

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2013

Open to Public Inspection

A For the **2013** calendar year, or tax year beginning **2013**, and ending **20**

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	C Name of organization LOCAL INITIATIVES SUPPORT CORPORATION			D Employer identification number 13-3030229	
	Doing Business As			E 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			G Gross receipts \$ 180,208,036.		
F Name and address of principal officer: MICHAEL RUBINGER 501 SEVENTH AVENUE NEW YORK, NY 10018			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			If "No," attach a list. (see instructions)		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(c) Group exemption number ▶		
J Website: ▶ WWW.LISC.ORG					
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1979		M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>TO ASSIST COMMUNITY RESIDENTS THROUGHOUT URBAN AND RURAL AREAS OF THE UNITED STATES TO TRANSFORM DISTRESSED NEIGHBORHOODS INTO HEALTHY AND SUSTAINABLE COMMUNITIES.</u>	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 26.
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 24.
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5 478.
	6 Total number of volunteers (estimate if necessary)	6 46.
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 277,806.
b Net unrelated business taxable income from Form 990-T, line 34	7b -114,610.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 82,114,085. Current Year: 110,906,468.
	9 Program service revenue (Part VIII, line 2g)	33,181,252. 28,842,762.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,732,818. 1,328,846.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	189,468. 248,426.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	118,217,623. 141,326,502.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	37,208,438. 40,700,156.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0 0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	34,386,414. 36,309,250.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	164,829. 181,477.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,678,205.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	31,113,256. 44,535,062.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	102,872,937. 121,725,945.
19 Revenue less expenses. Subtract line 18 from line 12	15,344,686. 19,600,557.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 429,213,107. End of Year: 446,094,574.
	21 Total liabilities (Part X, line 26)	215,581,114. 212,678,889.
	22 Net assets or fund balances. Subtract line 21 from line 20.	213,631,993. 233,415,685.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name JOCELYNE C MILLER	Preparer's signature <i>Joelyne C. Miller</i>	Date 11/5/14
	Firm's name ▶ KPMG LLP	Firm's EIN ▶ 13-5565207	Check <input type="checkbox"/> if self-employed PTIN P00634378
	Firm's address ▶ 1676 INTERNATIONAL DRIVE MCLEAN, VA 22102	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** (2013)

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2013, or tax year beginning _____, 2013, and ending _____, 20

2013

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

Name of exempt organization

Employer identification number

LOCAL INITIATIVES SUPPORT CORPORATION

13-3030229

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

Check the box for the type of return being filed with Form 8453-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 of 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-). 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.

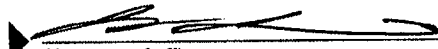
- 1a Form 990 check here **b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .** 1b 141326502.
- 2a Form 990-EZ check here **b Total revenue, if any (Form 990-EZ, line 9)** 2b _____
- 3a Form 1120-POL check here **b Total tax (Form 1120-POL, line 22)** 3b _____
- 4a Form 990-PF check here **b Tax based on investment income (Form 990-PF, Part VI, line 5)** 4b _____
- 5a Form 8868 check here **b Balance due (Form 8868, Part I, line 3c or Part II, line 8c)** 5b _____

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) 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.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2013 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.

Sign Here



Signature of officer

11/7/2014
Date

VICE PRESIDENT & CONTROL
Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature 	Date <u>11/5/14</u>	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN <u>P00634378</u>
	Firm's name (or yours if self-employed), address, and ZIP code	<u>KPMG LLP</u>			EIN <u>13-5565207</u>
		<u>1676 INTERNATIONAL DRIVE</u> <u>MCLEAN VA 22102</u>			Phone no. <u>703-286-8000</u>

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no.			

Cumulative e-File History 2013	
Federal	
Locator:	DHO0FT
Taxpayer Name:	LOCAL INITIATIVES SUPPORT CORPORATION
Return Type:	990, 990 & 990T (Corp)
Submitted Date:	11/11/2014 07:42:08
Acknowledgement Date:	11/11/2014 07:56:51
Status:	Rejected
Submission ID:	54028020143155000000
Submitted Date:	11/11/2014 10:32:16
Acknowledgement Date:	11/11/2014 11:49:50
Status:	Accepted
Submission ID:	54028020143155000003

Application for 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.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which 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 and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number (EIN) or 13-3030229
	Number, street, and room or suite no. If a P.O. box, see instructions. 501 SEVENTH AVENUE	Social security number (SSN)
	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

• The books are in the care of ► LILY LIM

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 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2014, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year 2013 or

► tax year beginning _____, 20____, and ending _____, 20____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number, see instructions	
	LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number (EIN) or	13-3030229
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)	
	501 SEVENTH AVENUE		
	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) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
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

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of LILLY LIM, 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.

4 I request an additional 3-month extension of time until 11/17, 2014 .

5 For calendar year 2013, or other tax year beginning _____, 20____, and ending _____, 20____.

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE.

8a 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.	8a \$	0
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	0
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *Joufou C. Miller* Title PAID PREPARER Date 8/6/14

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:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

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

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 40,700,156. including grants of \$ 40,700,156.) (Revenue \$)

PROJECT GRANTS REPRESENT GRANTS TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO SUPPORT THEIR EFFORTS TO TRANSFORM DISTRESSED COMMUNITIES. LISC ISSUED GRANTS TO 506 ENTITIES THROUGHOUT THE COUNTRY. PROJECT GRANTS SUPPORTED THE DEVELOPMENT OF AFFORDABLE HOMEOWNERSHIP, RENTAL HOUSING, RETAIL AND COMMUNITY SPACE AND SCHOOLS, AS WELL AS THE CAPACITY BUILDING, OPERATIONS, AND OTHER COMMUNITY DEVELOPMENT ACTIVITIES OF COMMUNITY BASED ORGANIZATIONS.

4b (Code:) (Expenses \$ 53,613,098. including grants of \$) (Revenue \$ 18,838,239.)

PROJECT DEVELOPMENT & PROGRAM SERVICES IS STAFF TIME, TRAVEL, PROFESSIONAL SERVICES AND OTHER COSTS REQUIRED TO DEVELOP AND OPERATE PROGRAMS TO SUPPORT COMMUNITY BASED ORGANIZATIONS.

4c (Code:) (Expenses \$ 7,230,906. including grants of \$) (Revenue \$ 10,005,972.)

LENDING EXPENSES ARE FOR INTEREST AND OTHER EXPENSES ASSOCIATED WITH PROVIDING DEBT FINANCING TO PROJECTS AND PROGRAMS INTENDED TO SUPPORT THE TRANSFORMATION OF DISTRESSED NEIGHBORHOODS AND/OR TO BENEFIT LOW- AND MODERATE-INCOME PERSONS. LISC ISSUED \$100M IN LOANS THAT WERE USED TO FINANCE 3,540 UNITS OF AFFORDABLE HOMES AND APARTMENTS; 1,131,277 SQUARE FEET OF NON-RESIDENTIAL PROJECTS; AND 10 SCHOOLS THAT SERVED 4,392 STUDENTS.

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

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

4e Total program service expenses 101,544,160.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	X	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12 a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14 a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question numbers (1a-14b), numerical responses, and Yes/No checkboxes. Includes questions about Form 1096, Form W-2G, backup withholding, Form W-3, federal employment tax returns, Form 990-T, foreign accounts, prohibited tax shelter transactions, annual gross receipts, and Form 8282.

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 4 columns: Question ID, Question Text, Yes, No. Rows include 1a, 1b, 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 4 columns: Question ID, Question Text, Yes, No. Rows include 10a, 10b, 11a, 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 2
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, physical address, and telephone number of the person who possesses the books and records of the organization.

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. X

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) MICHAEL RUBINGER PRESIDENT & CEO	35.00 0	X		X			439,135.	0	46,592.	
(2) GREGORY BELINFANTI DIRECTOR	1.00 0	X					0	0	0	
(3) KELLY CAFFARELLI DIRECTOR	1.00 0	X					0	0	0	
(4) LISA CASHIN VICE CHAIR	1.00 0	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) LISA GLOVER DIRECTOR	1.00 0	X					0	0	0	
(9) COLVIN W GRANNUM DIRECTOR	1.00 0	X					0	0	0	
(10) KEVIN JOHNSON DIRECTOR	1.00 0	X					0	0	0	
(11) LYNETTE JUNG LEE DIRECTOR	1.00 0	X					0	0	0	
(12) RONALD PHILLIPS DIRECTOR	1.00 0	X					0	0	0	
(13) ANDREW PLEPPER DIRECTOR	1.00 0	X					0	0	0	
(14) REY RAMSEY 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) RICHARD RAPSON DIRECTOR	1.00 0	X					0	0	0	
(16) ROBERT RUBIN CHAIRMAN	1.00 0	X					0	0	0	
(17) GEORGE WALKER DIRECTOR	1.00 0	X					0	0	0	
(18) BERNARD WINOGRAD DIRECTOR	1.00 0	X					0	0	0	
(19) THOMAS ESPINOZA DIRECTOR	1.00 0	X					0	0	0	
(20) DEAN ESSERMAN DIRECTOR	1.00 0	X					0	0	0	
(21) KATHY MERCHANT DIRECTOR	1.00 0	X					0	0	0	
(22) NILDA RUIZ DIRECTOR	1.00 0	X					0	0	0	
(23) BRANDEE MCHALE DIRECTOR	1.00 0	X					0	0	0	
(24) MIKE SMITH DIRECTOR	1.00 0	X					0	0	0	
(25) SALLY DURDAN DIRECTOR	1.00 0	X					0	0	0	
1b Sub-total							439,135.	0	46,592.	
c Total from continuation sheets to Part VII, Section A							6,176,351.	0	1,262,057.	
d Total (add lines 1b and 1c)							6,615,486.	0	1,308,649.	

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 **94**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

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 **9**

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) ELLEN GILLIGAN DIRECTOR	1.00 0	X					0	0	0	
(27) DENNIS WHITE DIRECTOR	1.00 0	X					0	0	0	
(28) FRANCENA BROOKS EXECUTIVE VP OF PROGRAMS	35.00 0			X			241,131.	0	42,288.	
(29) MICHAEL LEVINE EXECUTIVE VP & GENERAL COUNSEL	35.00 0			X			268,843.	0	38,410.	
(30) TOBIN LEVY EXECUTIVE VP & CFO	35.00 0			X			269,496.	0	28,071.	
(31) MATHEW JOSEPHS SENIOR VICE PRESIDENT	35.00 0			X			189,082.	0	42,620.	
(32) ELISE BALBONI SENIOR VICE PRESIDENT	35.00 0			X			137,434.	0	26,063.	
(33) MARYJO ALLEN SENIOR VICE PRESIDENT	35.00 0			X			189,150.	0	31,273.	
(34) LILY LIM VICE PRESIDENT/CONTROLLER	35.00 0			X			175,177.	0	40,041.	
(35) GREGORY MAHER SENIOR VICE PRESIDENT	35.00 0			X			156,887.	0	33,684.	
(36) RICHARD MANSON VICE PRESIDENT	35.00 0			X			150,480.	0	43,435.	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **94**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	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) DENISE ALTAY VICE PRESIDENT	35.00 0			X			176,656.	0	35,112.	
(38) GRETA HARRIS VICE PRESIDENT	35.00 0			X			101,736.	0	19,402.	
(39) ELISE HOBEN VICE PRESIDENT	35.00 0			X			125,280.	0	21,285.	
(40) VINCENT O'DONNELL VICE PRESIDENT	35.00 0			X			116,754.	0	12,208.	
(41) CHARLES VLIK VICE PRESIDENT	35.00 0			X			152,387.	0	16,230.	
(42) MARGARET SLANE VICE PRESIDENT	35.00 0			X			144,852.	0	47,381.	
(43) CELAYNE HILL VICE PRESIDENT	35.00 0			X			137,553.	0	26,026.	
(44) JOE DIFILIPPI SENIOR VICE PRESIDENT	35.00 0			X			209,379.	0	41,816.	
(45) MARIANO DIAZ VICE PRESIDENT	35.00 0			X			164,298.	0	45,165.	
(46) REENA BHATIA VICE PRESIDENT	35.00 0			X			152,564.	0	21,576.	
(47) ANIKA GOSS-FOSTER VICE PRESIDENT	35.00 0			X			147,647.	0	44,045.	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **94**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 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) CONNIE MAX VICE PRESIDENT	35.00 0			X			25,908.	0	0	
(49) SUZANNE ANARDE VICE PRESIDENT	35.00 0			X			127,479.	0	13,667.	
(50) BARBARA BURNHAM VICE PRESIDENT	35.00 0			X			154,871.	0	28,017.	
(51) COURTNEY BRANKER ASSISTANT TREASURER	35.00 0			X			116,038.	0	35,457.	
(52) MICHAEL TANG VICE PRESIDENT	35.00 0			X			129,872.	0	22,815.	
(53) KEVIN JORDAN SENIOR VICE PRESIDENT	35.00 0			X			160,765.	0	50,479.	
(54) LARRY OAKS VICE PRESIDENT	35.00 0			X			152,588.	0	17,175.	
(55) CHRISTINA TRAVERS VICE PRESIDENT	35.00 0			X			115,622.	0	17,205.	
(56) GERALDINE BAUM SENIOR VICE PRESIDENT	35.00 0			X			186,509.	0	30,023.	
(57) BETH MARCUS SENIOR VICE PRESIDENT	35.00 0			X			161,782.	0	45,304.	
(58) KENNETH PATRICK MAHER VICE PRESIDENT	35.00 0			X			136,210.	0	24,664.	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **94**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 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) RICHARD PINNER ASSISTANT SECRETARY	35.00 0			X				111,664.	0	21,669.
(60) SHAWN LUTHER ASSISTANT SECRETARY	35.00 0			X				113,278.	0	16,847.
(61) SUSANA VASQUEZ EXECUTIVE DIRECTOR	35.00 0				X			177,468.	0	49,107.
(62) DENISE NOTICE-SCOTT MANAGING DIRECTOR	35.00 0				X			183,295.	0	29,017.
(63) JOHN CHRISTOPHER WALKER DIRECTOR	35.00 0					X		160,870.	0	47,566.
(64) ORAMENTA NEWSOME EXECUTIVE DIRECTOR	35.00 0					X		144,021.	0	35,784.
(65) COLLETTE WILLIAMS ASSISTANT CONTROLLER	35.00 0					X		146,808.	0	34,967.
(66) ROBERT VAN METER EXECUTIVE DIRECTOR	35.00 0					X		132,915.	0	42,406.
(67) JEANNE COLA EXECUTIVE DIRECTOR	35.00 0					X		131,602.	0	43,757.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 94

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 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, 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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Pension, Advertising, etc.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year		
Assets	1	Cash - non-interest-bearing	1,870,839.	1	4,867,647.	
	2	Savings and temporary cash investments	65,370,015.	2	52,445,370.	
	3	Pledges and grants receivable, net	26,330,518.	3	26,811,423.	
	4	Accounts receivable, net	17,105,933.	4	23,706,250.	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0	
	7	Notes and loans receivable, net	0	7	0	
	8	Inventories for sale or use	0	8	0	
	9	Prepaid expenses and deferred charges	749,637.	9	3,389,761.	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	7,844,342.		
	b	Less: accumulated depreciation	10b	2,701,753.	10c	5,142,589.
	11	Investments - publicly traded securities	115,747,371.	11	111,151,937.	
	12	Investments - other securities. See Part IV, line 11	15,449,202.	12	15,510,440.	
	13	Investments - program-related. See Part IV, line 11	119,158,886.	13	137,473,490.	
	14	Intangible assets	0	14	0	
	15	Other assets. See Part IV, line 11	61,443,935.	15	65,595,667.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	429,213,107.	16	446,094,574.		
Liabilities	17	Accounts payable and accrued expenses	17,974,863.	17	17,025,232.	
	18	Grants payable	22,732,796.	18	24,154,236.	
	19	Deferred revenue	72,848.	19	75,569.	
	20	Tax-exempt bond liabilities	0	20	0	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties	10,495,311.	23	12,504,263.	
	24	Unsecured notes and loans payable to unrelated third parties	163,291,457.	24	157,738,892.	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,013,839.	25	1,180,697.		
26	Total liabilities. Add lines 17 through 25	215,581,114.	26	212,678,889.		
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets	89,625,368.	27	95,211,918.	
	28	Temporarily restricted net assets	124,006,625.	28	138,203,767.	
	29	Permanently restricted net assets	0	29	0	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
33	Total net assets or fund balances	213,631,993.	33	233,415,685.		
34	Total liabilities and net assets/fund balances.	429,213,107.	34	446,094,574.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	141,326,502.
2	Total expenses (must equal Part IX, column (A), line 25)	2	121,725,945.
3	Revenue less expenses. Subtract line 2 from line 1	3	19,600,557.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	213,631,993.
5	Net unrealized gains (losses) on investments	5	183,135.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	233,415,685.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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

SCHEDULE A
(Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		X
 - (ii) A family member of a person described in (i) above?

11g(ii)		X
---------	--	---
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

11g(iii)		X
----------	--	---
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

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

Section A. Public Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) - 90.94%; 15 Public support percentage from 2012 Schedule A, Part II, line 14 - 88.71%; 16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization [X]; 16b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 17b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business under section 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 15: Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2012 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 17: Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2012 Schedule A, Part III, line 17.

- 19a 33 1/3% support tests - 2013. 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 - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
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 **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2009	2010	2011	2012	2013	TOTAL
MISCELLANEOUS REVENUE	988,664.	412,467.	627,625.	154,904.	185,606.	2,369,266.
TOTALS	<u>988,664.</u>	<u>412,467.</u>	<u>627,625.</u>	<u>154,904.</u>	<u>185,606.</u>	<u>2,369,266.</u>

Schedule of Contributors

2013

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

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

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **LOCAL INITIATIVES SUPPORT CORPORATION**

Employer identification number
13-3030229

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	----- ----- -----	\$ 2,940,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	----- ----- -----	\$ 2,539,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	----- ----- -----	\$ 3,257,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	----- ----- -----	\$ 5,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	----- ----- -----	\$ 2,305,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	----- ----- -----	\$ 8,692,472.	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 I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	----- ----- -----	\$ 2,885,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	----- ----- -----	\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	----- ----- -----	\$ 4,090,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

Name of organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
--	--

Part III **Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.** 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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
--	---

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(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) 2013

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	147,758.	147,758.
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	491,772.	491,772.
c	Total lobbying expenditures (add lines 1a and 1b)	639,530.	639,530.
d	Other exempt purpose expenditures	121,086,415.	121,086,415.
e	Total exempt purpose expenditures (add lines 1c and 1d)	121,725,945.	121,725,945.
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	1,000,000.
If the amount on line 1e, column (a) or (b) is:		The lobbying nontaxable amount is:	
Not over \$500,000		20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000		\$1,000,000.	
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	250,000.
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0	0
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0	0
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total	
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c	Total lobbying expenditures	575,534.	638,681.	512,477.	639,530.	2,366,222.
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f	Grassroots lobbying expenditures	156,615.	190,941.	146,752.	147,758.	642,066.

Schedule C (Form 990 or 990-EZ) 2013

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 columns for (a) Yes/No and (b) Amount. Rows include questions about lobbying activities like influencing legislation, using volunteers, paid staff, media, mailings, publications, grants, and direct contact with legislators.

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 columns for Yes/No. Rows include questions about dues received, in-house lobbying expenditures, and carryover of lobbying and political expenditures.

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 columns for Yes/No. Rows include questions about dues from members, nondeductible lobbying and political expenditures, and carryover of nondeductible lobbying and political expenditures.

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, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

Series of horizontal dashed lines provided for entering supplemental information.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

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

2013

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization: LOCAL INITIATIVES SUPPORT CORPORATION; Employer identification number: 13-3030229

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for totals. Rows 5-6 for questions about donor information.

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

Questions 1-9 regarding conservation easements, including checkboxes for purposes and monitoring details.

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

Questions 1a-2 regarding reporting requirements for art and historical treasures.

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

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

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

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

Table with columns for Amount and rows for 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21?

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

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

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

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

- a Board designated or quasi-endowment, b Permanent endowment, c Temporarily restricted endowment

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

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

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

Table with columns Yes, No and rows 3a(i), 3a(ii), 3b.

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with columns (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value and rows for 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other, Total.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) LOANS TO COMMUNITY	137,473,490.	COST
(2) DEVELOPMENT PROJECTS		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ 137,473,490.

Part IX Other Assets.

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

ATTACHMENT 1	(a) Description	(b) Book value
(1)	ACCRUED INTEREST RECEIVABLE	1,042,051.
(2)	DUE FROM AFFILIATES	1,991,703.
(3)	SPONSORED PROJECTS	5,429,362.
(4)	OTHER ASSETS	66,226.
(5)	INVESTMENT IN AFFILIATES	52,365,401.
(6)	OTHER RECEIVABLES	1,418,528.
(7)	FEE RECEIVABLE	1,092,905.
(8)	NOTE RECEIVABLE	729,411.
(9)	VALUE OF INVESTMENT SWAP AGRMT	31,080.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 65,595,667.

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DUE TO AFFILIATES	1,180,697.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 1,180,697.

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 XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

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 GENERATED UNRELATED BUSINESS TAXABLE INCOME FOR THE YEAR ENDED DECEMBER 31, 2013.

