FUND IX - TEXAS L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2016 REGION	N/A				X			X	
(3) NEF SECONDARY II - CALIFORNIA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2016 REGION	N/A				X			X	
(4) NEF STCC AFFORDABLE HOUSING FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF WEBSTER LIHTC FUND I LP 35 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) NEW YORK EQUITY FUND 1988 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	109,917.			X		X		.0200
(7) NEW YORK EQUITY FUND 1989 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	-16.	-184,357.		X		X		.0100

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW YORK EQUITY FUND 1990 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	10,604.	-3,844.		X		X		.0100
(2) NEW YORK EQUITY FUND 1992 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	117.			X		X		.0100
(3) NEW YORK EQUITY FUND 1993 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	229.	2,518.		X		X		.0100
(4) NEW YORK EQUITY FUND 1994 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	9,782.	-2,882.		X		X		.0100
(5) NEW YORK EQUITY FUND 1995 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	7,282.	-330.		X		X		.0100
(6) NEW YORK EQUITY FUND 1995 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	-38.	-20,862.		X		X		.0100
(7) NEW YORK EQUITY FUND 2000 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	RELATED	815.	2,317.		X		X		.0100

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									



**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	
(1) NEW YORK EQUITY FUND 2000 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NYEF INC	N/A				X			X	
(2) NEW YORK EQUITY FUND 2001 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(3) NEW YORK EQUITY FUND 2002 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(4) NEW YORK EQUITY FUND 2003 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(5) NEW YORK EQUITY FUND 2004 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(6) NEW YORK EQUITY FUND 2005 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(7) NEW YORK EQUITY FUND 2006 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW YORK EQUITY FUND 2008 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(2) NEWARK COMMUNITY INVESTMENT FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-100.	7,898.		X		X		.0100
(3) NORTHERN CALIFORNIA INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NORTHERN CALIFORNIA INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NYC DISTRESSED MULTIFAMILY HSG 10 S RIVERSIDE PLAZA STE 1700	LOW&MOD INC HSG	DE	NYC DMH LLC	RELATED	8.	190,172.		X		X		2.0311
(6) NYC DISTRESSED MULTIFAMILY HSG 10 S RIVERSIDE PLAZA STE 1700	LOW&MOD INC HSG	DE	NYC DMH LLC	RELATED		27,556.		X		X		1.0099
(7) PRESERVATION INVESTMENT FUND L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) ONE ECONOMY FUND I LLC 20-2660 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-3.	1,009,525.		X		X		.0001
(2) OREGON EQUITY FUND II LP 93-11 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(3) OREGON EQUITY FUND III LP 93-1 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(4) OREGON EQUITY FUND IV LP 93-12 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(5) PRESERVATION LLC 20-5160740 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) STANDARD FUND I LP 45-2066675 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) STATE FARM GOOD NEIGHBOR FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) STERLING NATIONAL BANK AFFORDA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF FUND MANAGE	N/A				X			X	
(2) ST. JOHNS AVENUE ONE, LP 36-00 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(3) TD BANKNORTH HOUSING INVESTMEN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) THE LA QUINTA EQUITY FUND LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) TIPSON ROAD APARTMENTS, LP 51- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(6) UNIVERSITY DALE APARTMENTS LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	MN	CDA DALE, INC	N/A				X			X	
(7) US AFFORDABLE HOUSING CIF II L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	-50.	106.		X		X		.0100

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) US AFFORDABLE HOUSING CIF LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	644.	-1,614.		X		X		.0100
(2) WASHINGTON MUTUAL CIF LLC 36-4 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	RELATED	49.	-1,863.		X		X		.0100
(3) WFCIH INVESTMENT FUND I LLC 27 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) WFCIH INVESTMENT FUND II LLC 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) WFCIH INVESTMENT FUND III LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) WINTRUST COMMUNITY INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) CHAPIN HOUSING LP 52-2324692 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DC	CDA DC, INC.	N/A				X			X	

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(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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) EUCLID HOUSING LP 52-2324688 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DC	CDA DC, INC.	N/A				X			X	
(2) TCCN HOMES I LIMITED PARTNERSH 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OH	CDA OAKWOOD INC	N/A				X			X	
(3) TCCN HOMES II LIMITED PARTNERS 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OH	CDA OAKWOOD INC	N/A				X			X	
(4) NEW MARKETS INVESTMENT 58, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 59, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 60, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 61, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 62, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 63, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 64, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 65, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 66, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 67, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 68, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 69, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 70, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 71, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 72, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 73, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 74, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 75, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									