SUPPLEMENTAL INFORMATION 2

SCHEDULE D, PART XI, LINE 2D

RECLASSIFICATION OF RENTAL EXPENSES 185,801

SCHEDULE D, PART XI, LINE 4B

LINE 4B CONSISTS OF REVENUE TOTALING \$ 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 = \$7,767,178

LISC LOUISIANA LOAN FUND, LLC = \$92,184

LISC COOK COUNTY HOUSING PRESERVATION LLC = \$16,528

NEIGHBORHOOD REVITALIZATION NYC LLC = \$14,656,258

NEIGHBORHOOD PROPERTIES, LLC = \$167,033

REDUCTION IN REVENUE DUE TO ELIMINATION ENTRIES FROM TRANSACTIONS AMONG DISREGARDED ENTITIES = \$(4,952,553)

TOTAL = \$17,746,628

Part XIII Supplemental Information (continued)

SUPPLEMENTAL INFORMATION 3

SCHEDULE D, PART XII, LINE 2D

RECLASSIFICATION OF RENTAL EXPENSES \$185,801

SCHEDULE D, PART XII, LINE 4B

LINE 4B CONSISTS OF EXPENSES TOTALING \$ 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 = \$7,525,035

LISC LOUISIANA LOAN FUND, LLC = \$20,447

LISC COOK COUNTY HOUSING PRESERVATION LLC = \$51,802

NEIGHBORHOOD REVITALIZATION NYC LLC = \$14,655,758

NEIGHBORHOOD PROPERTIES, LLC = \$418,054

REDUCTION IN REVENUE DUE TO ELIMINATION ENTRIES FROM TRANSACTIONS AMONG

DISREGARDED ENTITIES = \$(4,924,469)

TOTAL = \$17,746,627

ATTACHMENT 1

SCHEDULE D, PART IX - OTHER ASSETS

DESCRIPTION

BOOK VALUE

GUARANTEE

1,429,000.

TOTALS

65,595,667.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2013

Open to Public Inspection

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

LOCAL INITIATIVES SUPPORT CORPORATION

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 region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		5,166,628.
(2) EUROPE			INVESTMENTS		5,320,602.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total,					10,487,230.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					10,487,230.

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

Schedule F (Form 990) 2013

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 non-cash assistance	(h) Description of non-cash 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 non-cash assistance	(g) Description of non-cash 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 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)* 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Part V Supplemental Information

Complete this part to 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).

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Part I 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 ten 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 NATIONAL COMMUNITY DEVELOPMENT SERVICES INC.	FUNDRAISING CAMPAIGN		X		15,000.	
2 DAVID PIERSON	FUNDRAISING PLAN		X		7,187.	
3 DEBORAH MAROTTA SCHWAN CONSU	GRANT WRITING		X		24,188.	
4 DRAPER CONSULTING GROUP	FUNDRAISING PLAN		X		22,786.	
5 LINDA LANIER	FUNDRAISING PLAN		X		19,625.	
6 SUSAN WEBBER	FUNDRAISING PLAN		X		15,719.	
7 MARTHA BERNICKER	FUNDRAISING RESEARCH		X		12,500.	
8 THE FINAL DRAFT WRITING SERV	GRANT WRITING		X		40,008.	
9 MARILYNN MCATEER	FUNDRAISING PLAN		X		5,000.	
10						
Total					162,013.	

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,

Schedule G (Form 990 or 990-EZ) 2013

Part II Fundraising Events. Complete if the organization answered "Yes" to 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	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				
	11	Net income summary. Subtract line 10 from line 3, column (d) ▶				

Part III Gaming. Complete if the organization answered "Yes" to 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))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain: _____

10 a 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 operate 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 operated 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 complete this part to provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

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

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

Employer identification number

13-3030229

Name of the organization
LOCAL INITIATIVES SUPPORT CORPORATION

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) SAFE COMMUNITY DEVELOPMENT 111 DIVISION STREET NEW YORK, NY 10002	13-4103352	501(C)(3)	213,000.				SEE PART IV
(2) ACADEMY OF HOPE 601 EDGEWOOD STREET WASHINGTON, DC 20017	52-1730021	501(C)(3)	15,000.				SEE PART IV
(3) A COMMUNITY OF FRIENDS 3701 WILSHIRE BLVD. LOS ANGELES, CA 90010	95-4203106	501(C)(3)	40,000.				SEE PART IV
(4) ACTION FOR BOSTON COMMUNITY 178 TREMONT STREET BOSTON, MA 02111	04-2304133	501(C)(3)	148,313.				SEE PART IV
(5) ACTS COMMUNITY DEVELOPMENT CORPORATION ST. MICHAEL'S CHURCH MILWAUKEE, WI 53205	39-1837474	501(C)(3)	40,000.				SEE PART IV
(6) ADAMS BROWN COUNTIES ECONOMIC 406 WEST PLUM STREET GEORGETOWN, OH 45121	31-0710683	501(C)(3)	35,000.				SEE PART IV
(7) AEON HOMES 901 NORTH 3RD STREET MINNEAPOLIS, MN 55401	41-1558711	501(C)(3)	125,000.				SEE PART IV
(8) ALLIANCE FOR MULTICULTURAL COMMUNITY SVCS 6440 HILLCROFT HOUSTON, TX 77081	76-0171217	501(C)(3)	133,000.				SEE PART IV
(9) AMERICAN INDIAN COMMUNITY DVP CORPORATION 1508 E FRANKLIN AVE. MINNEAPOLIS, MN 55404	41-1716667	501(C)(3)	62,500.				SEE PART IV
(10) ANMHERST H. WILDER FOUNDATION 451 LEXINGTON PARKWAY N ST. PAUL, MN 55104	41-0693889	501(C)(3)	6,000.				SEE PART IV
(11) AMOS HOUSE P.O. BOX 72873 PROVIDENCE, RI 02907	05-0387218	501(C)(3)	192,642.				SEE PART IV
(12) ARKANSAS COALITION OF HSG & NGHBORHOOD HSG P.O. BOX 3615 LITTLE ROCK, AR 72202	20-4812245	501(C)(3)	10,000.				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) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) ASIAN AMERICANS FOR EQUALITY 108 NORFOLK STREET NEW YORK, NY 10002	13-3187792	501(C)(3)	75,000.				SEE PART IV
(2) ASOCIACION DE PUERTORRIQUENOS 4301 RISING SUN AVE PHILADELPHIA, PA 19140	23-1930630	501(C)(3)	293,576.				SEE PART IV
(3) ATELLA DEVELOPMENT CORP. 1618 MERMAID AVENUE BROOKLYN, NY 11224	11-2458675	501(C)(3)	120,000.				SEE PART IV
(4) AILAS PERFORMING ARTS CENTER 1333 H STREET NE WASHINGTON, DC 20002	52-2358563	501(C)(3)	15,000.				SEE PART IV
(5) AURORA FAMILY SERVICE, INC. 3200 W HIGHLAND BLVD. MILWAUKEE, WI 53208	39-0805174	501(C)(3)	15,000.				SEE PART IV
(6) AURORA/ST. ANTHONY NEIGHBORHOOD DVLP CORP. 774 UNIVERSITY AVE W. ST. PAUL, MN 55104	41-1432372	501(C)(3)	102,075.				SEE PART IV
(7) AUSTIN COMING TOGETHER 5049 W. HARRISON STREET CHICAGO, IL 60604	45-0920919	501(C)(3)	69,000.				SEE PART IV
(8) AVENUE COMMUNITY DEVELOPMENT CORPORATION 2505 WASHINGTON AVE. HOUSTON, TX 77007	76-0380602	501(C)(3)	446,887.				SEE PART IV
(9) AVONDALE COMPREHENSIVE DVLPMT. 3494 READING ROAD CINCINNATI, OH 45229	45-2412695	501(C)(3)	293,235.				SEE PART IV
(10) BACK OF THE YARDS NEIGHBORHOOD COUNCIL 1751 W. 47TH STREET CHICAGO, IL 60609	36-2079600	501(C)(3)	116,177.				SEE PART IV
(11) BALTIMORE CURRICULUM PROJECT 2707 E. FAYETTE STREET BALTIMORE, MD 21227	52-1961406	501(C)(3)	200,000.				SEE PART IV
(12) BAME RENAISSANCE COMMUNITY DVLP CORPORATION 3085 K. STREET SAN DIEGO, CA 92102	33-0677938	501(C)(3)	67,118.				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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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

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

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) BANANA KELLY COMMUNITY IMPROVEMENT 863 PROSPECT AVENUE BRONX, NY 10459	13-2934000	501(C)(3)	89,500.				SEE PART IV
(2) BAY AREA COMMUNITY RESOURCES 171 CARLOS DRIVE SAN RAFAEL, CA 94903	94-2346815	501(C)(3)	114,642.				SEE PART IV
(3) BAYSIDE COMMUNITY CENTER 2202 COMSTOCK STREET SAN DIEGO, CA 92111	95-1652902	501(C)(3)	50,000.				SEE PART IV
(4) BEACON INTERFAITH HOUSING COLLABORATIVE 2610 UNIVERSITY AVE. W. ST PAUL, MN 55114	41-1953599	501(C)(3)	55,000.				SEE PART IV
(5) BEDFORD STUYVESANT RESTORATION CORPORATION 276 FIFTH AVENUE NEW YORK, NY 10001	11-6083182	501(C)(3)	211,500.				SEE PART IV
(6) BELMONT HOUSING RESOURCES OF WYN 1195 MAIN STREET BUFFALO, NY 14209	16-1080227	501(C)(3)	54,500.				SEE PART IV
(7) BETTER HOUSING COALITION 23 WEST BROAD STREET RICHMOND, VA 23220	54-1479059	501(C)(3)	125,000.				SEE PART IV
(8) BEULAH LAND DEVELOPMENT CORP 772 ORCHARD STREET NEW HAVEN, CT 06511	06-1419774	501(C)(3)	40,000.				SEE PART IV
(9) BICKERDIKE REDEVELOPMENT CORPORATION 2550 WEST NORTH AVENUE CHICAGO, IL 60647	23-7087890	501(C)(3)	200,000.				SEE PART IV
(10) BLUE HILLS COMMUNITY SERVICES 3101 BROADWAY KANSAS CITY, MO 64111	51-0141323	501(C)(3)	124,789.				SEE PART IV
(11) BOARD OF TRUSTEES OF THE UNIV. OF ILLINOIS 809 SOUTH MARSHFIELD AVE M/C 551	37-6000511	501(C)(3)	145,000.				SEE PART IV
(12) BOYS & GIRLS CLUB OF GREATER PEORIA 806 E KANSAS STREET PEORIA, IL 80204	37-0800010	501(C)(3)	20,000.				SEE PART IV

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**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

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(1) BOYS & GIRLS CLUB OF METRO DENVER 2017 WEST 9TH AVENUE DENVER, CO 33313	84-0510404	501(C)(3)	50,000.				SEE PART IV
(2) BOYS & GIRLS CLUB OF MIAMI-DADE INC. 2805 SW 32 AVE MIAMI, FL 33313	59-0879227	501(C)(3)	200,000.				SEE PART IV
(3) BOYS & GIRLS CLUB OF THE EAST VALLEY 1405 E. GUADALUPE ROAD TEMPE, AZ 85283	86-0550646	501(C)(3)	200,000.				SEE PART IV
(4) BOYS & GIRLS CLUB OF GREATER KALAMAZOO 915 LAKE STREET KALAMAZOO, MI 49001	38-1627080	501(C)(3)	8,800.				SEE PART IV
(5) BOYS L GIRLS, ADULT COMMUNITY HIGHWAY 49, BLDG, 306 MARVELL, AZ 72366	71-0540330	501(C)(3)	67,308.				SEE PART IV
(6) BREAKTHROUGH URBAN MINISTRIES 402 N. ST. LOUIS AVE. CHICAGO, IL 60624	36-3810926	501(C)(3)	64,200.				SEE PART IV
(7) BRIDGEPOST NEIGHBORHOOD TRUST 240 FAIRFIELD AVENUE BRIDGEPORT, CT 06604	22-2809353	501(C)(3)	79,900.				SEE PART IV
(8) BRIGHTON CENTER, INC. 741 CENTRAL AVE. NEWPORT, KY 41072	61-0673886	501(C)(3)	145,000.				SEE PART IV
(9) BRIGHTON NEIGHBORHOOD ASSOC. 1002 BRIGHTON BEACH AVE BROOKLYN, NY 11223	11-2435523	501(C)(3)	75,000.				SEE PART IV
(10) BRIGHTON PARK NEIGHBORHOOD COUNCIL 4477 S. ARCHER AVENUE CHICAGO, IL 60632	36-4229387	501(C)(3)	200,000.				SEE PART IV
(11) BUILD WEALTH MN., INC. 2100 PLYMOUTH AVE., MINNEAPOLIS, MN 55411	25-1918239	501(C)(3)	7,500.				SEE PART IV
(12) BUILD INC. 5100 W HARRISON STREET CHICAGO, IL 60644	23-7022085	501(C)(3)	7,500.				SEE PART IV

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Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
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Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
<u>(1)</u> BUILDING BRIDGES ACROSS THE RIVER 1901 MISSISSIPPI AVE. WASHINGTON, DC 20020	52-2013526	501(C)(3)	100,000.				SEE PART IV
<u>(2)</u> BURLIGH STREET COMMUNITY DEVLPMT 4630 WEST BURLEIGH ST. MILWAUKEE, WI 53210	39-1980202	501(C)(3)	10,100.				SEE PART IV
<u>(3)</u> CABRILLO ECONOMIC DEVELOPMENT CORP. 702 COUNTY SQUARE DRIVE VENTURA, CA 93003	95-3681521	501(C)(3)	35,000.				SEE PART IV
<u>(4)</u> CAPITOL HILL HOUSING IMPROVEMENT PROGRAM 1406 10TH AVE. SEATTLE, WA 98122	91-0979968	GOVERNMENT	26,896.				SEE PART IV
<u>(5)</u> CATALYTIC DEVELOPMENT FUNDING CORP. 50 E. RIVERCENTER BLVD. COVINGTON, KY 41011	26-3389252	501(C)(3)	114,000.				SEE PART IV
<u>(6)</u> CATHOLIC BISHOP OF CHICAGO-ST. SABINA EMPLOY 7909 S. RACINE AVENUE CHICAGO, IL 60620	36-2171123	501(C)(3)	121,514.				SEE PART IV
<u>(7)</u> CATHOLIC FAMILY SERVICES 1819 GULL ROAD KALAMAZOO, MI 49048	38-2072348	501(C)(3)	20,000.				SEE PART IV
<u>(8)</u> CENTER FOR CHANGING LIVES 3051 W ARMITAGE AVE. CHICAGO, IL 60647	36-3731388	501(C)(3)	65,212.				SEE PART IV
<u>(9)</u> CENTER FOR GREAT NEIGHBORHOODS OF COVINGTON 1650 RUSSELL STREET COVINGTON, KY 41011	61-0733046	501(C)(3)	283,493.				SEE PART IV
<u>(10)</u> CENTER FOR RURAL STRATEGIES 46 EAST MAIN STREET WHITESBURG, KY 41858	61-1379952	501(C)(3)	10,000.				SEE PART IV
<u>(11)</u> CENTERSPACE, INC. AVANT BLDG 200 DE AVE. BUFFALO, NY 14202	46-0526955	501(C)(3)	23,300.				SEE PART IV
<u>(12)</u> CENTRAL DETROIT CHRISTIAN CDC 8840 SECOND AVENUE DETROIT, MI 48202	38-3128822	501(C)(3)	46,000.				SEE PART IV

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Internal Revenue Service

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(1) CENTRAL MISSOURI COMMUNITY ACTION 807-B NO. PROVIDENCE RD. COLUMBIA, MO 65203	43-0835026	501(C)(3)	357,000.				SEE PART IV
(2) CENTRAL STATES SER-JOBS FOR PROGRESS 3948 WEST 26TH STREET CHICAGO, IL 60623	36-1211270	501(C)(3)	183,212.				SEE PART IV
(3) CENTRO DE SALUD Y ESPERANZA 2001 S. CALIFORNIA AVE. CHICAGO, IL 60608	32-0115907	501(C)(3)	145,000.				SEE PART IV
(4) CHICAGO CHINATOWN CHAMBER OF COMM. 2169B S. CHINA PLACE CHICAGO, IL 60616	36-3247060	C CORP	9,500.				SEE PART IV
(5) CHICAGO COMMONS ASSOC. 515 EAST 50TH STREET CHICAGO, IL 60615	36-2169136	501(C)(3)	194,392.				SEE PART IV
(6) CHICAGO MEN IN ACTION P.O. BOX 10738 CHICAGO, IL 60610	27-1060296	501(C)(3)	7,420.				SEE PART IV
(7) CHICAGO NEIGHBORHOOD INITIATIVES 1000 E. 111TH STREET CHICAGO, IL 60628	27-1832686	501(C)(3)	67,391.				SEE PART IV
(8) CHICAGO REHAB NETWORK 53 W. JACKSON ST. CHICAGO, IL 60604	36-2928136	501(C)(3)	25,000.				SEE PART IV
(9) CHINATOWN COMMUNITY DEVELOPMENT CENTER 1525 GRANT AVE SAN FRANCISCO, CA 94133	94-2514053	501(C)(3)	135,875.				SEE PART IV
(10) CHINESE COMMUNITY CENTER 9800 TOWN PARK DRIVE HOUSTON, TX 77036	76-0067885	501(C)(3)	56,682.				SEE PART IV
(11) CHRISTIAN ACTIVITIES COUNCIL 47 VINE STREET HARTFORD, CT 06112	06-0689693	501(C)(3)	104,600.				SEE PART IV
(12) CHURCH COMMUNITY HOUSING CORPORATION 50 WASHINGTON SQUARE NEWPORT, RI 02840	05-0343709	501(C)(3)	60,000.				SEE PART IV

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Schedule I (Form 990) (2013)

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Department of the Treasury
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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 non-cash assistance	(h) Purpose of grant or assistance
(1) CHWC, INC. 2 SOUTH 14TH STREET KANSAS CITY, KS 66102	48-0934993	501(C)(3)	96,824.				SEE PART IV
(2) CINCINNATI WORKS 708 WALNUT STREET CINCINNATI, OH 45202	31-1656186	501(C)(3)	100,000.				SEE PART IV
(3) CITIZENS HOUSING & PLANNING COUNCIL 42 BROADWAY NEW YORK, NY 10004	13-1782468	501(C)(3)	7,250.				SEE PART IV
(4) CITY OF ATTLEBORO 100 RATHBURN WILLARD DRIVE	04-6001378	GOVERNMENT	200,000.				SEE PART IV
(5) CITY OF KALAMAZOO 150 E. CROSSTOWN PKWY. KALAMAZOO, MI 49001	38-6004627	GOVERNMENT	10,500.				SEE PART IV
(6) CITY SCHOOL DIST. OF THE CITY OF NIAGARA FALLS 4455 PORTER ROAD NIAGARA FALLS, NY 14305	16-6001929	GOVERNMENT	200,000.				SEE PART IV
(7) CITY VISION INC. 726 ARMSTRONG AVE. KANSAS CITY, KS 66101	48-1123337	501(C)(3)	31,000.				SEE PART IV
(8) CLARA WHITE MISSION INC. 613 WEST ASHLEY ST. JACKSONVILLE, FL 32202	59-6002104	501(C)(3)	38,001.				SEE PART IV
(9) CLARETIAN ASSOCIATES 9108 S. BRANDON AVENUE CHICAGO, IL 60617	36-4087259	501(C)(3)	149,500.				SEE PART IV
(10) CLOUDBREAK, LLC 4640 MAIN STREET HOUSTON, TX 77002	14-1876177	LLC	500,000.				SEE PART IV
(11) COALITION FOR NONPROFIT HOUSING & ECONOMIC 1432 U STREET NW WASHINGTON, DC 20009	52-1750323	501(C)(3)	5,192.				SEE PART IV
(12) COALITION FOR RESPONSIBLE COMMUNITY DEVELOPMENT 3101 SOUTH GRAND AVE LOS ANGELES, CA 90007	20-2445113	501(C)(3)	20,965.				SEE PART IV

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(1) CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORP 587 WASHINGTON STREET DORCHESTER, MA 02124	04-2752507	501(C)(3)	185,200.				SEE PART IV
(2) COLLABORATIVE FOR CHILDREN 1111 NORTH LOOP WEST HOUSTON, TX 77008	76-0228065	501(C)(3)	5,350.				SEE PART IV
(3) COMMON GROUND INC. 1034 EAST OGDEN AVE. MILWAUKEE, WI 53202	20-1545635	501(C)(3)	300,000.				SEE PART IV
(4) COMMON PLACE, INC. 514 S. SHELLEY STREET PEORIA, IL 61605	37-0918811	501(C)(3)	23,597.				SEE PART IV
(5) COMMONBOND COMMUNITIES 328 W. KELLOGG BLVD. ST. PAUL, MN 55102	41-1260469	501(C)(3)	158,928.				SEE PART IV
(6) COMUNIDADES LATINAS UNIDAS EN SERVICIO 797 EAST 7TH STREET ST PAUL, MN 55106	41-1388986	501(C)(3)	140,290.				SEE PART IV
(7) COMMUNITIES FIRST, INC. 310 E. THIRD STREET FLINT, MI 48502	27-3600343	501(C)(3)	25,000.				SEE PART IV
(8) COMMUNITY ACTION DULUTH 2424 W. 5TH STREET DULUTH, MN 55806	41-1410670	501(C)(3)	223,742.				SEE PART IV
(9) COMMUNITY COALITION FOR SUBSTANCE ABUSE 8101 S. VERMONT AVE. LOS ANGELES, CA 90044	95-4298811	501(C)(3)	30,000.				SEE PART IV
(10) COMMUNITY COUNSELING CENTERS 4740 N. CLARK CHICAGO, IL 60604	23-7115384	501(C)(3)	9,000.				SEE PART IV
(11) COMMUNITY DESIGN COLLABORATIVE 1216 ARCH STREET PHILADELPHIA, PA 19107	23-2835435	501(C)(3)	25,000.				SEE PART IV
(12) COMMUNITY ECONOMIC DEVELOPMENT 1118 S WASHINGTON AVE. LANSING, MI 48910	38-3445097	501(C)(3)	48,250.				SEE PART IV

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(1) COMMUNITY HOUSING DEPT. OF NORTH RICHMOND 1535-A FRED JACKSON WAY RICHMOND, CA 94801	68-0235719	501(C)(3)	37,222.				SEE PART IV
(2) COMMUNITY HOUSING IMPROVEMENT 1001 WILLOW STREET CHICO, CA 95928	94-2223398	501(C)(3)	30,500.				SEE PART IV
(3) COMMUNITY HOUSING WORKS 4305 UNIVERSITY AVE. SAN DIEGO, CA 92105	33-0317950	501(C)(3)	20,000.				SEE PART IV
(4) COMMUNITY OF HOPE INC. 1717 MA AVE. NW WASHINGTON, DC 20036	52-1184749	501(C)(3)	25,000.				SEE PART IV
(5) COMMUNITY PARTNERS 1000 N ALAMEDA ST. LOS ANGELES, CA 90012	95-4302067	501(C)(3)	15,000.				SEE PART IV
(6) COMMUNITY STABILIZATION PROJECT 501 N DALE STREET ST. PAUL, MN 55104	41-1729493	501(C)(3)	22,500.				SEE PART IV
(7) COMMUNITY WORKS RHODE ISLAND 693 BROAD STREET PROVIDENCE, RI 02907	05-0376759	501(C)(3)	40,000.				SEE PART IV
(8) COMPASS HOUSING ALLIANCE 77 SOUTH WASHINGTON ST SEATTLE, WA 98104	91-0578229	501(C)(3)	30,000.				SEE PART IV
(9) CONCERN FOR INDEPENDENT LIVING 312 EXPRESSWAY DRIVE SOUTH	23-7259687	501(C)(3)	85,000.				SEE PART IV
(10) CONTRA COSTA REGIONAL HEALTH FOUNDATION 50 DOUGLAS DRIVE #310A MARTINEZ, CA 94553	20-0555977	501(C)(3)	7,900.				SEE PART IV
(11) CORRIDOR PLAZA LLC 1625 ENERGY PARK DRIVE ST. PAUL, MN 55108	26-2731722	LLC	10,000.				SEE PART IV
(12) CRIPPTON CENTERS 442 W JOHN H GMYNN JR. AVE PEORIA, IL 61605	37-0661506	501(C)(3)	20,000.				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) (2013)

**SCHEDULE I
(Form 990)**

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

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) CROOKED CREEK CDC 7003B N MICHIGAN RD. INDIANAPOLIS, IN 46268	35-2110841	501(C)(3)	23,362.				SEE PART IV
(2) CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION 625 JAMAICA AVENUE BROOKLYN, NY 11208	11-2683663	501(C)(3)	362,145.				SEE PART IV
(3) DANE COUNTY TIMEBANK, INC 1202 WILLIAMSON STREET MADISON, WI 53703	20-3307122	501(C)(3)	15,000.				SEE PART IV
(4) DAYTON'S BLUFF NEIGHBORHOOD HOUSING 823 EAST SEVENTH STREET ST. PAUL, MN 55106	41-1386097	501(C)(3)	50,000.				SEE PART IV
(5) DC PARKSIDE-KENIMORTH PROMISE NBRHD, INC. 709 12TH STREET SE WASHINGTON, DC 20003	27-0675043	501(C)(3)	102,500.				SEE PART IV
(6) DELTA COMMUNITY DVLPMT & LAW CTR. 10515 WEST MARKHAM LITTLE ROCK, AR 72205	27-0598497	501(C)(3)	32,000.				SEE PART IV
(7) DELTA HOUSING DEVELOPMENT CORP. 325 HIGHWAY 82 E INDIANOLA, MS 38751	64-0508153	501(C)(3)	16,500.				SEE PART IV
(8) DEPAUL UNIVERSITY 1 E. JACKSON BLVD. C-111 CHICAGO, IL 60604	36-2167048	501(C)(3)	18,979.				SEE PART IV
(9) DESERT MISSION NEIGHBORHOOD RENEWAL 9201 N. 5TH STREET PHOENIX, AZ 85020	86-0746598	501(C)(3)	19,850.				SEE PART IV
(10) DETROIT LAND BANK AUTHORITY 65 CADILLAC SQUARE DETROIT, MI 48226	27-1170869	GOVERNMENT	20,000.				SEE PART IV
(11) DINING DIALOG, INC 1260 IROQUOIS AVE NAPERVILLE, IL 60563	61-1615174	C CORP	11,906.				SEE PART IV
(12) DISTRICT OF COLUMBIA GRASSROOT EMPLOYMENT 1419 V STREEY NW WASHINGTON, DC 20009	27-2623232	501(C)(3)	8,000.				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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Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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Employer identification number

13-3030229

LOCAL INITIATIVES SUPPORT CORPORATION

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

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 non-cash assistance	(h) Purpose of grant or assistance
<u>(1)</u> DOUGLASS COMMUNITY ASSOC. 1000 W. PATERSON ST. KALAMAZOO, MI 49007	38-1359200	501(C)(3)	140,000.				SEE PART IV
<u>(2)</u> DOWNTOWN STREETS INC. 1671 THE ALAMEDA SAN JOSE, CA 95126	20-5242330	501(C)(3)	15,000.				SEE PART IV
<u>(3)</u> DOWNTOWN TOMORROW INC. 141 EAST MICHIGAN ST. KALAMAZOO, MI 49007	38-2513286	501(C)(3)	18,000.				SEE PART IV
<u>(4)</u> DUOS LLC 2960 N. MERIDIAN ST. INDIANAPOLIS, IN 46208	27-3910458	LLC	15,000.				SEE PART IV
<u>(5)</u> EARTH ISLAND INSTITUTE 2150 ALLISON WAY BERKELEY, CA 94704	94-2889694	501(C)(3)	5,500.				SEE PART IV
<u>(6)</u> EAST 10TH STREET CIVIC ASSOCIATION 2236 EAST 10TH ST INDIANAPOLIS, IN 46201	14-1857868	501(C)(3)	27,721.				SEE PART IV
<u>(7)</u> EAST BAY ASIAN LOCAL DEVELOPMENT CORP. 310 8TH STREET OAKLAND, CA 94607	51-0171851	501(C)(3)	90,000.				SEE PART IV
<u>(8)</u> EAST BAY ASIAN YOUTH CENTER 2025 EAST 12TH ST. OAKLAND, CA 94606	94-2925799	501(C)(3)	171,935.				SEE PART IV
<u>(9)</u> EAST BAY CENTER FOR THE PERFORMING ARTS 339 11TH STREET RICHMOND, CA 94801	94-1692171	501(C)(3)	8,934.				SEE PART IV
<u>(10)</u> EAST BAY COMMUNITY ACTION PROGRAM 19 BROADWAY NEWPORT, RI 02840	05-0310024	501(C)(3)	5,134.				SEE PART IV
<u>(11)</u> EAST PLUFF NEIGHBORHOOD HSG. SVCS. 1839 N. WISCONSIN AVE. PEORIA, IL 61603	37-1192779	501(C)(3)	12,500.				SEE PART IV
<u>(12)</u> EAST LA COMMUNITY CORP. 530 SOUTH BOYLE AVE LOS ANGELES, CA 90033	95-4531076	501(C)(3)	80,817.				SEE PART IV

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

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For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2013)**

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1) EAST LIBERTY DVLPMT. INC. 100 SHERIDAN SQUARE PITTSBURGH, PA 15206	25-1370668	501(C)(3)	65,000.				SEE PART IV
(2) EAST SIDE NEIGHBORHOOD DVLPMT. CO. 925 PAYNE AVENUE ST. PAUL, MN 55130	41-1367503	501(C)(3)	33,000.				SEE PART IV
(3) EAST TOLEDO FAMILY CENTER 1020 VARLAND AVENUE TOLEDO, OH 43605	34-4429426	501(C)(3)	50,000.				SEE PART IV
(4) ECOLIPIRIUM3 2304 W. SUPERIOR ST. DULUTH, MN 55806	45-2746481	501(C)(3)	46,500.				SEE PART IV
(5) ECONOMIC & COMM. DVLPMT. INST. 1655 OLD LEOPARD AVE COLUMBUS, OH 43219	31-1145544	501(C)(3)	25,000.				SEE PART IV
(6) EDISON COMMUNITY & SPORTS EDNTR. P.O. BOX 68032 MINNEAPOLIS, MN 55418	36-3318601	501(C)(3)	100,000.				SEE PART IV
(7) EDISON NEIGHBORHOOD ASSOCIATION 816 WASHINGTON AVE KALAMAZOO, MI 49001	38-2108671	501(C)(3)	40,000.				SEE PART IV
(8) EDWARD WATERS COLLEGE 1638 KINGS RD. JACKSONVILLE, FL 32209	59-1146751	501(C)(3)	28,937.				SEE PART IV
(9) EL CAJON BLVD BUSINESS IMPROVEMENT ASSN 3727 EL CAJON BOULEVARD SAN DIEGO, CA 92105	33-0356595	501(C)(6)	26,000.				SEE PART IV
(10) ELDERHOMES CORPORATION 88 CARNATION STREET RICHMOND, VA 23225	54-1595851	501(C)(3)	40,000.				SEE PART IV
(11) EMERGE COMMUNITY DEVELOPMENT CORPORATION 1101 W BDMAY AVE. N. MINNEAPOLIS, MN 55411	41-1277423	501(C)(3)	155,200.				SEE PART IV
(12) EMPOWERMENT PROGRAM, INC. 1600 YORK STREET DENVER, CO 80206	74-2377531	501(C)(3)	65,000.				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) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

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Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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Department of the Treasury
Internal Revenue Service

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) ENGLEWOOD COMMUNITY DEVELOPMENT CORP. 57 N. RURAL STREET INDIANAPOLIS, IN 46201	35-2003744	501(C)(3)	68,967.				SEE PART IV
(2) ERA VINTAGE 608 NORTH 24TH STREET RICHMOND, VA 23223	45-4680497	LLC	10,000.				SEE PART IV
(3) ERIE FAMILY HEALTH CENTER 1701 WEST SUPERIOR CHICAGO, IL 60622	36-3088628	501(C)(3)	38,000.				SEE PART IV
(4) ESPERANZA COMMUNITY HSG. CORP. 2337 S. FIGUEROA ST. LOS ANGELES, CA 90007	95-4230345	501(C)(3)	24,000.				SEE PART IV
(5) ESTHER STEWART FUFORD FOUNDATION 656 CENTER PARK LANE YAZOO CITY, MS 39194	64-0937063	501(C)(3)	16,500.				SEE PART IV
(6) EVERETT SCHOOL DISTRICT NO. 2 3900 BROADWAY EVERETT, WA 98207	91-6001542	GOVERNMENT	200,000.				SEE PART IV
(7) FALLBROOK UNION HIGH SCHOOL DIST. 2234 S. STAGECOACH LANE FALLBROOK, CA 92028	95-6001128	GOVERNMENT	50,000.				SEE PART IV
(8) FAMILY RESOURCES COMMUNITY ACTION 245 MAIN STREET WOONSOCKET, RI 02895	05-0259103	501(C)(3)	129,939.				SEE PART IV
(9) FAYETTE COUNTY COMMUNITY ACTION 108 NORTH BEESON AVE. UNIONTOWN, PA 15401	25-1180898	501(C)(3)	120,956.				SEE PART IV
(10) FELEGE HIWOT CENTER 1648 SHELDON STREET INDIANAPOLIS, IN 46218	20-0916223	501(C)(3)	5,400.				SEE PART IV
(11) FIFTH AVENUE COMMITTEE 621 DEGRAW STREET BROOKLYN, NY 11217	11-2475743	501(C)(3)	123,800.				SEE PART IV
(12) FLANNER HOUSE OF INDIANAPOLIS 2424 MARTIN L KING INDIANAPOLIS, IN 46208	35-0942628	501(C)(3)	178,997.				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) (2013)

**SCHEDULE I
(Form 990)**

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

13-3030229

Name of the organization
LOCAL INITIATIVES SUPPORT CORPORATION

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

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 non-cash assistance	(h) Purpose of grant or assistance
<u>(1)</u> FOCUS HOPE 1355 OAKMAN BLVD. DETROIT, MI 48238	38-1948285	501(C)(3)	270,993.				SEE PART IV
<u>(2)</u> FOREST MANOR MULTI-SERVICE CTR. 5603 EAST 38TH ST. INDIANAPOLIS, IN 46218	35-1420208	501(C)(3)	7,500.				SEE PART IV
<u>(3)</u> FOUR CORNERS MAIN STREET INC. P.O. BOX 240877 DORCHESTER, MA 02124	20-0862907	501(C)(3)	20,000.				SEE PART IV
<u>(4)</u> FRANKLIN COUNTY COMMUNITY DVLP CORPORATION 324 WELLS STREET GREENFIELD, MA 01301	04-2678309	501(C)(3)	35,000.				SEE PART IV
<u>(5)</u> FREE SPIRIT MEDIA 1327 W. WASHINGTON CHICAGO, IL 60607	36-4456215	501(C)(3)	10,000.				SEE PART IV
<u>(6)</u> FRUITFUL VENTURES, INC. 1803 W. BYRON STREET CHICAGO, IL 60613	36-4311449	S CORP.	8,100.				SEE PART IV
<u>(7)</u> FUTURE TIES, NFP 3935 W. 82ND STREET CHICAGO, IL 60652	27-5469921	501(C)(3)	8,500.				SEE PART IV
<u>(8)</u> GARDEN STATE CONSUMER CREDIT COUNSELING 225 WILLOWBROOK ROAD FREEHOLD, NJ 07728	22-3120920	501(C)(3)	14,800.				SEE PART IV
<u>(9)</u> GARFIELD PARK CONSERVATORY ALLIANCE 300 N. CENTRAL P' AVE., CHICAGO, IL 60624	36-4200490	501(C)(3)	181,895.				SEE PART IV
<u>(10)</u> GARRETT COUNTY COMMUNITY ACTION 104 EAST CENTER STREET OAKLAND, CA 21550	52-0820662	501(C)(3)	10,000.				SEE PART IV
<u>(11)</u> GIRLS IN THE GAME, NFP UNION PARK FIELDHOUSE CHICAGO, IL 60607	36-4024533	501(C)(3)	31,500.				SEE PART IV
<u>(12)</u> GOODCITY NFP 5049 W. HARRISON CHICAGO, IL 60644	36-3467921	501(C)(3)	9,108.				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)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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Department of the Treasury
 Internal Revenue Service
 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 non-cash assistance	(h) Purpose of grant or assistance
(1) GOODWILL INDUS CENTRAL MICHIGAN'S HEARTLAND 4820 WAYNE ROAD BATTLE CREEK, MI 49037	38-1424892	501(C)(3)	30,000.				SEE PART IV
(2) GOODWILL INDUSTRIES OF GREATER GRAND RAPIDS 3035 PRAIRIE ST., SW GRANDVILLE, MI 49418	38-6113049	501(C)(3)	30,000.				SEE PART IV
(3) GOODWILL INDUSTRIES OF SOUTHWEST MICHIGAN 420 EAST ALCOTT STREET KALAMAZOO, MI 49001	38-1588550	501(C)(3)	25,000.				SEE PART IV
(4) GOODWILL INDUSTRIES INC. 553 FAIRVIEW AVENUE N ST. PAUL, MN 55104	41-0706171	501(C)(3)	37,500.				SEE PART IV
(5) GRACE AND TRUTH COMMUNITY DEVELOPMENT CORPO 932 N SHORE DRIVE JACKSONVILLE, FL 32208	33-1020194	501(C)(3)	50,000.				SEE PART IV
(6) GRANDMONT ROSEDALE DEVELOPMENT CORPORATION 19800 GRAND RIVER DETROIT, MI 48223	38-2885952	501(C)(3)	324,700.				SEE PART IV
(7) GREATER AUBURN-GRESHAM DVLP CORPORATION 1159 WEST 79 STREET CHICAGO, IL 60620	36-4377387	501(C)(3)	615,261.				SEE PART IV
(8) GREATER HUMBOLDT PARK COMM OF WELLNESS 1116 N. KEDZIE AVENUE CHICAGO, IL 60651	36-2166961	501(C)(3)	23,248.				SEE PART IV
(9) GREATER SOUTHWEST DEVELOPMENT CORPORATION 2601 WEST 63RD STREET CHICAGO, IL 60629	36-2858304	501(C)(3)	168,325.				SEE PART IV
(10) GREEN WORKS IN KANSAS CITY 4334 MCGEE STREET KANSAS CITY, MO 64111	32-0195433	501(C)(3)	5,692.				SEE PART IV
(11) GRID ALTERNATIVES 1827 MAIN STREET SAN DIEGO, CA 92113	26-0043353	501(C)(3)	20,000.				SEE PART IV
(12) GROUNDWELL COMMUNITY MURAL PROJ 540 PRESIDENT STREET BROOKLYN, NY 11215	11-3427213	501(C)(3)	38,500.				SEE PART IV

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

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Schedule I (Form 990) (2013)

SCHEDULE I (Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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Department of the Treasury
 Internal Revenue Service

Name of the organization
 LOCAL INITIATIVES SUPPORT CORPORATION
 Employer identification number
 13-3030229

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Part I General Information on Grants and Assistance

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(1) GROVE HOUSE OF JACKSONVILLE 126 WEST ADAMS ST. JACKSONVILLE, FL 32202	59-3087085	501(C)(3)	80,000.				SEE PART IV
(2) GROWING HOME INC 2732 NORTH CLARK CHICAGO, IL 60614	36-3989426	501(C)(3)	20,000.				SEE PART IV
(3) HABITAT FOR HUMANITY - COASTAL FAIRFIELD CO 1470 BARNUM AVENUE BRIDGEPORT, CT 06610	22-2597077	501(C)(3)	17,500.				SEE PART IV
(4) HABITAT FOR HUMANITY/METRO JACKSON 1260 ELLIS AVENUE JACKSON, MS 39296	64-0750633	501(C)(3)	20,000.				SEE PART IV
(5) HAWAIIAN COMMUNITY ASSETS, INC 200 N. VINEYARD BLVD. HONOLULU, HI 96817	99-0348767	501(C)(3)	37,000.				SEE PART IV
(6) HAWTHORNE SOCIAL SERVICE ASSOCIATION INC 2440 WEST OHIO ST. INDIANAPOLIS, IN 46222	35-0874274	501(C)(3)	150,448.				SEE PART IV
(7) HEALTH PROMOTION COUNCIL OF SOUTHEASTERN PE 260 S BROAD STREET PHILADELPHIA, PA 19102	23-2182113	501(C)(3)	10,000.				SEE PART IV
(8) HELP USA, INC 5 HANOVER SQUARE NEW YORK, NY 10004	13-3922973	501(C)(3)	50,000.				SEE PART IV
(9) HENRY FORD COMMUNITY COLLEGE 5101 EVERGREEN ROAD DEARBORN, MI 48128	38-2421276	501(C)(3)	18,815.				SEE PART IV
(10) HIGHLAND COMMUNITY BUILDERS P.O. BOX 1577 ELKINS, WV 26241	20-3583045	501(C)(3)	34,000.				SEE PART IV
(11) HILLTOP ALLIANCE 512 BROWNVILLE ROAD PITTSBURGH, PA 15210	26-4521206	501(C)(3)	25,000.				SEE PART IV
(12) HISPANIC ASSOC. OF CONTRACTORS & ENTERPRISE 167 W ALLEGHENY AVE. PHILADELPHIA, PA 19140	23-2142317	501(C)(3)	15,000.				SEE PART IV