**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	
(1) NEW MARKETS INVESTMETN 76, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 77, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 78, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 79, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 80, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 81, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 82, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 83, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 84, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 85, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 87, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 88, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 89, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 90, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 91, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 92, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 93, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 94, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 95, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 97, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 98, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 99, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 100, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 101, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 102, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 103, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 104, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 105, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 107, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 108, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 109, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 110 LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 111, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 112, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 113, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 114, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 115, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 116, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 117, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT 118, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NEW MARKETS INVESTMENT 119, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) NEW MARKETS INVESTMENT 120, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) NEW MARKETS INVESTMENT 121, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS INVESTMENT 122, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NEW MARKETS INVESTMENT 123, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) NEW MARKETS INVESTMENT 124, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) NEW MARKETS INVESTMENT XVI, LL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) NMI XVI INVESTMENT FUND, LLC 0 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) BOA FCE INVESTMENT FUND LLC 45 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) BOA GOODWILL CHARLOTTE INVESTM 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) KMI INVESTMENT FUND, LLC 56-17 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) BOA RUMRILL PARK INVESTMENT FU 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) BOA URBAN CORPS INVESTMENT FUN 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) BOA BARTLETT YARD INVESTMENT F 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) BOA WATERFIRE INVESTMENT FUND, 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) BOA ADDABBO INVESTMENT FUND, L 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									



**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	
(1) CHASE NMTC AVONDALE INVESTMENT 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) CHASE NMTC LISC CHARTER SCHOOL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) CHASE NMTC LISC CHARTER SCHOOL 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) CHASE NMTC BRUNSWICK INVESTMEN 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) CHASE NMTC EMMI ROTH INVESTMEN 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) CHASE NMTC INDIANAPOLIS YET IN 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) CHASE NMTC INSTITUTO INVESTMEN 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) CHASE NMTC PASEO VERDE INVESTM 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) NEW MARKETS COMM IMPACT FUND, 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) NMCIF PHILADELPHIA PROJECT INV 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) LARKIN INVESTMENT FUND, LLC 45 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) OAK HILLS INVESTMENT FUND, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) CAPITOL THEATRE INVESTMENT FUN 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) CAPITAL ACCESS FUND OF CLEVELA 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) FRESH FOODS INVESTMENT FUND (I 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) HEALTHY FUTURES FQHC FINANCING 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) HEALTHY FUTURES FQHC FINANCING 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) JOB CREATION AND COMMUNITY REV 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5) MS NMSC EQUITY FUND, LLC (MSNM 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(6) PIKE PLACE MARKETFRONT IVESTME 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(7) UPTOWN CENTER INVESTMENT FUND, 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

**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	
(1) GRC NMTC INVESTMENT FUND, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(2) MARTHA'S TABLE INVESTMENT FUND 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(3) GROW INDIANAPOLIS FUND, LLC 82 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(4) GOOD JOBS INVESTMENT FUND, LLC 168 N. CLINTON ST, 4TH FLOOR C	COMMUNITY DEV	DE	N/A					X			X	
(5)												
(6)												
(7)												

**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
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity . . . . .	X	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	X	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		X
<b>f</b> Dividends from related organization(s) . . . . .		X
<b>g</b> Sale of assets to related organization(s) . . . . .		X
<b>h</b> Purchase of assets from related organization(s) . . . . .		X
<b>i</b> Exchange of assets with related organization(s) . . . . .		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		X
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	X	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		X
<b>s</b> 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) NATIONAL EQUITY FUND	C	10,372,500.	BOOK VALUE
(2) NATIONAL EQUITY FUND	D	23,000,000.	BOOK VALUE
(3) NATIONAL EQUITY FUND	O	154,425.	BOOK VALUE
(4) NATIONAL EQUITY FUND	P	186,519.	BOOK VALUE
(5) NATIONAL EQUITY FUND	Q	291,131.	BOOK VALUE
(6) NATIONAL EQUITY FUND	L	131,973.	BOOK VALUE

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

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> 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?		
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity . . . . .	<b>1a</b>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>1b</b>	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<b>1c</b>	
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<b>1d</b>	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	<b>1e</b>	
<b>f</b> Dividends from related organization(s) . . . . .	<b>1f</b>	
<b>g</b> Sale of assets to related organization(s) . . . . .	<b>1g</b>	
<b>h</b> Purchase of assets from related organization(s) . . . . .	<b>1h</b>	
<b>i</b> Exchange of assets with related organization(s) . . . . .	<b>1i</b>	
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>1j</b>	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>1k</b>	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>1l</b>	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>1m</b>	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>1n</b>	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>1o</b>	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>1p</b>	
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>1q</b>	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<b>1r</b>	
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>1s</b>	

**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) NATIONAL EQUITY FUND	A ( I )	57,494.	BOOK VALUE
(2)			
(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 section 501(c)(3) organizations?		(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		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

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**Part VII** **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

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