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

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

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

Department of the Treasury
Internal Revenue Service

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. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1) <u>HONG AMERICAN PARTNERSHIP</u> 1075 ARCADE STREET ST. PAUL, MN 55106	41-11667580	501(C)(3)	35,000.				SEE PART IV
(2) <u>HOME START INC.</u> 5005 TEXAS STREET SAN DIEGO, CA 92108	95-3138268	501(C)(3)	125,000.				SEE PART IV
(3) <u>HOMEFRONT INC.</u> 780 FILMORE STREET BUFFALO, NY 14212	16-1065303	501(C)(3)	45,000.				SEE PART IV
(4) <u>HOPE COMMUNITY INC.</u> 174 E. 104TH STREET NEW YORK, NY 10029	23-7013134	501(C)(3)	55,863.				SEE PART IV
(5) <u>HORN OF AFRICA COMMUNITY IN NORTH AMERICA</u> 5296 UNIVERSITY AVE. SAN DIEGO, CA 92105	33-0696380	501(C)(3)	12,000.				SEE PART IV
(6) <u>HOUSE OF HOPE CDC</u> 3188 POST ROAD WARWICK, RI 02886	05-0448151	501(C)(3)	55,000.				SEE PART IV
(7) <u>HOUSING ALLIANCE OF PENNSYLVANIA</u> 309 FLORENCE AVENUE, 914 N	23-2218001	501(C)(3)	6,000.				SEE PART IV
(8) <u>HOUSING & NEIGHBORHOOD DEVELOP SVCS</u> 15 SOUTH ESSEX AVENUE REAR ORANGE, NJ 07050	22-2712067	501(C)(3)	57,980.				SEE PART IV
(9) <u>HOUSING CALIFORNIA</u> 900 J STREET SACRAMENTO, CA 95814	68-0133565	501(C)(3)	7,500.				SEE PART IV
(10) <u>HOUSING RESOURCES INC. OF MILWAUKEE</u> 7830 W. BURLEIGH STREET MILWAUKEE, WI 53222	39-1706658	501(C)(3)	30,000.				SEE PART IV
(11) <u>HUMAN RESOURCE DEVELOPMENT CTR DISTRICT IX</u> 32 S. TRACY AVE. BOZEMAN, MT 59715	81-0350886	501(C)(3)	42,928.				SEE PART IV
(12) <u>HUMBOLDT PARK SOCIAL SERVICES</u> 2120 N. MOZART CHICAGO, IL 60647	36-3731388	501(C)(3)	130,000.				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) (2013)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) IMMIGRANTS' ASSISTANCE CENTER 58 CRAPO STREET NEW BEDFORD, MA 02740	04-2530908	501(C)(3)	15,000.				SEE PART IV
(2) IMPACT CAPITAL 401 SECOND AVENUE SOUTH SEATTLE, WA 98104	94-3196958	501(C)(3)	126,000.				SEE PART IV
(3) INDIANA ASSOC. OF UNITED WAYS 3901 N. MERDIAN STREET	35-1441961	501(C)(3)	34,000.				SEE PART IV
(4) INDIANAPOLIS PUBLIC SCHOOLS EDUCATION FDN 120 E. WALNUT STREET INDIANAPOLIS, IN 46204	31-1103966	501(C)(3)	5,400.				SEE PART IV
(5) INSTITUTO DEL PROGRESO LATINO 2520 S. WESTERN AVENUE CHICAGO, IL 60608	36-2937375	501(C)(3)	543,408.				SEE PART IV
(6) INTERCONGREGATION COMMUNITIES ASSOCIATION 12990 ST. DAVIDS ROAD MINNETONKA, MN 55345	41-0979010	501(C)(3)	52,500.				SEE PART IV
(7) INTERNATIONAL RESCUE COMMITTEE 5348 UNIVERSITY AVENUE SAN DIEGO, CA 92105	13-5660870	501(C)(3)	251,500.				SEE PART IV
(8) IRONBOUND COMMUNITY CORPORATION 179 VAN BUREN STREET NEWARK, NJ 07105	22-1916086	501(C)(3)	30,000.				SEE PART IV
(9) IRVINGTON DEVELOPMENT ORGANIZATION 338 S. ARLINGTON AVE INDIANAPOLIS, IN 46219	76-0716202	501(C)(3)	16,825.				SEE PART IV
(10) IVANHOE NEIGHBORHOOD COUNCIL 3700 WOODLAND KANSAS CITY, MO 64109	43-1843831	501(C)(3)	213,981.				SEE PART IV
(11) JANE ADAMS RESOURCE CORPORATION 4432 N. RAVENSWOOD AVE. CHICAGO, IL 60640	36-3682559	501(C)(3)	240,597.				SEE PART IV
(12) JEFFERSON EAST INC. 14628 E. JEFFERSON AVENUE DETROIT, MI 48215	38-3231066	501(C)(3)	15,000.				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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Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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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
- 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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1) JOHN H. BONER COMMUNITY CENTER 2236 EAST TENTH ST. INDIANAPOLIS, IN 46201	23-7204495	501(C)(3)	182,750.				SEE PART IV
(2) JOURNEY HOUSE, INC. 2110 W. SCOTT STREET MILWAUKEE, WI 53204	39-1203539	501(C)(3)	48,500.				SEE PART IV
(3) JUBILEE HOUSING INC. 1640 COLUMBIA ROAD NW WASHINGTON, DC 20009	52-0986261	501(C)(3)	25,000.				SEE PART IV
(4) JUSTINE PETERSEN HOUSING & REINVESTMENT COR. 1023 NORTH GRAND BLVD. ST. LOUIS, MO 63106	43-1769074	C CORP	20,000.				SEE PART IV
(5) JUXTAPPOSITION INC. 2007 EMERSON AVENUE N MINNEAPOLIS, MN 55411	41-1851915	501(C)(3)	45,000.				SEE PART IV
(6) KALAMAZOO COUNTY LAND BANK 201 WEST KALAMAZOO AVE. KALAMAZOO, MI 49007	27-0721363	GOVERNMENT	157,600.				SEE PART IV
(7) KALAMAZOO NEIGHBORHOOD HOUSING SVCS. 802 SOUTH WESTNEDGE AVE KALAMAZOO, MI 49008	38-2391442	501(C)(3)	45,000.				SEE PART IV
(8) KANSAS CITY METROPOLITAN CRIME COMMISSION 3100 BROADWAY KANSAS CITY, MO 64111	44-0540176	501(C)(3)	153,689.				SEE PART IV
(9) KING PARK AREA DEVELOPMENT CORPORATION 2430 N. DELAWARE INDIANAPOLIS, IN 46205	35-1704590	501(C)(3)	79,400.				SEE PART IV
(10) LA CASA DE DON PEDRO 75 PARK AVENUE NEWARK, NJ 07104	23-7249368	501(C)(3)	85,000.				SEE PART IV
(11) LA CASA NORTE 3533 W. NORTH AVE. CHICAGO, IL 60647	36-4041525	501(C)(3)	52,763.				SEE PART IV
(12) LABOR'S TRAINING & COMMUNITY DEVELOPMENT ALLIANCE 4265 FAIRMOUNT AVE. SAN DIEGO, CA 92105	95-6136389	501(C)(3)	25,000.				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) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

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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. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization of government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LAFAYETTE SQUARE AREA COALITION P.O. BOX 531515 INDIANAPOLIS, IN 46253	20-4008623	501(C)(3)	6,000.				SEE PART IV
(2) LAKESIDE CDC 6636 N. CLARK STREET CHICAGO, IL 60626	42-1670630	501(C)(3)	12,500.				SEE PART IV
(3) LATINO ECONOMIC DVLPMNT. CORP. 2316 18TH STREET NW WASHINGTON, DC 20009	52-1749216	501(C)(3)	50,000.				SEE PART IV
(4) LATINO ECONOMIC DVLPMNT. CTR 1501 E. LAKE STREET MINNEAPOLIS, MN 55407	51-0467167	501(C)(3)	60,000.				SEE PART IV
(5) LAMDALE CHRISTIAN DEVELOPMENT CORPORATION 3843 WEST OGDEN AVENUE CHICAGO, IL 60623	36-3573036	501(C)(3)	206,447.				SEE PART IV
(6) LAMDALE CHRISTIAN HEALTH CENTER 3860 WEST OGDEN AVENUE CHICAGO, IL 60623	36-3308953	501(C)(3)	10,000.				SEE PART IV
(7) LAWRENCE/FORT HARRISON DVLPMNT. CORP. 4437 NORTH FRANKLIN ROAD LAWRENCE, IN 46226	35-1982082	501(C)(3)	7,400.				SEE PART IV
(8) LAWRENCEVILLE CORP. 100 43RD STREET PITTSBURGH, PA 15201	25-1471440	501(C)(3)	63,000.				SEE PART IV
(9) LAWRENCEVILLE UNITED 4825 BUTLER STREET PITTSBURGH, PA 15201	23-3070601	501(C)(3)	90,000.				SEE PART IV
(10) LAYTON BLVD. WEST NEIGHBORS 1545 S. LAYTON BLVD. MILWAUKEE, WI 53215	39-1817581	501(C)(3)	93,816.				SEE PART IV
(11) LIFT, INC. 1620 I STREET NW WASHINGTON, DC 20006	52-2168409	501(C)(3)	117,500.				SEE PART IV
(12) LIGHTHOUSE OF OAKLAND COUNTY P.O. BOX 430508 PONTIAC, MI 48343	38-2391381	501(C)(3)	100,938.				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) (2013)

**SCHEDULE I
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**Grants and Other Assistance to Organizations,
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Internal Revenue Service

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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
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Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1) LINCOLN COMMUNITY REVITALIZATION 1167 MADISON AVE SE GRAND RAPIDS, MI 49507	38-3537915	501(C)(3)	25,000.				SEE PART IV
(2) LINCOLN PARK CHILDREN & FAMILIES COLLABORAT 2424 W. 5TH STREET DULUTH, MN 55806	27-4990487	501(C)(3)	27,500.				SEE PART IV
(3) LITTLE VILLAGE COMMUNITY DEVELOPMENT CORP 2756 S. HARDING AVE. CHICAGO, IL 60623-4412	36-3727669	501(C)(3)	512,662.				SEE PART IV
(4) LOGAN SQUARE NEIGHBORHOOD ASSOCIATION 2840 N. MILWAUKEE AVE. CHICAGO, IL 60618	36-2638491	501(C)(3)	409,512.				SEE PART IV
(5) FISC COMMUNITY DEVELOPMENT CORP 231 E THIRD ST LOS ANGELES, CA 90013	95-4444102	501(C)(3)	96,075.				SEE PART IV
(6) LUTHERAN SOCIAL MISSION SOCIETY 1340 FRANKFORD AVE PHILADELPHIA, PA 19125	23-1352365	501(C)(3)	7,000.				SEE PART IV
(7) LUTHERAN SOCIAL SERVICE OF MINNESOTA 2485 COMO AVE. ST. PAUL, MN 55108	41-0872993	501(C)(3)	166,415.				SEE PART IV
(8) MADISON PARK DEVELOPMENT CORP. 184 DUDLEY STREET BOSTON, MA 02119	23-7164223	501(C)(3)	50,250.				SEE PART IV
(9) MADISONVILLE COMMUNITY URBAN REDEVLP CORP. 2173 SPINNINGWHEEL I CINCINNATI, OH 45244	51-0178908	501(C)(3)	259,082.				SEE PART IV
(10) MAKE THE ROAD NEW YORK 301 GROVE STREET BROOKLYN, NY 11237	11-3344389	501(C)(3)	51,000.				SEE PART IV
(11) MANITOWOC LUTHERAN HIGH SCHOOL 4045 LANCER CIRCLE MANITOWOC, WI 54220	39-6027108	S CORP	35,000.				SEE PART IV
(12) MANNA, INC. 828 EVARTS STREET, NE WASHINGTON, DC 20018	52-1260698	501(C)(3)	32,000.				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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Internal Revenue Service

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- 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 non-cash assistance	(h) Purpose of grant or assistance
(1) MANTUA COMM IMPROV. COMMITTEE 619 N 35TH STREET PHILADELPHIA, PA 19104	04-3677814	501(C)(3)	5,250.				SEE PART IV
(2) WAPLETON-FALL CREEK DYKEMENT CORP 130 EAST 30TH ST. INDIANAPOLIS, IN 46205	35-1654999	501(C)(3)	13,100.				SEE PART IV
(3) MARY RIGG NEIGHBORHOOD CENTER 1920 WEST MORRIS ST. INDIANAPOLIS, IN 46221	35-0868954	501(C)(3)	170,000.				SEE PART IV
(4) MASSACHUSETTS ASSOCIATION OF CDCS 15 COURT SQUARE BOSTON, MA 02108	04-2759909	501(C)(3)	25,500.				SEE PART IV
(5) MATTIE RHODES MEMORIAL SOCIETY 1740 JEFFERSON STREET KANSAS CITY, MO 64108	44-0546343	501(C)(3)	166,539.				SEE PART IV
(6) WHEELS ON WHEELS INC P.O. BOX 40969 INDIANAPOLIS, IN 46240	35-1182075	501(C)(3)	6,000.				SEE PART IV
(7) MEDIA ARTS CENTER SAN DIEGO 2921 EL CAJON BLVD. SAN DIEGO, CA 92104	33-0871577	501(C)(3)	12,000.				SEE PART IV
(8) MEETING STREET CENTER 1000 EDDY STREET PROVIDENCE, RI 02905	05-0269232	501(C)(3)	10,000.				SEE PART IV
(9) MERCY HOUSING AND HUMAN DEVELOPMENT INC 1010 FORD STREET GULFPORT, MS 39507	72-1354070	501(C)(3)	35,000.				SEE PART IV
(10) MERCY HOUSING CALIFORNIA 3120 FREEBRD DR. WEST SACRAMENTO, CA 95691	94-3081666	501(C)(3)	27,000.				SEE PART IV
(11) METEC 2605 W. KRAUSE PEORIA, IL 61605	37-1410246	501(C)(3)	21,000.				SEE PART IV
(12) METRO COMMUNITY DEVELOPMENT 503 S. SAGINAW ST. FLINT, MI 48502	38-3072010	501(C)(3)	36,990.				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) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Name of the organization

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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 non-cash assistance	(h) Purpose of grant or assistance
(1) METRO NORTH COMMUNITY DVLP CORPORATION 3101 N. MAIN STREET JACKSONVILLE, FL 32206	31-1761439	501(C)(3)	63,980.				SEE PART IV
(2) METROPOLITAN FAMILY SERVICES 1 NORTH DEARBORN CHICAGO, IL 60602	36-2167940	501(C)(3)	271,718.				SEE PART IV
(3) MANY MANAGEMENT INC. 2-4 NEVINS STREET BROOKLYN, NY 11217	72-1303737	501(C)(3)	302,500.				SEE PART IV
(4) MI CASA INC. 6230 3RD STREET NW WASHINGTON, DC 20011	52-1796684	501(C)(3)	15,000.				SEE PART IV
(5) MID-CENTRAL COMMUNITY ACTION INC. 1301 W. WASHINGTON STREET	37-0903245	501(C)(3)	10,000.				SEE PART IV
(6) MIKVA CHALLENGE GRANT FOUNDATION 25 E WASHINGTON CHICAGO, IL 60602	52-2033393	501(C)(3)	105,150.				SEE PART IV
(7) MILWAUKEE HABITAT FOR HUMANITY INC. 3726 N. BOOTH STREET MILWAUKEE, WI 53212	38-1496741	501(C)(3)	60,000.				SEE PART IV
(8) MISSISSIPPI ACTION FOR COMMUNITY EDUCATION 119 SOUTH THEOBALD ST. GREENVILLE, MS 38701	64-0465680	501(C)(3)	75,598.				SEE PART IV
(9) MISSISSIPPI CTY ARKANSAS ECONOMIC OPP. COMM. P.O. BOX 1289 BLYTHEVILLE, AR 72316	71-0386409	501(C)(3)	25,000.				SEE PART IV
(10) MODEL CITIES COMMUNITY DVLP CORPORATION 839 UNIVERSITY AVENUE W ST. PAUL, MN 55104	41-1986684	501(C)(3)	45,000.				SEE PART IV
(11) MOSAIC COMMUNICATIONS INC. P.O. BOX 241972 MILWAUKEE, WI 53224	33-1081892	S CORP	8,500.				SEE PART IV
(12) MOUNT AIRY, USA 6703 GERMAN TOWN AVE. PHILADELPHIA, PA 19119	22-2526396	501(C)(3)	25,000.				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) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) MOUNT VERNON MANOR INC 3311 WALLACE STREET PHILADELPHIA, PA 19104	23-2037301	501(C)(3)	14,000.				SEE PART IV
(2) MOUNT WASHINGTON COMMUNITY DVLPMT 301 SHILOH STREET PITTSBURGH, PA 15211	25-1638640	501(C)(3)	52,500.				SEE PART IV
(3) MT. PLEASANT CDC INC 105 BERNICE DRIVE MONROE, LA 71201	72-1356854	501(C)(3)	25,000.				SEE PART IV
(4) MULTI-SERVICE CENTER P.O. BOX 23699 FEDERAL WAY, WA 98093	23-7120815	501(C)(3)	25,000.				SEE PART IV
(5) MUTUAL HOUSING ASSOCIATION OF GREATER HARTF 95 NILES STREET HARTFORD, CT 06105	22-2925052	501(C)(3)	322,000.				SEE PART IV
(6) MUTUAL HOUSING ASSOC. OF SOUTH CENTRAL CT 235 GRAND AVENUE NEW HAVEN, CT 06513	22-3237413	501(C)(3)	40,000.				SEE PART IV
(7) MUTUAL HOUSING ASSOC. OF SOUTHWESTERN CONNE 63 STILLWATER AVENUE STAMFORD, CT 06902	22-3035152	501(C)(3)	90,000.				SEE PART IV
(8) MUTUAL HOUSING CALIFORNIA 8001 FRUITRIDGE ROAD SACRAMENTO, CA 95820	94-3093354	501(C)(3)	27,000.				SEE PART IV
(9) NATIONAL COALITION FOR HOMELESS VETERANS 333 1/2 PA. AVE. SE WASHINGTON, DC 20003	52-1826860	501(C)(3)	25,000.				SEE PART IV
(10) NATIVE AMERICAN COMMUNITY DEVELOPMENT INST. 1414 E. FRANKLIN AVE. MINNEAPOLIS, MN 55404	41-2117257	501(C)(3)	20,250.				SEE PART IV
(11) NATIVE AMERICAN CONNECTIONS 4520 N. CENTRAL AVENUE PHOENIX, AZ 85012	86-0293585	501(C)(3)	190,000.				SEE PART IV
(12) NAUTILUS MUSIC THEATER 308 PRINCE STREET ST. PAUL, MN 55101	41-1721692	501(C)(3)	15,000.				SEE PART IV

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

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Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

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Department of the Treasury
Internal Revenue Service

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) NEAR NORTH DEVELOPMENT CORPORATION 2123 N. MERIDIAN ST. INDIANAPOLIS, IN 46202	35-1427889	501(C)(3)	10,000.				SEE PART IV
(2) NEAR WEST SIDE COMMUNITY DVLP CORPORATION 216 SOUTH HOYNE AVENUE CHICAGO, IL 60612	36-3607203	501(C)(3)	57,500.				SEE PART IV
(3) NEIGHBORHOOD DEVELOPMENT CENTER 663 UNIVERSITY AVENUE ST. PAUL, MN 55104	41-1738791	501(C)(3)	67,000.				SEE PART IV
(4) NEIGHBORHOOD ECONOMIC DVLP. CORP. 10 W MAIN STREET MESA, AZ 85201	86-0888028	501(C)(3)	263,463.				SEE PART IV
(5) NEIGHBORHOOD HOUSING SERVICES OF WATERBURY, 161 NORTH MAIN STREET WATERBURY, CT 06702	06-1022915	501(C)(3)	15,000.				SEE PART IV
(6) NEIGHBORHOOD HOUSING SERVICES OF NEW HAVEN, 333 SHERMAN AVENUE NEW HAVEN, CT 06511	06-1021268	501(C)(3)	13,750.				SEE PART IV
(7) NEIGHBORHOOD HOUSING SERVICES OF NEW BRITAIN 223 BROAD STREET NEW BRITAIN, CT 06053	06-1006312	501(C)(3)	40,000.				SEE PART IV
(8) NEIGHBORHOOD HOUSING SERVICES OF CHICAGO 1279 N. MILWAUKEE AVENUE CHICAGO, IL 60622	23-7443009	501(C)(3)	12,000.				SEE PART IV
(9) NEIGHBORHOOD HOUSING SERVICES OF PHOENIX 1405 EAST MCDOWELL ROAD PHOENIX, AZ 85006	51-0152395	501(C)(3)	30,000.				SEE PART IV
(10) NEIGHBORHOOD HOUSING SERVICES OF TOLEDO, IN 704 2ND STREET TOLEDO, OH 43605	34-1230687	501(C)(3)	25,800.				SEE PART IV
(11) NEIGHBORHOOD HOUSING SERVICES OF NYC, INC. 307 WEST 36TH STREET, 12TH FLOOR	13-3098397	501(C)(3)	135,000.				SEE PART IV
(12) NEIGHBORHOOD RECOVERY COMMUNITY DEVELOPMENT 5445 ALMEDA ROAD, HOUSTON, TX 77004	76-0377117	501(C)(3)	174,755.				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) (2013)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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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 non-cash assistance	(h) Purpose of grant or assistance
(1) NEIGHBORHOOD RESOURCE CENTER 1519 WILLIAMSBURG ROAD RICHMOND, VA 23231	33-1024355	501(C)(3)	176,411.				SEE PART IV
(2) NETWORK OF WOODLAWN 822 E. 63RD STREET CHICAGO, IL 60637	45-3232630	501(C)(3)	153,437.				SEE PART IV
(3) NEW ECOLOGY, INC. 15 COVRT SQUARE BOSTON, MA 02108	04-3447828	501(C)(3)	468,750.				SEE PART IV
(4) NEW FAIRFIELD HOUSING TRUST, INC. P.O. BOX 8313 NEW FAIRFIELD, CT 06812	46-1875322	501(C)(3)	7,500.				SEE PART IV
(5) NEW HOPE HOUSING INC. 117 TEXAS AVENUE HOUSTON, TX 77002	73-1419279	501(C)(3)	40,000.				SEE PART IV
(6) NEW LIGHT ECONOMIC EMPOWERMENT CORP. 1623 SOUTH 4TH STREET MONROE, LA 71202	72-1395439	501(C)(3)	51,000.				SEE PART IV
(7) NEW NEIGHBORHOODS INC. 76 PROGRESS DRIVE STAMFORD, CT 06902	06-0864050	501(C)(3)	233,100.				SEE PART IV
(8) NEW YORK ACADEMY OF MEDICINE 1216 FIFTH AVENUE NEW YORK, NY 10029	13-1656674	501(C)(3)	15,000.				SEE PART IV
(9) NEW YORK DEPT. OF EDUCATION 44-36 VERNON BLVD., LONG ISLAND CITY, NY 1110	13-6400434	GOVERNMENT	200,000.				SEE PART IV
(10) NEWTON COMMUNITY DEVELOPMENT CORP 511 W UNIVERSITY DR. TEMPE, AZ 85281	86-0793043	501(C)(3)	10,000.				SEE PART IV
(11) NORTH AVENUE MARKETPLACE BID 2347 W. FOND DU LAC AVE.	27-2637413	GOVERNMENT	9,580.				SEE PART IV
(12) NORTH COUNTY LIFELINE 200 MICHIGAN AVENUE VISTA, CA 92084	95-2794253	501(C)(3)	155,000.				SEE PART IV

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(Form 990)**

**Grants and Other Assistance to Organizations,
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Employer identification number

13-3030229

LOCAL INITIATIVES SUPPORT CORPORATION

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) NORTH EAST COMMUNITY ACTION CORPORATION 16 NORTH COURT ST., BOWLING GREEN, MO 63334	43-1017571	501(C)(3)	35,000.				SEE PART IV
(2) NORTH FLORIDA EDUCATIONAL DVLPM CORPORATION P.O. BOX 550 GRENA, FL 32332	59-2801357	501(C)(3)	34,000.				SEE PART IV
(3) NORTH LAWNDALE EMPLOYMENT NETWORK 3726 W. FLOURNOY CHICAGO, IL 60624	36-42295189	501(C)(3)	246,212.				SEE PART IV
(4) NORTH RIVER COMMISSION 3403 W. LAURENCE AVE CHICAGO, IL 60625	39-2526797	501(C)(3)	108,697.				SEE PART IV
(5) NORTHEAST BROOKLYN HOUSING 132 RALPH AVE BROOKLYN, NY 11233	11-2737223	501(C)(3)	59,145.				SEE PART IV
(6) NORTHEAST ENTREPRENEUR FUND 202 WEST SUPERIOR STREET DULUTH, MN 55802	36-3566632	501(C)(3)	135,514.				SEE PART IV
(7) NORTHEAST KANSAS CITY CHAMBER OF COMMERCE 6400 INDEPENDENCE AVE KANSAS CITY, MO 64124	43-1686139	501(C)(3)	19,000.				SEE PART IV
(8) NORTHERN CAMBRIA COMMUNITY DEVELOPMENT CORP 4200 CRAWFORD AVE. N. CAMBRIA, PA 15714	25-1534235	501(C)(3)	34,000.				SEE PART IV
(9) NORTHERN ECONOMIC INITIATIVES CORPORATION 228 W. WASHINGTON ST. MARQUETTE, MI 49855	38-3024786	501(C)(3)	34,000.				SEE PART IV
(10) NORTHEAST COMMUNITY LOCAL DVLPMNT CORP 160 HEBERTON AVENUE STATEN ISLAND, NY 10302	13-2374137	501(C)(3)	120,000.				SEE PART IV
(11) NORTHSIDE ASSOC. FOR COMMUNITY DVLPMNT 612 NORTH PARK STREET KALAMAZOO, MI 49007	38-2536811	501(C)(3)	30,000.				SEE PART IV
(12) NORTHSIDE ECONOMIC OPPORTUNITY 1011 W. BROADWAY AVE. MINNEAPOLIS, MN 55411	80-0163521	501(C)(3)	40,000.				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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Schedule I (Form 990) (2013)

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Name of the organization

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Part I General Information on Grants and Assistance

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(1) NORTHSIDE INSTITUTIONS NEIGHBORHOOD 20 SARGEANT STREET HARTFORD, CT 06105	22-3887275	501(C)(3)	148,680.				SEE PART IV
(2) NORTHSIDE LEADERSHIP CONFERENCE 4 ALLEGHENY CENTER PITTSBURGH, PA 15212	25-1689304	501(C)(3)	22,500.				SEE PART IV
(3) NORTHWEST JACKSONVILLE CDC 1122 GOLFAIR BLVD. JACKSONVILLE, FL 32209	31-1809770	501(C)(3)	230,500.				SEE PART IV
(4) NORTHWEST SIDE HOUSING CENTER 5007 WEST ADDISON STREET CHICAGO, IL 60641	20-1413891	501(C)(3)	69,000.				SEE PART IV
(5) NOVA WORKFORCE INSTITUTE OF NE. LOUISIANA 212 WALNUT STREET MONROE, LA 71201	30-0462723	501(C)(3)	25,000.				SEE PART IV
(6) NUESTRA COMUNIDAD DEVELOPMENT CORP 56 WARREN STREET ROXBURY, MA 02119	04-2741543	501(C)(3)	197,500.				SEE PART IV
(7) OAKLAND PLANNING AND DEVELOPMENT 235 AFWOOD STREET PITTSBURGH, PA 15213	25-1382510	501(C)(3)	50,000.				SEE PART IV
(8) OCEAN BAY COMMUNITY DIV PMT 434 BEACH 54TH STREET ARVERNE, NY 11692	84-1622031	501(C)(3)	134,000.				SEE PART IV
(9) ONEVILLIE HOUSING CORPORATION ONE CURTIS STREET PROVIDENCE, RI 02909	22-3010422	501(C)(3)	142,500.				SEE PART IV
(10) OMNI DEVELOPMENT CORPORATION 810 EDDY STREET PROVIDENCE, RI 02905	22-2721731	501(C)(3)	25,000.				SEE PART IV
(11) ONE ROOF COMMUNITY HOUSING 12 E. 4TH STREET DULUTH, MN 55805	41-1678328	501(C)(3)	202,668.				SEE PART IV
(12) OPERATION ABLE OF MICHIGAN 4750 WOODWARD AVENUE DETROIT, MI 48201	38-2861705	501(C)(3)	112,735.				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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**Grants and Other Assistance to Organizations,
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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

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(1) OPERATION BETTER BLOCK, INC. 801 N. HIMWOOD AVENUE PITTSBURGH, PA 15208	23-7157433	501(C)(3)	37,500.				SEE PART IV
(2) OPERATION NEW HOPE, INC. 1830 N MAIN STREET JACKSONVILLE, FL 32206	59-3590360	501(C)(3)	220,000.				SEE PART IV
(3) OVER THE RHINE COMMUNITY HOUSING 114 WEST 14TH ST. CINCINNATI, OH 45202	31-1272434	501(C)(3)	40,000.				SEE PART IV
(4) OZARK ACTION, INC. 710 EAST MAIN STREET WEST PLAINS, MO 66775	43-0838508	501(C)(3)	35,000.				SEE PART IV
(5) PARK PRIDE ATLANTA, INC. 233 PERCHTREE STREET NE ATLANTA, GA 30303	58-1883895	501(C)(3)	200,000.				SEE PART IV
(6) PATHFINDER SERVICES INC. P.O. BOX 1001 HUNTINGTON, IN 46750	35-1122311	501(C)(3)	35,000.				SEE PART IV
(7) PATHSTONE CORPORATION 400 EAST AVENUE ROCHESTER, NY 14607	16-0984913	501(C)(3)	15,000.				SEE PART IV
(8) PAWTUCKET CITIZENS DEVELOPMENT CORPORATION 210 WEST AVENUE PAWTUCKET, RI 02860	22-3241611	501(C)(3)	61,453.				SEE PART IV
(9) PEACE DEVELOPMENT FUND P.O. BOX 40250 SAN FRANCISCO, CA 94140	04-2738794	501(C)(3)	10,000.				SEE PART IV
(10) PEACE FOUNDATION 1119 W. BROADWAY MINNEAPOLIS, MN 55411	30-0238807	501(C)(3)	20,000.				SEE PART IV
(11) PEARL RIVER VALLEY OPPORTUNITY 756 HWY 98 BYPASS COLUMBIA, MS 39429	64-0433756	501(C)(3)	20,000.				SEE PART IV
(12) PENN HILLS SCHOOL DISTRICT 260 ASTER STREET PITTSBURGH, PA 15235	25-6002424	GOVERNMENT	200,000.				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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Name of the organization

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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 non-cash assistance	(h) Purpose of grant or assistance
(1) PEOPLE UNITED FOR SUSTAINABLE HOUSING 271 GRANT ST BUFFALO, NY 14213	20-3558447	501(C)(3)	60,000.				SEE PART IV
(2) PEOPLE'S EMERGENCY CENTER CDC 325 NORTH 39TH ST. PHILADELPHIA, PA 19104	23-2687223	501(C)(3)	49,146.				SEE PART IV
(3) PEOPLE'S FOOD CO-OP OF KALAMAZOO 507 HARRISON STREET KALAMAZOO, MI 49007	38-2032664	C CORP	7,000.				SEE PART IV
(4) PEORIA AREA COMMUNITY FOUNDATION ILLINOIS 331 FULTON STREET PEORIA, IL 61602	37-1185713	501(C)(3)	5,700.				SEE PART IV
(5) PEORIA CITIZEN'S COMMITTEE FOR ECON. OPPOR. 711 W. MCBEAN STREET PEORIA, IL 61605	37-6058636	501(C)(3)	104,127.				SEE PART IV
(6) PEORIA FRIENDSHIP HOUSE OF CHRISTIAN SVCS. 800 NE MADISON AVENUE PEORIA, IL 60603	37-0799752	501(C)(3)	9,600.				SEE PART IV
(7) PEORIA OPPORTUNITIES FOUNDATION 301 NE JEFFERSON PEORIA, IL 61602	37-1392514	501(C)(3)	42,301.				SEE PART IV
(8) PEORIA PARK DISTRICT FOUNDATION 2218 N PROSPECT ROAD PEORIA, IL 61603	37-1368760	501(C)(3)	20,000.				SEE PART IV
(9) PERALTA COMMUNITY COLLEGE DISTRICT 12500 CAMPUS DRIVE OAKLAND, CA 94619	94-1590799	GOVERNMENT	100,000.				SEE PART IV
(10) PHILADELPHIA YOUTH ORCHESTRA P.O. BOX 41810 PHILADELPHIA, PA 19101	23-6392235	501(C)(3)	9,780.				SEE PART IV
(11) PHOENIX REVITALIZATION CORPORATION 1310 WEST HADLEY STREET PHOENIX, AZ 85007	86-0663748	501(C)(3)	21,620.				SEE PART IV
(12) PIONEER SQUARE COMMUNITY ASSOC. 310 1ST AVE SOUTH SEATTLE, WA 98104	91-1716181	501(C)(3)	100,000.				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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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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1) POLARIS CHARTER ACADEMY 620 N. SAWYER AVENUE CHICAGO, IL 60624	01-0874029	501(C)(3)	7,500.				SEE PART IV
(2) POWDERHORN RESIDENTS GROUP 2017 EAST 38TH STREET MINNEAPOLIS, MN 55407	41-1280596	501(C)(3)	45,000.				SEE PART IV
(3) PRATT AREA COMMUNITY COUNCIL 201 DEKALB AVENUE BROOKLYN, NY 11205	11-2451752	501(C)(3)	72,500.				SEE PART IV
(4) PRATT INSTITUTE 200 WILLOUGHBY AVENUE BROOKLYN, NY 11205	11-1630822	501(C)(3)	14,000.				SEE PART IV
(5) PRICE HILL WILL 3208 WARSAW AVENUE CINCINNATI, OH 45205	20-1452663	501(C)(3)	63,443.				SEE PART IV
(6) PROJECT FOR PRIDE IN LIVING 1035 E. FRANKLIN AVE. MINNEAPOLIS, MN 55404	23-7232208	501(C)(3)	239,250.				SEE PART IV
(7) PROJECT REBUILD, INC. 406 SHORB AVENUE NW CANTON, OH 44703	34-1912951	501(C)(3)	25,000.				SEE PART IV
(8) PROPER PIE CO., LLC 4301 MASONIC LANE RICHMOND, VA 23231	45-3253446	LLC	7,000.				SEE PART IV
(9) PROSPECT PARK 2020 2950 UNIVERSITY AVENUE	46-2407192	501(C)(3)	10,000.				SEE PART IV
(10) PROVIDENCE HOUSING AUTHORITY 100 BROAD STREET PROVIDENCE, RI 02903	05-6000193	GOVERNMENT	155,000.				SEE PART IV
(11) PSP LLC 400 NORTH 27TH STREET RICHMOND, VA 23223	45-5457167	LLC	10,000.				SEE PART IV
(12) PUBLIC RECREATION UNLIMITED P.O. BOX 2562 SALINAS, CA 93902	23-7088131	501(C)(3)	200,000.				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

Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Employer identification number
13-3030229

LOCAL INITIATIVES SUPPORT CORPORATION

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) PURPLE HEART HOMES, INC. P.O. BOX 5535 STATESVILLE, NC 28687	26-3516121	501(C)(3)	115,000.				SEE PART IV
(2) QUAD COMMUNITIES DEVELOPMENT CORPORATION 4659 S. COTTAGE GROVE AVE. CHICAGO, IL 60653	81-0618445	501(C)(3)	334,806.				SEE PART IV
(3) QUITMAN COUNTY DEVELOPMENT ORGANIZATION 201 HUMPHREY STREET MARKS, MS 38646	64-0629668	501(C)(3)	15,444.				SEE PART IV
(4) RAYS OF SONSHINE 200 BREARD STREET MONROE, LA 71201	72-1459295	501(C)(3)	10,000.				SEE PART IV
(5) REBUILDING TOGETHER PHILADELPHIA P.O. BOX 42752 PHILADELPHIA, PA 19101	23-2549594	501(C)(3)	75,000.				SEE PART IV
(6) RESEARCH FOUNDATION OF THE CITY UNIVERSITY 230 WEST 41ST STREET NEW YORK, NY 10036	13-1988190	501(C)(3)	36,500.				SEE PART IV
(7) RESOURCES FOR COMMUNITY DEVELOPMENT 2730 TELEGRAPH AVE. BERKELEY, CA 94705	94-2952466	501(C)(3)	20,740.				SEE PART IV
(8) RESTORATION BUILDERS OF VA., INC. 2910 LIBBY TERRACE RICHMOND, VA 23223	54-1253649	C CORP	10,000.				SEE PART IV
(9) RESTORATION OF PETERSBURG CDC 444 HALIFAX STREET PETERSBURG, VA 23803	31-1639517	501(C)(3)	40,000.				SEE PART IV
(10) RICHMOND FRIENDS OF RECREATION 3925 MACDONALD AVENUE RICHMOND, CA 94805	94-2500126	501(C)(3)	10,000.				SEE PART IV
(11) RICHMOND MAIN STREET INITIATIVES 1000 MACDONALD AVE RICHMOND, CA 94801	68-0481132	501(C)(3)	26,500.				SEE PART IV
(12) RIVERWORKS DEVELOPMENT CORP. 526 E. CONCORDIA AVENUE MILWAUKEE, WI 53212	39-1731739	501(C)(3)	203,000.				SEE PART IV

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

3 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) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

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Department of the Treasury
Internal Revenue Service

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

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 non-cash assistance	(h) Purpose of grant or assistance
<u>(1)</u> ROCKHURST UNIVERSITY 1100 ROCKHURST ROAD KANSAS CITY, MO 64110	44-0545813	501(C)(3)	105,775.				SEE PART IV
<u>(2)</u> RUBICON PROGRAMS, INC. 2500 BISSELL AVENUE RICHMOND, CA 94804	94-2301550	501(C)(3)	170,000.				SEE PART IV
<u>(3)</u> RURAL COMMUNITY ASSISTANCE CORP. 3120 FREEBRD DR. WEST SACRAMENTO, CA 95691	94-2512284	501(C)(3)	15,000.				SEE PART IV
<u>(4)</u> RURAL ULLSTER PRESERVATION CO. 289 FAIR STREET KINGSTON, NY 12401	22-2368174	501(C)(3)	36,000.				SEE PART IV
<u>(5)</u> SACRED HEART COMMUNITY SVCE. 1381 SOUTH FIRST STREET SAN JOSE, CA 95110	23-7179787	501(C)(3)	120,000.				SEE PART IV
<u>(6)</u> SAFER FOUNDATION 571 W. JACKSON BLVD. CHICAGO, IL 60661	36-2762168	501(C)(3)	139,325.				SEE PART IV
<u>(7)</u> SAMEULI INSTITUTE FOR INFORMATION BIOLOGY 1737 KING STREET ALEXANDRIA, VA 22314	33-0935065	501(C)(3)	40,000.				SEE PART IV
<u>(8)</u> SAN DIEGO HOUSING COMMISSION 1122 BROADWAY SAN DIEGO, CA 92101	95-3390896	GOVERNMENT	110,000.				SEE PART IV
<u>(9)</u> SANTA MARIA COMMUNITY SERVICES 2918 PRICE AVE. CINCINNATI, OH 45204	31-0537141	501(C)(3)	161,500.				SEE PART IV
<u>(10)</u> SANTEE-LYNCHES AFFORDABLE HOUSING & COMM. D. 255 BROAD STREET SUMTER, SC 29150	57-0951975	501(C)(3)	34,000.				SEE PART IV
<u>(11)</u> SCARRITT RENAISSANCE NEIGHBORHOOD ASSOC. 328 BENTON BLVD. KANSAS CITY, MO 62124	43-1678000	501(C)(3)	10,000.				SEE PART IV
<u>(12)</u> SCHOOL DISTRICT OF KANSAS CITY 1211 MCGEE KANSAS CITY, MO 64106	44-6003108	GOVERNMENT	200,000.				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) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
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Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to 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
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
<u>(1)</u> SELF-HELP ENTERPRISES 8445 W. ELOWIN COURT VISALIA, CA 93291	94-1592676	501(C)(3)	7,500.				SEE PART IV
<u>(2)</u> SER JOBS FOR PROS. OF THE TEXAS GULF COAST 201 BROADWAY HOUSTON, TX 77026	74-1590387	501(C)(3)	181,500.				SEE PART IV
<u>(3)</u> SER METRO DETROIT 9301 MICHIGAN AVE. DETROIT, MI 48210	38-2080820	501(C)(3)	151,500.				SEE PART IV
<u>(4)</u> SETTLEMENT HOUSING FUND, INC. 247 W. 37TH STREET NEW YORK, NY 10018	23-7078882	501(C)(3)	30,200.				SEE PART IV
<u>(5)</u> SEWARD REDESIGN 2619 E. FRANKLIN AVENUE	23-7290844	501(C)(3)	7,500.				SEE PART IV
<u>(6)</u> SHELDON OAK CENTRAL, INC. 54 SOUTH PROSPECT STREET HARTFORD, CT 06106	06-1011060	501(C)(3)	200,000.				SEE PART IV
<u>(7)</u> SHEPHERD COMMUNITY, INC. 4107 E. WASHI ST. INDIANAPOLIS, IN 46201	35-1765846	501(C)(3)	103,200.				SEE PART IV
<u>(8)</u> SHERMAN HEIGHTS COMMUNITY CENTER 2258 ISLAND AVENUE SAN DIEGO, CA 92102	33-0257031	501(C)(3)	11,986.				SEE PART IV
<u>(9)</u> SHERMAN PARK COMMUNITY ASSOCIATION 3526 W. FOND DU LAC AVE MILWAUKEE, WI 53216	23-7281891	501(C)(3)	120,000.				SEE PART IV
<u>(10)</u> SKID ROW HOUSING TRUST 1317 EAST SEVENTH ST. LOS ANGELES, CA 90021	95-4205316	501(C)(3)	50,000.				SEE PART IV
<u>(11)</u> SO OTHERS MIGHT FAIL, INC. 71 O STREET, NW WASHINGTON, DC 20001	23-7098123	501(C)(3)	150,000.				SEE PART IV
<u>(12)</u> SOUTH COUNTY HOUSING CORPORATION 7455 CARMEL ST. GILROY, CA 95020	94-2590572	501(C)(3)	16,000.				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) (2013)

SCHEDULE I (Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
 Attach to Form 990.
 Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service
 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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 non-cash assistance	(h) Purpose of grant or assistance
(1) SOUTHEAST ALABAMA SELF HELP ASSOC. P.O. DRAWER 1080 TUSKEGEE INST., AL 36087	63-0571776	501(C)(3)	32,000.				SEE PART IV
(2) SOUTHEAST COMMUNITY SERVICES 901 SHELBY STREET INDIANAPOLIS, IN 46203	35-1318068	501(C)(3)	209,553.				SEE PART IV
(3) SOUTHEAST NEIGHBORHOOD DEVELOPMENT INC. 1030 ORANGE STREET INDIANAPOLIS, IN 46203	35-1557200	501(C)(3)	75,050.				SEE PART IV
(4) SOUTHWEST HOUSING SOLUTIONS CORP. 1920 25TH STREET DETROIT, MI 48216	38-2324335	501(C)(3)	214,284.				SEE PART IV
(5) SOUTHWEST ORGANIZING PROJECT 2609 W 63RD ST CHICAGO, IL 60629	36-4090773	501(C)(3)	652,191.				SEE PART IV
(6) SPANISH SPEAKING UNITY COUNCIL 1900 FRUITVALE AVE OAKLAND, CA 94601	94-1670490	501(C)(3)	125,875.				SEE PART IV
(7) ST. JOSEPH'S PREPARATORY SCHOOL 1733 W. GIRARD AVENUE ST. NICK'S ALLIANCE 11 CATHERINE STREET BROOKLYN, NY 11211	23-1352675	501(C)(3)	200,000.				SEE PART IV
(8) STOP ABUSIVE FAMILY ENVIRONMENTS P.O. BOX 234 RT 7 WELCH, WV 24801	51-0192170	501(C)(3)	6,500.				SEE PART IV
(9) STOP WASTING ABANDONED 439 PINE STREET PROVIDENCE, RI 02907	55-0647494	501(C)(3)	18,500.				SEE PART IV
(10) STOREFRONT FOR COMMUNITY DESIGN 1001 N. 25TH STREET RICHMOND, VA 23223	05-0370946	501(C)(3)	60,419.				SEE PART IV
(11) SUB ROSA LLC 620 N. 25TH STREET RICHMOND, VA 23223	45-2644809	501(C)(3)	45,000.				SEE PART IV
(12) SUB ROSA LLC 620 N. 25TH STREET RICHMOND, VA 23223	45-2462129	LLC	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
 For Paperwork Reduction Act Notice, see the Instructions for Form 990.
 Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2013

**Open to Public
Inspection**

Employer identification number

13-3030229

Name of the organization
LOCAL INITIATIVES SUPPORT CORPORATION

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 non-cash assistance	(h) Purpose of grant or assistance
(1) SUPPORTIVE HOUSING WORKS, INC. 387 CLINTON AVENUE BRIDGEPORT, CT 06605	20-5529890	501(C)(3)	10,000.				SEE PART IV
(2) TAMAUVA AREA COMMUNITY PARTNERSHIP 114 WEST BROAD STREET TAMAUVA, PA 18252	23-2820326	501(C)(3)	115,605.				SEE PART IV
(3) TEAMWORK ENGLEWOOD 815 W 63RD STREET CHICAGO, IL 60621	74-3102944	501(C)(3)	283,316.				SEE PART IV
(4) TEJANO CENTER FOR COMMUNITY CONCERNS 2950 BROADWAY HOUSTON, TX 77017	76-0377101	501(C)(3)	14,391.				SEE PART IV
(5) TEMPLE UNIVERSITY 1938 LIACOURAS WALK PHILADELPHIA, PA 19122	23-1365971	501(C)(3)	35,229.				SEE PART IV
(6) TENDELOIN NEIGHBORHOOD DEVELOPMENT CORP. 201 EDDY STREET SAN FRANCISCO, CA 94102	94-2761808	501(C)(3)	25,000.				SEE PART IV
(7) THE ARTS COMMISSION OF GREATER TOLEDO 1838 PARKWOOD AVENUE TOLEDO, OH 43604	34-1358701	501(C)(3)	12,500.				SEE PART IV
(8) THE BOSTON PROJECT MINISTRIES, INC. 670 WASHINGTON STREET DORCHESTER, MA 02124	04-3395307	501(C)(3)	33,473.				SEE PART IV
(9) THE BRIDGE, INC. 248 WEST 108TH STREET NEW YORK, NY 10025	13-1919799	501(C)(3)	120,000.				SEE PART IV
(10) THE CARA PROGRAM 703 WEST MONROE CHICAGO, IL 60661	36-4268095	501(C)(3)	216,345.				SEE PART IV
(11) THE CHILDREN'S HOME ASSOC. OF ILLINOIS 2130 N KNOXVILLE AVENUE PEORIA, IL 61603	37-0662601	501(C)(3)	16,250.				SEE PART IV
(12) THE CHILDREN'S MUSEUM OF INDIANAPOLIS 3000 N MERIDIAN ST. INDIANAPOLIS, IN 46208	35-0867985	501(C)(3)	6,111.				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) (2013)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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2013

**Open to Public
Inspection**

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 non-cash assistance	(h) Purpose of grant or assistance
(1) THE COMMUNITY BUILDERS, INC. 95 BERKLEY STREET BOSTON, MA 02116	04-2324773	501(C)(3)	37,250.				SEE PART IV
(2) THE CORNERSTONE GROUP, INC. 7661 BUSH LAKE DRIVE BLOOMINGTON, MN 55438	41-1762459	C CORP	15,000.				SEE PART IV
(3) THE CRENULATED COMPANY, LTD. 1512 TOWNSEND AVENUE BRONX, NY 10452	14-1719016	501(C)(3)	104,645.				SEE PART IV
(4) THE DOWNTOWN SHAREHOLDERS OF KANSAS CITY 726 ARMSTRONG KANSAS CITY, MO 66101	41-2202699	501(C)(3)	130,000.				SEE PART IV
(5) THE ENTERPRISE CENTER 4548 MARKET STREET PHILADELPHIA, PA 19139	23-2575901	501(C)(3)	41,130.				SEE PART IV
(6) THE GENESIS CENTER 620 POTTERS AVENUE PROVIDENCE, RI 02907	22-3001721	501(C)(3)	20,721.				SEE PART IV
(7) THE KENNEDY COMMISSION 17701 COWAN AVENUES IRVINE, CA 92614	33-0959380	501(C)(3)	30,535.				SEE PART IV
(8) THE LASALLE FOUNDATION 1111 N. WELLS STREET CHICAGO, IL 60610	36-3511457	501(C)(3)	111,700.				SEE PART IV
(9) THE NEIGHBORHOOD DEVELOPERS, INC. 4 GERRISH AVENUE CHELSEA, MA 02150	04-2660283	501(C)(3)	138,639.				SEE PART IV
(10) THE RESURRECTION PROJECT 1818 S. PAULINA AVE CHICAGO, IL 60608	36-3576073	501(C)(3)	648,695.				SEE PART IV
(11) THE UNIVERSITY OF CHICAGO 5801 SOUTH ELLIS AVENUE CHICAGO, IL 60637	36-2177139	501(C)(3)	8,500.				SEE PART IV
(12) THE VILLAGES COMMUNITY DEVELOPMENT CORP. 8109 EAST JEFFERSON DETROIT, MI 48214	36-4528309	501(C)(3)	15,000.				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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Schedule I (Form 990) (2013)

SCHEDULE I (Form 990)
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States
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Department of the Treasury
 Internal Revenue Service
 Name of the organization
 LOCAL INITIATIVES SUPPORT CORPORATION
 Employer identification number
 13-3030229

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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 non-cash assistance	(h) Purpose of grant or assistance
(1) THOMAS-DALE DISTRICT & PLANNING COUNCIL 685 MINNEHAHA AVENUE W ST. PAUL, MN 55104	41-0963444	501(C)(3)	25,000.				SEE PART IV
(2) THREE RIVERS LOCAL SCHOOL DISTRICT 92 CLEVELS AVENUE CLEVELS, OH 45002	31-6000767	GOVERNMENT	200,000.				SEE PART IV
(3) TIERRA DEL SOL HOUSING CORPORATION 880 ANTHONY DR. ANTHONY, NM 88021	85-0227016	501(C)(3)	34,000.				SEE PART IV
(4) TRI-COUNTY URBAN LEAGUE 317 S MACARTHUR HIGHWAY PEORIA, IL 61605	37-0888235	501(C)(3)	14,000.				SEE PART IV
(5) TUNICA COUNTY CDC POST OFFICE BOX 1402 TUNICA, MS 38676	64-0814239	501(C)(3)	32,435.				SEE PART IV
(6) TWIN CITIES COMMUNITY LAND BANK, LLC 615 1ST AVENUE NE MINNEAPOLIS, MN 55413	27-0260037	501(C)(3)	21,500.				SEE PART IV
(7) TWIN CITIES HABITAT FOR HUMANITY 3001 4TH STREET SE MINNEAPOLIS, MN 55414	36-3363171	501(C)(3)	50,000.				SEE PART IV
(8) UMOVA COMMUNITY DEVELOPMENT CORP. 605 SOUTH E KANE ST. ROSEBURG, OR 97470	93-1057208	501(C)(3)	65,000.				SEE PART IV
(9) UNIFIED GOVERNMENT OF WYANDOTT COUNTY 701 NORTH 7TH STREET KANGAS CITY, MO 66101	48-1194075	GOVERNMENT	15,000.				SEE PART IV
(10) UNION HILL RVA GROUP, LLC 2306 JEFFERSON AVENUE RICHMOND, VA 23223	46-3525898	LLC	10,000.				SEE PART IV
(11) UNITED METHODIST CHILDREN'S SERVICES OF WI 3940 W. LISBON MILWAUKEE, WI 53208	39-1030611	501(C)(3)	201,057.				SEE PART IV
(12) UNITED NORTH CORPORATION 3106 LAGRANGE ST. TOLEDO, OH 43608	20-8567856	501(C)(3)	82,500.				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)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Employer identification number

13-3030229

Name of the organization
LOCAL INITIATIVES SUPPORT CORPORATION

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) UNITED NORTH EAST CDC 3636 E 38TH STREET INDIANAPOLIS, IN 46218	35-1961274	501(C)(3)	31,300.				SEE PART IV
(2) UNITED STATES VETERANS INITIATIVE 800 W. 6TH STREET LOS ANGELES, CA 90017	95-4382752	501(C)(3)	60,000.				SEE PART IV
(3) UNITED WAY OF GREATER HOUSTON 50 WAUGH DR HOUSTON, TX 77007	74-1167964	501(C)(3)	145,000.				SEE PART IV
(4) UNIVERSITY CITY DISTRICT 3940-42 CHESTNUT ST. PHILADELPHIA, PA 19104	23-2913784	501(C)(3)	135,000.				SEE PART IV
(5) UNIVERSITY CULTURAL CENTER ASSOCIATION 3939 WOODWARD AVENUE DETROIT, MI 48201	38-2134035	501(C)(3)	15,000.				SEE PART IV
(6) UNIVERSITY OF CALIFORNIA 2150 SHATTUCK AVENUE BERKELEY, CA 94704	94-6002123	501(C)(3)	49,000.				SEE PART IV
(7) UNIVERSITY OF CINCINNATI P.O. BOX 691031 CINCINNATI, OH 45269	31-6000989	GOVERNMENT	15,000.				SEE PART IV
(8) UNIVERSITY OF MISSOURI-KANSAS CITY 5100 ROCKHILL ROAD KANSAS CITY, MO 64110	43-6003859	501(C)(3)	45,128.				SEE PART IV
(9) UPTOWN PARTNERS OF PITTSBURGH 710 5TH AVENUE PITTSBURGH, PA 15219	45-0560925	501(C)(3)	30,000.				SEE PART IV
(10) UPTOWN REINVESTMENT CORP. 519 SOUTH SAGINAW STREET FLINT, MI 48502	38-3493359	501(C)(3)	30,000.				SEE PART IV
(11) UPTOWN UNITED 4753 N. BROADWAY CHICAGO, IL 60640	36-4028056	501(C)(3)	22,500.				SEE PART IV
(12) URBAN ECOLOGY CENTER INC. 1500 EAST PARK PLACE MILWAUKEE, WI 53211	39-1712663	501(C)(3)	8,000.				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) (2013)

**SCHEDULE I
(Form 990)**

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

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

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2013

**Open to Public
Inspection**

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) URBAN HOMEWORKS 2015 EMERSON AVENUE N MINNEAPOLIS, MN 55411	41-1821520	501(C)(3)	60,000.				SEE PART IV
(2) URBAN LEAGUE OF ESSEX COUNTY 508 CENTRAL AVENUE NEWARK, NJ 07107	22-1554540	501(C)(3)	40,000.				SEE PART IV
(3) URBAN LEAGUE OF GREATER CINCINNATI 3458 READING ROAD CINCINNATI, OH 45229	31-0565428	501(C)(3)	125,000.				SEE PART IV
(4) URBAN NEIGHBORHOOD INITIATIVES 8300 LONGWORTH ST. DETROIT, MI 48209	38-3417161	501(C)(3)	205,600.				SEE PART IV
(5) URBAN ROOTS MN 731 EAST 7TH STREET ST. PAUL, MN 55106	41-0975429	501(C)(3)	15,000.				SEE PART IV
(6) URBAN WORKS, LTD. 213 W INSTITUTE PLACE CHICAGO, IL 60610	36-3917413	S CORP	15,000.				SEE PART IV
(7) VANGUARD COMMUNITY DEVELOPMENT CORP 2785 E GRAND BOULEVARD DETROIT, MI 48211	38-3201091	501(C)(3)	148,310.				SEE PART IV
(8) VILLAGE OF THE ARTS AND HUMANITIES 2544 GERMANTOWN AVE PHILADELPHIA, PA 19133	22-3045318	501(C)(3)	80,000.				SEE PART IV
(9) VOLUNTEERS OF AMERICA LOS ANGELES 3600 WILSHIRE BLVD. LOS ANGELES, CA 90010	95-1691330	501(C)(3)	25,000.				SEE PART IV
(10) VOLUNTEERS OF AMERICA TEXAS 300 E. MIDWAY DRIVE EULESS, TX 76039	75-0827469	501(C)(3)	147,000.				SEE PART IV
(11) WALNUT HILLS REDEVELOPMENT FOUNDATION INC 791 EAST MCMILLAN AVE CINCINNATI, OH 45206	31-0921173	501(C)(3)	243,445.				SEE PART IV
(12) WEALTH WATCHERS INC. 1225 W. BEAVER ST. JACKSONVILLE, FL 32204	01-0639984	501(C)(3)	40,000.				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

Schedule I (Form 990) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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Department of the Treasury
Internal Revenue Service

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) WEIGH OF LIFE 968 23RD ST RICHMOND, CA 94804	20-3752206	501(C)(3)	8,500.				SEE PART IV
(2) WESLEY COMMUNITY CENTER INC. OF HOUSTON, TX 1410 LEE STREET HOUSTON, TX 77009	74-1132578	501(C)(3)	130,000.				SEE PART IV
(3) WEST ANGELES CDC 6028 CRENSHAW BLVD. LOS ANGELES, CA 90043	95-4486925	501(C)(3)	100,000.				SEE PART IV
(4) WEST BROADWAY BUSINESS & AREA COALITION 911 WEST BROADWAY MINNEAPOLIS, MN 55411	41-1985423	501(C)(3)	40,000.				SEE PART IV
(5) WEST ELMWOOD HOUSING DEVELOPMENT CORP. 224 DEXTER STREET PROVIDENCE, RI 02907	23-7138165	501(C)(3)	30,000.				SEE PART IV
(6) WEST HARLEM GROUP ASSISTANCE 1652 AMSTERDAM AVENUE NEW YORK, NY 10031	23-7169558	501(C)(3)	54,645.				SEE PART IV
(7) WEST HUMBOLDT PARK FAMILY & COMMUNITY DVLP 3620 W. CHICAGO AVE. CHICAGO, IL 60651	36-3807011	501(C)(3)	27,000.				SEE PART IV
(8) WEST INDIANAPOLIS DEVELOPMENT CORPORATION 1211 S. HEATT STREET INDIANAPOLIS, IN 46221	35-1886746	501(C)(3)	44,360.				SEE PART IV
(9) WEST TOWN BIKES 2459 W. DIVISION ST CHICAGO, IL 60622	20-4767185	501(C)(3)	17,300.				SEE PART IV
(10) WESTBAY COMMUNITY ACTION 224 BUTTWOODS AVENUE WARWICK, RI 02886	05-0311985	501(C)(3)	25,500.				SEE PART IV
(11) WESTMINSTER FOUNDATION P.O. BOX 3352 BUFFALO, NY 14240	20-1405438	501(C)(3)	175,500.				SEE PART IV
(12) WESTSIDE HOUSING ORGANIZATION 919 W. 24TH STREET KANSAS CITY, MO 64108	43-1122742	501(C)(3)	10,500.				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) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

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Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
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Department of the Treasury
Internal Revenue Service

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) WHITE CENTER COMMUNITY DEVELOPMENT ASSN. 1615 SW CAMBRIDGE STREET SEATTLE, WA 98106	72-1526567	501(C)(3)	25,000.				SEE PART IV
(2) WILKINSBURG COMMUNITY DEVELOPMENT 1001 WOOD STREET WILKINSBURG, PA 15221	41-2241079	501(C)(3)	50,000.				SEE PART IV
(3) WILSON COMMUNITY IMPROVEMENT ASSOC. 504 E. GREEN STREET WILSON, NC 27893	56-1053307	501(C)(3)	34,000.				SEE PART IV
(4) WISCONSIN PRESERVATION FUND, INC. 1000 NORTH WATER STREET MILWAUKEE, WI 53203	39-1657657	501(C)(3)	58,500.				SEE PART IV
(5) WOMEN'S EMPLOYMENT NETWORK 920 MAIN STREET KANSAS CITY, MO 64105	43-1508734	501(C)(3)	30,000.				SEE PART IV
(6) WOMEN'S INSTITUTE FOR HOUSING AND ECONOMIC 15 COURT SQUARE BOSTON, MA 02108	042733078	501(C)(3)	80,000.				SEE PART IV
(7) WOODLAWN EAST COMMUNITY & NEIGHBORS, INC. 6450 SOUTH STONY ISLAND AVE.	36-3357617	501(C)(3)	10,000.				SEE PART IV
(8) WOODSQUACKET VALLEY COMM. BUILD 28 SIMS AVENUE PROVIDENCE, RI 02909	32-0013513	501(C)(3)	7,500.				SEE PART IV
(9) WOONSOCKET NEIGHBORHOOD DEVELOPMENT CORP 719 FRONT STREET WOONSOCKET, RI 02895-5278	22-2907602	501(C)(3)	103,343.				SEE PART IV
(10) WORKING IN NEIGHBORHOODS 1814 DREMAN AVENUE CINCINNATI, OH 45223	31-0962007	501(C)(3)	34,000.				SEE PART IV
(11) WPA BAKERY, LLC 2707 E. MARSHALL STREET RICHMOND, VA 23223	46-0580965	LIC	15,000.				SEE PART IV
(12) WSOS COMMUNITY ACTION COMMISSION 109 SOUTH FRONT ST FREMONT, OH 43420	34-0975934	501(C)(3)	75,000.				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) (2013)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

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

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 non-cash assistance	(h) Purpose of grant or assistance
(1) YOUTH ENRICHMENT STRATEGIES 3029 MACDONALD AVE RICHMOND, CA 94804	03-0458294	501(C)(3)	13,300.				SEE PART IV
(2) YOUTH SERVICE PROJECT, INC. 3942 W. NORTH AVENUE CHICAGO, IL 60647	36-2838207	501(C)(3)	60,000.				SEE PART IV
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2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 486.

3 Enter total number of other organizations listed in the line 1 table 20.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2013)

Part III Grants and Other Assistance to Individuals in the United States. 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 STIPENDS	116.	500,339.			
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Part IV Supplemental Information. Complete this part to 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 Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to 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

GRANTS

PROJECT GRANTS ARE MADE TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO SUPPORT THEIR EFFORTS TO TRANSFORM DISTRESSED COMMUNITIES.

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SUPPLEMENTAL INFORMATION 3

AWARDS

CHICAGO NEIGHBORHOODS DEVELOPMENT AWARDS PROGRAMS

THE CHICAGO LISC OFFICE ANNUALLY HOLDS THE CHICAGO NEIGHBORHOODS DEVELOPMENT AWARDS (CNDA) CEREMONY. THE CNDA PROGRAM RECOGNIZES ORGANIZATIONS THAT WORK TO IMPROVE CHICAGO NEIGHBORHOODS. THE AWARD PROGRAM IS MADE UP OF TEN TEAMS OF VOLUNTEER JUDGES, AND ELEVEN MEMBERS OF AN AWARD COMMITTEE REPRESENTING BOTH THE NON-PROFIT AND FOR-PROFIT

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SECTORS. THE JUDGES EVALUATE AND RATE APPLICANTS ON THREE PRIMARY ASPECTS: DEVELOPMENT PROCESS OR ORGANIZATIONAL EFFECTIVENESS; COMMUNITY IMPACT; AND PROJECT OR ORGANIZATIONAL CHALLENGE. THE AWARD COMMITTEE REVIEWS THE EVALUATIONS OF THE JUDGES AND DETERMINES THE WINNERS OF THE AWARDS.

THE AWARDS WERE AS FOLLOWS:

1. THE CHICAGO COMMUNITY TRUST OUTSTANDING STRATEGY OF THE YEAR AWARD IS GIVEN TO A NON-PROFIT COMMUNITY DEVELOPMENT ORGANIZATION AND/OR

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

COLLABORATION OF ORGANIZATIONS IN RECOGNITION OF THE DEVELOPMENT AND

SUCCESSFUL IMPLEMENTATION OF A STRATEGY THAT PROMOTES AND IS INTEGRAL TO A COMPREHENSIVE COMMUNITY DEVELOPMENT STRATEGY.

2. THE POLK BROTHERS FOUNDATION AFFORDABLE RENTAL HOUSING PRESERVATION

AWARD IS GIVEN TO A FOR-PROFIT DEVELOPER AND/OR NON-PROFIT COMMUNITY

DEVELOPMENT ORGANIZATION FOR A REAL ESTATE PROJECT THAT SERVES AS A MODEL

OF PRESERVING AFFORDABLE RENTAL HOUSING THAT IS AT RISK BECAUSE OF

EXPIRING SUBSIDIES OR PHYSICAL DETERIORATION.

3. THE RICHARD H. DRIEHAUS FOUNDATION AWARD FOR OUTSTANDING NON-PROFIT

REAL ESTATE PROJECT IS GIVEN TO A NON-PROFIT COMMUNITY DEVELOPMENT

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

ORGANIZATION FOR A REAL ESTATE PROJECT THAT MEETS COMMUNITY NEEDS,
 INVOLVED LOCAL RESIDENTS IN THE PLANNING PROCESS, OVERCAME OBSTACLES AND
 DEMONSTRATED CREATIVITY IN ITS DESIGN AND FINANCING.

4. SPECIAL RECOGNITION AWARD IS GIVEN TO A GROUP THAT HAS SHOWN PROMISE
 AS A NEW OR EMERGING ORGANIZATION, OR HAS ACHIEVED A PIVOTAL OR
 INNOVATIVE COMMUNITY DEVELOPMENT PROJECT, OR HAS BEEN A CRITICAL PROVIDER
 OF SERVICES TO THE COMMUNITY DEVELOPMENT FIELD.

5. THE PRIVATEBANK NORMAN BOBINS LEADERSHIP AWARD RECOGNIZES AN EMERGING
 LEADER AT A COMMUNITY DEVELOPMENT ORGANIZATION WHO HAS ENHANCED THE
 ORGANIZATION AND DEMONSTRATED THE POTENTIAL TO BECOME AN INNOVATIVE AND

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

INSTRUMENTAL LEADER IN THE FIELD OF COMMUNITY DEVELOPMENT.

6. THE OUTSTANDING NEIGHBORHOOD REAL ESTATE PROJECT AWARD IS GIVEN TO A FOR-PROFIT REAL ESTATE PROJECT THAT RESPONDS TO COMMUNITY NEEDS, INVOLVED THE COMMUNITY IN THE PLANNING PROCESS AND SHOWS AN INNOVATIVE APPROACH TO DESIGN AND FINANCING.

7. THE RICHARD H. DRIEHAUS FOUNDATION AWARD FOR ARCHITECTURAL EXCELLENCE IN COMMUNITY DESIGN RECOGNIZES THREE DEVELOPMENTS THAT ARE MAKING A SIGNIFICANT CONTRIBUTION TO THE SOCIAL, VISUAL, AND CULTURAL LIFE OF THEIR NEIGHBORHOODS THROUGH QUALITY OF DESIGN.

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

1	(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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2; Part III, column (b), and any other additional information.

THE 2013 CNDA AWARD WINNERS WERE:

GROWING HOME INC. RECEIVED \$20,000 FOR THE CHICAGO COMMUNITY TRUST
 OUTSTANDING STRATEGY OF THE YEAR AWARD.

LAWDALE CHRISTIAN HEALTH CENTER RECEIVED \$10,000 FOR THE RICHARD H.

DRIEHAUS FOUNDATION AWARD FOR OUTSTANDING NON-PROFIT NEIGHBORHOOD REAL
 ESTATE PROJECT.

FIVE T MANAGEMENT, INC. & COMMUNITY INVESTMENT CORP., EACH RECEIVED
 \$5,000 FOR THE POLK BROTHERS FOUNDATION AFFORDABLE RENTAL HOUSING

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PRESERVATION AWARD.

BLACK ENSEMBLE THEATER CULTURAL CENTER RECEIVED \$5,000 FOR THE SPECIAL

RECOGNITION AWARDS.

URBANWORKS, LTD. RECEIVED \$15,000 FOR PLACING FIRST FOR THE RICHARD H.

DRIEHAUS FOUNDATION AWARD FOR ARCHITECTURAL EXCELLENCE IN COMMUNITY

DESIGN.

PAPPAGEORGE HAYMES LTD. & KOO AND ASSOCIATES EACH RECEIVED \$1,500 FOR

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PLACING SECOND FOR THE RICHARD H. DRIEHAUS FOUNDATION AWARD FOR ARCHITECTURAL EXCELLENCE IN COMMUNITY DESIGN.

JGMA RECEIVED \$2,000 FOR PLACING THIRD FOR THE RICHARD H. DRIEHAUS FOUNDATION AWARD FOR ARCHITECTURAL EXCELLENCE IN COMMUNITY DESIGN.

CENTER ON HALSTEAD RECEIVED \$5,000 FOR THE PRIVATEBANK NORMAN BOBINS LEADERSHIP AWARD IN RECOGNITION OF ITS CEO, MODESTO TICO VALLE.

Schedule I (Form 990) (2013)

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SUPPLEMENTAL INFORMATION 4

AWARDS

MILWAUKEE AWARDS FOR NEIGHBORHOOD DEVELOPMENT INNOVATION (MANDI)

THE MILWAUKEE AWARDS FOR NEIGHBORHOOD DEVELOPMENT INNOVATION PAY TRIBUTE TO THE PEOPLE AND ORGANIZATIONS WORKING TIRELESSLY TO MAKE MILWAUKEE A GREAT PLACE TO LIVE, LEARN, WORK AND GROW. THE MANDIS WERE INTRODUCED BY LISC MILWAUKEE IN 1999 TO ACKNOWLEDGE AND PROMOTE THE ACCOMPLISHMENTS OF THE COMMUNITY DEVELOPMENT INDUSTRY IN MILWAUKEE. THE MANDI CEREMONY HIGHLIGHTS A VARIETY OF COMMUNITY WORK WITH VIDEO PROFILES OF EACH MANDI

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

FINALIST.

ALL INDIVIDUALS, ORGANIZATIONS, AND PROJECTS SEEKING NOMINATION MUST BE LOCATED OR OPERATE A PROGRAM OR PROJECT IN MILWAUKEE COUNTY. THE AWARDS ARE DESIGNED TO RECOGNIZE EFFORTS THAT SPECIFICALLY TARGET CENTRAL CITY NEIGHBORHOODS. INDIVIDUALS, NONPROFITS, CORPORATIONS, AND PROJECTS CAN BE NOMINATED BY A THIRD PARTY OR SELF-NOMINATE.

ALL NOMINATIONS ARE REVIEWED BY AN INDEPENDENT MANDI REVIEW COMMITTEE BASED ON VARIOUS CRITERIAS. THE MANDI REVIEW COMMITTEE IS A VOLUNTEER

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

1	(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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

COMMITTEE COMPRISED OF REPRESENTATIVES FROM COMMUNITY DEVELOPMENT THAT INCLUDE: FINANCIAL INSTITUTIONS, FOUNDATIONS, REAL ESTATE DEVELOPMENT, FOR-PROFIT ORGANIZATIONS, EDUCATION FACILITIES, THE ARTS, MEDIA OUTLETS AND COUNTY AND CITY GOVERNMENT.

NOMINATIONS THAT RECEIVE A SCORE HIGHER THAN THE THRESHOLD DETERMINED BY THE MANDI REVIEW COMMITTEE WILL MOVE ON TO THE FINALIST SELECTION ROUND.

NOMINATIONS THAT PASS THE NOMINATION REVIEW ROUND ARE REVIEWED BY AN INDEPENDENT MANDI JURY BASED ON VARIOUS CRITERIAS. THE MANDI JURY IS A SECOND VOLUNTEER COMMITTEE COMPRISED OF REPRESENTATIVES FROM COMMUNITY

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

DEVELOPMENT.

THE AWARDS ARE:

1. BMO HARRIS BANK CORNERSTONE AWARD - HONORS AN ORGANIZATION/PROGRAM WITH A LONG-STANDING COMMITMENT TO A NEIGHBORHOOD(S) AND HAS DEMONSTRATED PERSISTENCE AND EFFECTIVENESS OVER TIME.

A. HAS MADE A POSITIVE, OUTSTANDING, AND CONSISTENT CONTRIBUTION TO THE COMMUNITY FOR AT LEAST 5 YEARS.

B. HAS PROVIDED TANGIBLE RESULTS CONCERNING COMMUNITY ISSUES THROUGH THEIR BODY OF WORK.

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

C. HAS MADE CONSISTENT CONTRIBUTIONS TO THE COMMUNITY THROUGHOUT THEIR YEARS OF SERVICE.

2. NORTHERN TRUST NAVIGATOR AWARD - HONORS AN OUTSTANDING INDIVIDUAL THAT HAS PROVIDED LEADERSHIP AND COLLABORATION--BRINGING TOGETHER DIVERSE VOICES AND/OR RESOURCES TO IMPROVE THE COMMUNITY.

A. PROVIDES A PLATFORM FOR DIVERSE GROUPS OF PEOPLE TO ENGAGE IN COMMUNITY PROBLEM SOLVING.

B. SERVES AS A CATALYST FOR MEANINGFUL DIALOGUE TO ADDRESS COMPLEX COMMUNITY ISSUES.

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

C. LEADERSHIP HAS RESULTED IN DEMONSTRATED POSITIVE CHANGE IN THE QUALITY OF LIFE FOR MILWAUKEE RESIDENTS.

3. PNC TRAIL BLAZER AWARD - HONORS AN INNOVATIVE APPROACH BY AN ORGANIZATION/PROGRAM TO A PROBLEM THAT IS PRODUCING DEMONSTRATIVE RESULTS.

A. HAS DEMONSTRATED CREATIVE METHODS OF PROBLEM SOLVING TO ADDRESS COMPLEX COMMUNITY ISSUES.

B. HAS DEMONSTRATED SIGNIFICANT RESULTS, AND SHARES THESE RESULTS WITH OTHERS FOR THE PURPOSE OF REPLICATION AND SUSTAINABILITY.

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

C. ORGANIZATION/PROGRAM'S APPROACH AND RESULTS ARE SIGNIFICANTLY DIFFERENT FROM TRADITIONAL MODELS OR HAVE PROVED SUCCESSFUL.

4. STATE FARM INSURANCE BUILDING BLOCKS AWARD - HONORS A REAL ESTATE PROJECT THAT CONTRIBUTES SIGNIFICANTLY TO THE ENHANCEMENT OF THE COMMUNITY-FULFILLING A SIGNIFICANT ARTICULATED NEIGHBORHOOD NEED AND DEMONSTRATING SUPERIOR DESIGN QUALITY.

A. PROJECT ENHANCED COMMUNITY PHYSICALLY, FINANCIALLY, OR SOCIALLY WITHOUT CHANGING OR WITHOUT REMOVING ANY POSITIVE ASPECTS OF PUBLIC SPACE.

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

1	(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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

B. PROJECT INVOLVED A DIVERSE BODY OF CONTRACTORS, TO INCLUDE THOSE THAT ARE COMMUNITY BASED OR MINDED.

C. PROJECT USED QUALITY BUILDING MATERIALS. PROJECT TAKES INTO CONSIDERATION ENVIRONMENTAL CONCERNS, IS FINANCIALLY SOUND, IS SAFE AND HEALTHY FOR COMMUNITY MEMBERS.

D. PROJECT IS CATALYTIC - (PROJECT IS PART OF A BROADER NEIGHBORHOOD OR CITY PLAN).

5. BREWERS COMMUNITY FOUNDATION PUBLIC SPACE AWARD - HONORS THE CREATION OR USE OF PUBLIC SPACE THAT CONTRIBUTES SIGNIFICANTLY TO THE OVERALL

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

WELL-BEING OF THE COMMUNITY.

A. SPACE IS CONVENIENTLY LOCATED, PROVIDES A VARIETY OF FEATURES AND USES, AND IS WORTHY OF EMULATION.

B. SPACE IS A PUBLIC DESTINATION WHICH IS WELL MAINTAINED AND USABLE THROUGHOUT THE YEAR.

C. SPACE REPRESENTS SOUND INVESTMENT OF PUBLIC FUNDS, PRIVATE INVESTMENT AND/OR URBAN REGENERATION. SPACE CONTRIBUTES SIGNIFICANTLY TO THE OVERALL IMPROVEMENT GOALS OF A NEIGHBORHOOD.

WINNERS:

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

- URBAN ECOLOGY CENTER, INC. - WINNER OF THE BREWERS COMMUNITY FOUNDATION PUBLIC SPACE AWARD. URBAN ECOLOGY CENTER INC., WAS AWARDED \$1,000 FOR THEIR WORK ON WASHINGTON PARK, A HISTORICAL MILWAUKEE LANDMARK.
- PROGRESSIVE COMMUNITY HEALTH CENTERS - WINNER OF THE BMO HARRIS BANK CORNERSTONE AWARD. RECEIVED \$1,000 FOR A LONG-STANDING COMMITMENT TO MEET THE HEALTH AND MEDICAL CARE NEEDS OF COMMUNITY MEMBERS, REGARDLESS OF THEIR ABILITY TO PAY.
- CORE/EL CENTRO WINNER OF THE STATE FARM INSURANCE BUILDING BLOCKS AWARD RECEIVED \$1,000 FOR THE CLOCK SHADOW BUILDING. THE CLOCK SHADOW

Part III Grants and Other Assistance to Individuals in the United States. 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
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

BUILDING LOCATED AT 130 W. BRUCE STREET IN MILWAUKEE, IS A TESTAMENT TO URBAN PIONEERING AND SUSTAINABILITY.

4. OUR NEXT GENERATION INC., WINNER OF THE PNC BANK TRAILBLAZER AWARD, RECEIVED \$1,000, FOR THEIR INNOVATIVE OUTBOUND LEARNING PROGRAM.

5. LAYTON BLVD. WEST NEIGHBORS, INC., (LBWN) RECEIVED \$1,000 TO HONOR THE WORK OF THEIR EXECUTIVE DIRECTOR, CHARLOTTE JOHN-GOMEZ. UNDER HER LEADERSHIP, LBWN HAS INVESTED \$35 MILLION IN THE NEIGHBORHOOD AND HAS ENGAGED THOUSANDS OF NEIGHBORS WHO HAVE WORKED ON PROJECTS AND NEIGHBORHOOD EVENTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No. 1545-0047

2013

**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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- First-class or charter travel
- Travel for companions
- Tax indemnification and gross-up payments
- Discretionary spending account

- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (e.g., 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 in 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.

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations

- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - 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) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
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4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2013

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MICHAEL RUBINGER PRESIDENT & CEO	(i) 435,166. (ii) 0	0	3,969.	26,775.	23,306.	489,216.	0
2 FRANCENA BROOKS EXECUTIVE VP OF PROGRAMS	(i) 239,841. (ii) 0	0	1,290.	24,854.	18,255.	284,240.	0
3 MICHAEL LEVINE EXECUTIVE VP & GENERAL COUNSEL	(i) 267,499. (ii) 0	0	1,344.	26,775.	13,108.	308,726.	0
4 TOBIN LEVY EXECUTIVE VP & CFO	(i) 265,527. (ii) 0	0	3,969.	26,775.	4,285.	300,556.	0
5 MATTHEW JOSEPHS SENIOR VICE PRESIDENT	(i) 188,632. (ii) 0	0	450.	15,412.	28,654.	233,148.	0
6 ELISE BALBONI SENIOR VICE PRESIDENT	(i) 137,097. (ii) 0	0	337.	14,274.	11,892.	163,600.	0
7 MARYJO ALLEN SENIOR VICE PRESIDENT	(i) 182,970. (ii) 0	0	6,180.	20,008.	15,261.	224,419.	0
8 LILY LIM VICE PRESIDENT/CONTROLLER	(i) 174,487. (ii) 0	0	690.	14,333.	28,774.	218,284.	0
9 GREGORY MAHER SENIOR VICE PRESIDENT	(i) 156,308. (ii) 0	0	579.	16,746.	18,518.	192,151.	0
10 RICHARD MANSON VICE PRESIDENT	(i) 149,190. (ii) 0	0	1,290.	16,181.	28,748.	195,409.	0
11 DENISE ALTAY VICE PRESIDENT	(i) 175,366. (ii) 0	0	1,290.	18,573.	16,785.	212,014.	0
12 CHARLES VLIETK VICE PRESIDENT	(i) 151,103. (ii) 0	0	1,284.	15,865.	611.	168,863.	0
13 MARGARET SLANE VICE PRESIDENT	(i) 144,555. (ii) 0	0	297.	15,985.	31,632.	192,469.	0
14 CELAYNE HILL VICE PRESIDENT	(i) 136,355. (ii) 0	0	1,198.	14,817.	12,775.	165,145.	0
15 JOE DIFILIPPI SENIOR VICE PRESIDENT	(i) 207,399. (ii) 0	0	1,980.	21,678.	23,204.	254,261.	0
16 MARIANO DIAZ VICE PRESIDENT	(i) 162,318. (ii) 0	0	1,980.	17,404.	28,007.	209,709.	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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 REENA BHATIA VICE PRESIDENT	152,294.	0	270.	13,344.	8,721.	174,629.	0
ANIKI GOSS-FOSTER VICE PRESIDENT	147,349.	0	298.	15,837.	28,454.	191,938.	0
2 BARBARA BURNHAM VICE PRESIDENT	151,061.	0	3,810.	16,515.	14,148.	185,534.	0
3 COURTNEY BRANKER ASSISTANT TREASURER	115,702.	0	336.	12,438.	24,585.	153,061.	0
4 MICHAEL TANG VICE PRESIDENT	129,488.	0	384.	13,823.	9,758.	153,453.	0
5 KEVIN JORDAN SENIOR VICE PRESIDENT	160,315.	0	450.	17,719.	33,006.	211,490.	0
6 LARRY OAKS VICE PRESIDENT	152,176.	0	412.	0	17,318.	169,906.	0
7 GERALDINE BAUM SENIOR VICE PRESIDENT	185,219.	0	1,290.	18,389.	13,380.	218,278.	0
8 BETH MARCUS SENIOR VICE PRESIDENT	161,099.	0	683.	17,544.	30,556.	209,882.	0
9 KENNETH PATRICK MAHER VICE PRESIDENT	135,799.	0	411.	14,601.	11,269.	162,080.	0
10 SUSANA VASQUEZ EXECUTIVE DIRECTOR	177,168.	0	300.	18,800.	30,553.	226,821.	0
11 DENISE NOTICE-SCOTT MANAGING DIRECTOR	182,005.	0	1,290.	19,391.	10,712.	213,398.	0
12 JOHN CHRISTOPHER WALKER DIRECTOR	158,890.	0	1,980.	17,306.	30,506.	208,682.	0
13 ORAMANTA NEWSOME EXECUTIVE DIRECTOR	142,749.	0	1,272.	15,568.	21,962.	181,551.	0
14 COLLETTE WILLIAMS ASSISTANT CONTROLLER	146,362.	0	446.	15,790.	20,671.	183,269.	0
15 ROBERT VAN METER EXECUTIVE DIRECTOR	131,748.	0	1,167.	12,423.	31,229.	176,567.	0
16	0	0	0	0	0	0	0

Schedule J (Form 990) 2013

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

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

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

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	JEANNE COLA EXECUTIVE DIRECTOR	131,203. 0	0 0	399. 0	14,279. 0	29,724. 0	175,605. 0	0 0
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

Part III Supplemental Information

Complete this part to 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 L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2013

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Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization: **LOCAL INITIATIVES SUPPORT CORPORATION**
Employer identification number: **13-3030229**

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1)									
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total ▶ \$ _____												

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2013

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MARY BURKHOLDER	FORMER OFFICER	12,786.	CONSULTING SERVICES		X
(2) GEORGE WALKER	DIRECTOR	530,564.	TRUST FUND MANAGEMENT		X
(3) EVELYN BROWN	FORMER OFFICER	10,323.	CONSULTING SERVICES		X
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

SCH L, PART IV

1 (B) MARY BURKHOLDER, A FORMER OFFICER OF LISC, IS PROVIDING CONSULTING SERVICES TO LISC. THE TOTAL AMOUNT PAID ON 2013 IS \$12,876.

2 (B) GEORGE WALKER, A CURRENT DIRECTOR OF LISC, IS AN OFFICER OF NEUBERGER BERMAN. NEUBERGER BERMAN MANAGES THE COMMON TRUST FUND FOR NONPROFITS THAT WORK WITH THE NYC LISC PROGRAM. LISC AND NEUBERGER BERMAN EARN FEES FROM THE COMMON TRUST FUND. THE TOTAL FEES THAT LISC EARNED IN 2013 WAS \$530,564.

3 (B) EVELYN BROWN, A FORMER OFFICER OF LISC, PROVIDED CONSULTING SERVICES. THE TOTAL AMOUNT PAID IN 2013 IS \$10,323.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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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 VP/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.

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 SENIOR VICE PRESIDENT 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 SENIOR VICE PRESIDENT OF HUMAN RESOURCES OR GENERAL COUNSEL ANY OUTSIDE AFFILIATIONS OR POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE THROUGHOUT THE YEAR. THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES AND/OR THE GENERAL COUNSEL REVIEWS THE OUTSIDE AFFILIATIONS TO DETERMINE IF THERE ARE ANY POTENTIAL

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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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 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 BY THE EXECUTIVE AND FINANCE COMMITTEE

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

OF THE LISC BOARD, WHICH IS COMPRISED OF INDEPENDENT PERSONS, IN EXECUTIVE SESSION. 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 EXECUTIVE AND FINANCE COMMITTEE, AND THE INTERNAL REVIEWS FOR ALL OTHER OFFICERS, 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 EXECUTIVE AND FINANCE COMMITTEE OF THE LISC BOARD OF DIRECTORS FOR ITS REVIEW AND RECOMMENDATION TO THE FULL BOARD OF DIRECTORS FOR APPROVAL. THE OFFICERS' COMPENSATION IS REVIEWED IN EXECUTIVE SESSION OF THE EXECUTIVE AND FINANCE COMMITTEE, AND NO OFFICERS, OTHER THAN THE PRESIDENT AND CEO AND SENIOR VICE PRESIDENT OF HUMAN RESOURCES, ARE PRESENT DURING SUCH EXECUTIVE SESSION, AND THE PRESIDENT AND CEO AND 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 EXECUTIVE AND FINANCE COMMITTEE AND THE BOARD OF DIRECTORS AT WHICH SUCH REVIEW IS CONDUCTED. LISC MEASURES AND REWARDS JOB PERFORMANCE ON THE BASIS OF JOB DUTIES AND RESPONSIBILITIES, AS DETERMINED BY AN INDEPENDENT, OUTSIDE FIRM USING COMPARABILITY DATA PREPARED BY THE HAY GROUP. 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 AND GUIDELINES FOR ADMINISTERING

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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SALARIES WITHIN RANGES. SALARY RANGES FOR ALL OFFICER AND NON-OFFICER STAFF ARE REVIEWED PERIODICALLY BY THE OUTSIDE FIRM. THE SALARY RANGES ARE PRESENTED ALONG WITH RECOMMENDED OFFICERS' COMPENSATION AT THE TIME OF APPROVAL. LISC ENGAGED AN OUTSIDE FIRM TO CONDUCT A REVIEW OF COMPENSATION FOR THE TOP EXECUTIVE POSITIONS OF LISC (PRESIDENT AND CEO, EXECUTIVE VICE PRESIDENTS, AND SENIOR VICE PRESIDENTS) TO SUPPORT THE REASONABLENESS OF THE SALARY INCREASES RECOMMENDED TO THE BOARD IN MARCH 2012. OUTSIDE TAX COUNSEL TO LISC REVIEWED THE ASSESSMENT, INCLUDING METHODOLOGY AND FINDINGS, AND SUCH COMPENSATION DATA WAS PRESENTED TO THE EXECUTIVE AND FINANCE COMMITTEE AS PART OF ITS REVIEW OF OFFICER COMPENSATION EFFECTIVE APRIL 2012.

FORM 990, PART VI, SECTION B, LINE 16B

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

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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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 CHARITABLE TAX-EXEMPT PURPOSES. LISC ALSO APPOINTS THE ENTIRE BOARD OF MANAGERS OF NMSC, THE MAJORITY OF WHICH ARE ALSO MEMBERS OF LISC STAFF.

IN 2013, LISC CREATED NEIGHBORHOOD REVITALIZATION NYC LLC ("NR-NYC") TO ADDRESS MOLD IN HOUSING LOCATED IN AREAS AFFECTED BY HURRICANE SANDY. LISC RECEIVED CONTRIBUTIONS TO SUPPORT THESE EFFORTS. LISC CHANNELED THESE FUNDS TO NR-NYC FOR THESE ACTIVITIES.

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 III, LINE 1 - ORGANIZATION'S MISSION

LOCAL INITIATIVES SUPPORT CORPORATION (LISC) ASSISTS COMMUNITY RESIDENTS THROUGHOUT URBAN AND RURAL AREAS OF THE UNITED STATES TO TRANSFORM DISTRESSED COMMUNITIES INTO HEALTHY AND SUSTAINABLE COMMUNITIES - GOOD PLACES TO WORK, DO BUSINESS, AND RAISE CHILDREN. LISC CARRIES OUT THIS CHARITABLE PURPOSE BY MARSHALING PUBLIC AND

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

PRIVATE SECTOR RESOURCES TO PROVIDE LOCAL COMMUNITY DEVELOPMENT ORGANIZATIONS (CDC'S) WITH TECHNICAL AND MANAGEMENT ASSISTANCE AND FINANCIAL SUPPORT IN THE FORM OF GRANTS, RECOVERABLE GRANTS, LOANS, LINES OF CREDIT, AND EQUITY INVESTMENTS. LISC IS HELPING BUILD SUSTAINABLE COMMUNITIES BY ACHIEVING FIVE GOALS: EXPANDING INVESTMENT IN HOUSING AND REAL ESTATE; INCREASING FAMILY INCOME AND WEALTH; STIMULATING ECONOMIC DEVELOPMENT; IMPROVING ACCESS TO QUALITY EDUCATION; AND SUPPORTING HEALTHY ENVIRONMENTS AND LIFESTYLES.

ATTACHMENT 2FORM 990, PART VI, LINE 17 - STATES

AK, CA, CT,
DC, FL, IL, IN, KS, MA, MI,
MN, MS, NJ, NY, OH, PA,
VA, WI,

ATTACHMENT 3990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
KPMG LLP 345 PARK AVENUE NEW YORK, NY 10154	AUDIT & TAX SERVICES	451,000.
ECONOMIC MOBILITY CORPORATION 233 BROADWAY NEW YORK, NY 10279	ASSESSMENT	406,906.
ROBERT WEISSBOURD 30 WEST MONROE STEET CHICAGO, IL 60603	PROGRAM DESIGN	262,100.

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
ATTACHMENT 3 (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>
CHAPLIN HALL CENTER FOR CHILDREN 1313 EAST 60TH STREET CHICAGO, IL 60637	PRG. IMPLEMENTATION	175,505.
CORPORATE F.A.C.T.S 51248 PLYMOUTH VALLEY DRIVE PLYMOUTH, MI 48170	TECHNICAL ASSISTANCE	170,929.

Related Organizations and Unrelated Partnerships
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 ▶ Attach to Form 990. ▶ See separate instructions.
 ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

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 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 13-4251148	TAX CREDITS	IL	7,767,178.	242,143.	N/A
(2) LISC LOUISIANA LOAN FUND, LLC 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 20-8539633	FINANCING	NY	92,184.	71,737.	N/A
(3) NEIGHBORHOOD PROPERTIES, LLC 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 26-3674004	ASSET MGMT.	NY	167,033.	-251,021.	N/A
(4) LISC COOK COUNTY HOUSING PRESERV., LLC 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 26-3479816	FINANCING	NY	16,528.	-25,374.	N/A
(5) NEIGHBORHOOD REVITALIZATION NYC LLC 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 46-1901030	MOLD TREATMEN	NY	14,656,258.	500.	N/A
(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 INITIATIVE, INC. 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 13-3690780	CMTY DEVELOP	NY	501 (C) (3)	9	LISC	X	
(2) NATIONAL EQUITY FUND, INC. 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 36-3490231	LOW-INC HSG	IL	501 (C) (4)	N/A	LISC	X	
(3) OREGON CORP FOR AFFORDABLE HOUSING 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 93-1113844	LOW-INC HSG	OR	501 (C) (3)	9	NEF, INC.	X	
(4) LOCAL INITIATIVES MANAGED ASSET CORP. 501 SEVENTH AVENUE, 7TH FL NEW YORK, NY 10018 11-2848981	CMTY DEVELOP	NY	501 (C) (3)	9	LISC	X	
(5) NEW YORK EQUITY FUND, INC. 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-4041986	LOW-INC HSG	IL	501 (C) (4)	N/A	NEF, INC.	X	
(6) NATIONAL EQUITY FUND, INC. 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606 36-3490231	LOW-INC HSG	IL	501 (C) (4)	N/A	LISC	X	
(7)							

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

Schedule R (Form 990) 2013

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) AFFORDABLE HOUSING PRESERVATIO 501 SEVENTH AVENUE, 7TH FL PRESERVATION	N/A	DE	N/A	N/A	0	0		X	0		X	
(2) AFFORDABLE HOUSING PRESERVATIO 501 SEVENTH AVENUE, 7TH FL MNG SERVICES	N/A	DE	N/A	N/A	0	0		X	0		X	
(3) BOA COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700 PRESERVATION		DE	NEF, INC	N/A	0	0		X	0		X	
(4) BOA COMMUNITY INVESTMENT III LP 10 S RIVERSIDE PLAZA STE 1700 MNG SERVICES		DE	NEF, INC	N/A	0	0		X	0		X	
(5) BOA COMMUNITY INVESTMENT IV LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
(6) BOA COMMUNITY INVESTMENT V LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEFCI, INC	N/A	0	0		X	0		X	
(7) CALIFORNIA EQUITY FUND 1990 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		CA	NEF, INC	N/A	0	0		X	0		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 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		
(2) COMMUNITY DEVELOPMENT ADVOCATES EAST INC 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		
(3) COMMUNITY DEVELOPMENT ADVOCATES ICG INC 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		
(4) COMMUNITY DEVELOPMENT ADVOCATES MIDWEST 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		
(5) COMMUNITY DEVELOPMENT ADVOCATES SOUTH IN 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		
(6) COMMUNITY DEVELOPMENT ADVOCATES WEST INC 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		
(7) NEF ASSIGNMENT CORPORATION 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0	0		

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	
<u>(1)</u> CALIFORNIA EQUITY FUND 1991 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		X	
<u>(2)</u> CALIFORNIA EQUITY FUND 1992 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		X	
<u>(3)</u> CALIFORNIA EQUITY FUND 1993 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		X	
<u>(4)</u> CALIFORNIA EQUITY FUND 1994 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		X	
<u>(5)</u> CALIFORNIA EQUITY FUND 1994 SE 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		X	
<u>(6)</u> CALIFORNIA EQUITY FUND 1995 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		X	
<u>(7)</u> CALIFORNIA EQUITY FUND 1996 LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO	CA	CA	NEF, INC	N/A	0	0		X	0		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
<u>(1)</u> NEF COMMUNITY CAPITAL INC. 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0		
<u>(2)</u> NEF MORTGAGE COOPERATION 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0		
<u>(3)</u> NEF SUPPORT CORPORATION 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0		
<u>(4)</u> COMMUNITY DEVELOPMENT ADVOCATES, INC. 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0		
<u>(5)</u> CDA TOTCO, INC. 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP	0	0		
<u>(6)</u> -----								
<u>(7)</u> -----								

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 1997 LP 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	CA	NEF, INC	N/A	0	0		X	0		X	
(2) CALIFORNIA EQUITY FUND 1998 LP 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	CA	NEF, INC	N/A	0	0		X	0		X	
(3) CALIFORNIA EQUITY FUND 1999 LP 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	CA	NEF, INC	N/A	0	0		X	0		X	
(4) CALIFORNIA EQUITY FUND 2000 LP 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(5) CALIFORNIA EQUITY FUND 2002 LL 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(6) CALIFORNIA EQUITY FUND 2003 LL 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(7) CALIFORNIA EQUITY FUND 2004 LL 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		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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Schedule R (Form 990) 2013

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 1995 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(2) CHICAGO EQUITY FUND 1996 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(3) CHICAGO EQUITY FUND 1997 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(4) CHICAGO EQUITY FUND 1998 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(5) CHICAGO EQUITY FUND 2000 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(6) CHICAGO EQUITY FUND 2001 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(7) CHICAGO EQUITY FUND 2002 LP 30 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		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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(5) -----									
(6) -----									
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Schedule R (Form 990) 2013

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 2003 LP 30 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(2) CHICAGO EQUITY FUND 2004 LP 32 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
(3) CITIGROUP CODE INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEE, INC	N/A	0	0		X	0		X	
(4) CRESCENT COMMUNITY INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(5) FIFTH THIRD INVESTMENT FUND LL 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(6) FIRST CHICAGO LEASING IF LLC 2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEE, INC	N/A	0	0		X	0		X	
(7) FNBC LEASING INVESTMENT FUND LL 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEE, INC	N/A	0	0		X	0		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) JP MORGAN CHASE LOW-INCOME HF 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(2) KEY CPC INVESTMENT_FUND_ILC_95 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(3) KEY USA INVESTMENT_FUND_ILC_95 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(4) MLI INVESTMENT_FUND_I_ILP_26-2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCIL, INC	N/A	0	0		X	0		X	
(5) NATIONAL AFFORDABLE HOUSING_FU 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCIL, INC	N/A	0	0		X	0		X	
(6) NATIONAL CITY INVESTMENT_FUND 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(7) NATIONAL EQUITY_FUND_1987_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		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) NATIONAL EQUITY FUND 1988 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(2) NATIONAL EQUITY FUND 1989 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(3) NATIONAL EQUITY FUND 1990 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(4) NATIONAL EQUITY FUND 1992 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(5) NATIONAL EQUITY FUND 1993 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(6) NATIONAL EQUITY FUND 1994 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(7) NATIONAL EQUITY FUND 1995 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		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) NATIONAL EQUITY FUND 1995 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(2) NATIONAL EQUITY FUND 2000 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(3) NATIONAL EQUITY FUND 2001 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(4) NATIONAL EQUITY FUND 2002 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(5) NATIONAL EQUITY FUND 2003 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(6) NATIONAL EQUITY FUND 2004 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(7) NATIONAL EQUITY FUND 2005 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCL, INC	N/A	0	0		X	0		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 2006 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(2) NATIONAL EQUITY FUND 2006 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(3) NATIONAL EQUITY FUND 2007 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(4) NATIONAL EQUITY FUND 2007 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(5) NATIONAL EQUITY FUND 2008 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(6) NATIONAL EQUITY FUND 2008 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(7) NAHIF XX - NEF LLC 20-1651241 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		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) -----									

Schedule R (Form 990) 2013

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) NAFIF XIV - NEF LLC 20-0690738 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(2) NAFIF XVII - NEF LLC 20-506144 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HS	DE	NEF, INC	N/A	0	0		X	0		X	
(3) NAFIF XVIII - NEF LLC 20-097139 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(4) NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(5) NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(6) NEF HEARTLAND FUND LLC 20-00083 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(7) NEW YORK ACQUISITION FUND LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		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_1988_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(2) NEW YORK EQUITY FUND_1989_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(3) NEW YORK EQUITY FUND_1990_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(4) NEW YORK EQUITY FUND_1992_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(5) NEW YORK EQUITY FUND_1993_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(6) NEW YORK EQUITY FUND_1994_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(7) NEW YORK EQUITY FUND_1995_LP_3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		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) NEW YORK EQUITY FUND 1995 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NYEF, INC	N/A	0	0		X	0		X	
(2) NEW YORK EQUITY FUND 2000 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NEF, INC	N/A	0	0		X	0		X	
(3) NEW YORK EQUITY FUND 2000 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	NYEF, INC	N/A	0	0		X	0		X	
(4) NEW YORK EQUITY FUND 2001 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		X	
(5) NEW YORK EQUITY FUND 2002 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		X	
(6) NEW YORK EQUITY FUND 2003 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		X	
(7) NEW YORK EQUITY FUND 2004 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		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) NEW YORK EQUITY FUND 2005 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		X	
(2) NEW YORK EQUITY FUND 2006 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		X	
(3) NEW YORK EQUITY FUND 2008 LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NYEF, INC	N/A	0	0		X	0		X	
(4) NEWARK COMMUNITY INVESTMENT_FU 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(5) PRESERVATION LLC 20-5160740 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCL, INC	N/A	0	0		X	0		X	
(6) THE LA QUINTA EQUITY FUND LP 2 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCL, INC	N/A	0	0		X	0		X	
(7) US AFFORDABLE HOUSING CIF II L 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCL, INC	N/A	0	0		X	0		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	
<u>(1)</u> WASHINGTON MUTUAL CIF LLC 36-4 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
<u>(2)</u> NATIONAL EQUITY FUND 1991 LP 3 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
<u>(3)</u> NATIONAL EQUITY FUND 1996 LP 3 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
<u>(4)</u> NATIONAL EQUITY FUND 1996 SERI 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
<u>(5)</u> NATIONAL EQUITY FUND 1997 LP 3 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
<u>(6)</u> NATIONAL EQUITY FUND 1997 SERI 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		X	
<u>(7)</u> NATIONAL EQUITY FUND 1999 LP 3 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEF, INC	N/A	0	0		X	0		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
<u>(1)</u> -----								
<u>(2)</u> -----								
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<u>(4)</u> -----								
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Schedule R (Form 990) 2013

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 SERI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(2) METLIFE INVESTMENT FUND LLC-36 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(3) ONE ECONOMY FUND I LLC 20-2660 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(4) US AFFORDABLE HOUSING CIF LLC 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
(5) TD BANKNORTH HOUSING INVESTMEN 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(6) CASA PUEBLA INVESTORS LLC 36-4 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
(7) DEBORAH'S PLACE III INVESTORS 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		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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(5) -----									
(6) -----									
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Schedule R (Form 990) 2013

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	
<u>(1)</u> SOUTH LOOP INVESTORS LP 36-424 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
<u>(2)</u> VICTORY SQUARE LIMITED PARTNER 501 SEVENTH AVENUE, 7TH FL	LOW-INCOME HO	PA	N/A	N/A	0	0		X	0		X	
<u>(3)</u> CORAL NEW HAVEN ASSOCIATES II 501 SEVENTH AVENUE, 7TH FL	LOW-INCOME HO	CT	N/A	N/A	0	0		X	0		X	
<u>(4)</u> EAST HARLEM ABYSSINIAN TRIANGL 501 SEVENTH AVENUE, 7TH FL	COMMUNITY DEV	NY	N/A	N/A	0	0		X	0		X	
<u>(5)</u> BLOOM LAKE NEW MARKETS INVESTM 501 SEVENTH AVENUE, 7TH FL	COMMUNITY DEV	DE	NMSC, LLC	N/A	0	0		X	0		X	
<u>(6)</u> WEST ALLIS INVESTMENT FUND 20- 501 SEVENTH AVENUE, 7TH FL	COMMUNITY DEV	MO	NMSC, LLC	N/A	0	0		X	0		X	
<u>(7)</u> BANK OF AMERICA CHIF VI LP 27- 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	BOACHIE FND MGR N/A	N/A	0	0		X	0		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
<u>(1)</u> -----									
<u>(2)</u> -----									
<u>(3)</u> -----									
<u>(4)</u> -----									
<u>(5)</u> -----									
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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 INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700 COMMUNITY DEV		IL	NEFCL, INC	N/A	0	0		X	0		X	
(2) NEF AFFORD HOUS INVEST FUND LP 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEFCL, INC	N/A	0	0		X	0		X	
(3) STATE FARM GOOD NEIGHBOR FUND 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEFCL, INC	N/A	0	0		X	0		X	
(4) WECIH INVESTMENT FUND I LLC 27 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEFCL, INC	N/A	0	0		X	0		X	
(5) WINTRUST COMMUNITY INVESTMENT 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		DE	NEFCL, INC	N/A	0	0		X	0		X	
(6) HOMESTEAD EQUITY FUND A - OREG 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		OR	NEFCL, INC	N/A	0	0		X	0		X	
(7) HOMESTEAD EQUITY FUND A - WASH 10 S RIVERSIDE PLAZA STE 1700 LOW-INCOME HO		OR	OREGON AFF HOUS	N/A	0	0		X	0		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	
<u>(1)</u> HOMESTEAD_EQUITY_FUND_B - OREG 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(2)</u> HOMESTEAD_EQUITY_FUND_II_LP_93 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(3)</u> HOMESTEAD_EQUITY_FUND_III_PROPR 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(4)</u> HOMESTEAD_EQUITY_FUND_III_LP_2 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(5)</u> HOMESTEAD_EQUITY_FUND_IV_LP_72 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(6)</u> HOMESTEAD_EQUITY_FUND_LP_93-12 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(7)</u> HOMESTEAD_EQUITY_FUND_V_LP_20- 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		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
<u>(1)</u> -----									
<u>(2)</u> -----									
<u>(3)</u> -----									
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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	
<u>(1)</u> HOMESTEAD_EQUITY_FUND_VI_LP_20 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(2)</u> HOMESTEAD_EQUITY_FUND_VII_LP_2 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(3)</u> HOMESTEAD_NORTHERN_CALIFORNIA 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(4)</u> HOMESTEAD_WESTERN_COMMUNITIES 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(5)</u> OREGON_EQUITY_FUND_II_LP_93-11 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(6)</u> OREGON_EQUITY_FUND_III_LP_93-11 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(7)</u> OREGON_EQUITY_FUND_IV_LP_93-12 10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		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
<u>(1)</u> -----									
<u>(2)</u> -----									
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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	
<u>(1)</u> HOMESTEAD PRESERVATION LLC 27-10 S RIVERSIDE PLAZA STE 1700	LOW INCOME HO	IL	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(2)</u> HOMESTEAD EQUITY FUND VIII LP	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(3)</u> HOMESTEAD EQUITY FUND IX LP 27	LOW INCOME HO	OR	OREGON AFF HOUS	N/A	0	0		X	0		X	
<u>(4)</u> NEF NEIGHBORHOOD REVITALIZ FU	LOW INCOME HO	DE	MN REV END II M	N/A	0	0		X	0		X	
<u>(5)</u> BANK OF AMERICA CHIF VI LP 27	LOW INCOME HO	DE	BOACHIF END MGR	N/A	0	0		X	0		X	
<u>(6)</u> BOF AMERICA CHIF LLC 36-440158	LOW INCOME HO	IL	N/A	N/A	0	0		X	0		X	
<u>(7)</u> MAURY SENIOR RETIREMENT 54-198	LOW-INCOME HO	VA	N/A	N/A	0	0		X	0		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
<u>(1)</u> -----									
<u>(2)</u> -----									
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<u>(7)</u> -----									

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) MCCLELLAN PLACE APARTMENTS, 71-10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	AZ	N/A	N/A	0	0		X	0		X	
(2) MERIDIAN STRATFORD, 38-3628164	LOW-INCOME HO	MI	N/A	N/A	0	0		X	0		X	
(3) MS SHARED INVESTMENT FUND I, LL	LOW-INCOME HO	DE	N/A	N/A	0	0		X	0		X	
(4) MS SINGLE INVESTOR FUND I, LLC	LOW-INCOME HO	DE	N/A	N/A	0	0		X	0		X	
(5) NEF AFFORD HOUS INVEST FUND LP	LOW-INCOME HO	DE	N/A	N/A	0	0		X	0		X	
(6) NATIONAL EQUITY FUND 2009 LP 2	LOW-INCOME HO	DE	N/A	N/A	0	0		X	0		X	
(7) NEF AFFORD HOUS INVEST FUND LP	LOW-INCOME HO	DE	N/A	N/A	0	0		X	0		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	
<u>(1)</u> NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEF, INC	N/A	0	0		X	0		X	
<u>(2)</u> RAUL MORALES TERRACE 13-279550 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	NY	CDA INC	N/A	0	0		X	0		X	
<u>(3)</u> NEF INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	N/A	N/A	0	0		X	0		X	
<u>(4)</u> NEF INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	IL	NEFCI, INC	N/A	0	0		X	0		X	
<u>(5)</u> NEF NATIONAL COMMUNITY INVESTM 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
<u>(6)</u> NEF NEIGHBORHOOD REVITALIZATIO 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		X	
<u>(7)</u> NEF NEW YORK SPECIAL TAX CREDI 10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	DE	NEFCI, INC	N/A	0	0		X	0		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
<u>(1)</u> -----									
<u>(2)</u> -----									
<u>(3)</u> -----									
<u>(4)</u> -----									
<u>(5)</u> -----									
<u>(6)</u> -----									
<u>(7)</u> -----									

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) PHILIP C. DEAN APARTMENTS, 38-10 S RIVERSIDE PLAZA STE 1700	LOW-INCOME HO	MI	CDA MIDWEST INC. N/A		0	0		X	0		X	
(2) REBECCA WALKER COMPLEX, 36-3954	LOW-INCOME HO	IL	CDA CENTRAL INC. N/A		0	0		X	0		X	
(3) STATE FARM GOOD NEIGHBOR FUND	LOW-INCOME HO	DE	NEFCL, INC		0	0		X	0		X	
(4) TOTCO HOMES, 34-1823570	LOW-INCOME HO	OH	CDA TOTCO		0	0		X	0		X	
(5) CL DELLDMS (OAKLAND), 94-31947	LOW-INCOME HO	CA	CDA INC		0	0		X	0		X	
(6) TANGERINE PLAZA INVESTMENT FUN	LOW-INCOME HO	DE	NMSC, LLC		0	0		X	0		X	
(7) ACHIEVEMENT ACADEMY INVESTMENT	LOW-INCOME HO	MO	NMSC, LLC		0	0		X	0		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) NORTHWEST HARVEST INVESTMENT FUND 501 SEVENTH AVENUE, 7TH FL COMMUNITY DEV		DE	NMSC, LLC	N/A	0	0		X	0		X	
(2) LISC/BOA NM 40 INVESTMENT FUND 501 SEVENTH AVENUE, 7TH FL COMMUNITY DEV		DE	NMSC, LLC	N/A	0	0		X	0		X	
(3) THE RETAIL INITIATIVE 1994 LP 501 SEVENTH AVENUE, 7TH FL COMMUNITY DEV		NY	TRI, INC	RELATED	0	0		X	0		X	
(4) NEW MARKETS INVESTMENT 81 LLC 10 S RIVERSIDE PLAZA STE 1700 COMMUNITY DEV		IL	LISC	RELATED	0	0		X	0		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 IV Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b	Gift, grant, or capital contribution to related organization(s)	X	
c	Gift, grant, or capital contribution from related organization(s)	X	
d	Loans or loan guarantees to or for related organization(s)	X	
e	Loans or loan guarantees by related organization(s)	X	
f	Dividends from related organization(s)		X
g	Sale of assets to related organization(s)		X
h	Purchase of assets from related organization(s)		X
i	Exchange of assets with related organization(s)		X
j	Lease of facilities, equipment, or other assets to related organization(s)		X
k	Lease of facilities, equipment, or other assets from related organization(s)		X
l	Performance of services or membership or fundraising solicitations for related organization(s)		X
m	Performance of services or membership or fundraising solicitations by related organization(s)		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o	Sharing of paid employees with related organization(s)		X
p	Reimbursement paid to related organization(s) for expenses		X
q	Reimbursement paid by related organization(s) for expenses		X
r	Other transfer of cash or property to related organization(s)		X
s	Other transfer of cash or property from related organization(s)		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NATIONAL EQUITY FUND	O	117,161.	BOOK VALUE
(2) NATIONAL EQUITY FUND	Q	384,721.	BOOK VALUE
(3) NATIONAL EQUITY FUND	P	109,555.	BOOK VALUE
(4) NATIONAL EQUITY FUND	C	2,539,000.	BOOK VALUE
(5) NATIONAL EQUITY FUND	D	20,000,000.	BOOK VALUE
(6) NATIONAL EQUITY FUND	L	1,650,000.	BOOK VALUE

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 section 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) -----													

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Underpayment of Estimated Tax by Corporations

2013

▶ Attach to the corporation's tax return.

▶ Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

Name: **LOCAL INITIATIVES SUPPORT CORPORATION** Employer identification number: **13-3030229**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)		1
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	
4	Enter the tax shown on the corporation's 2012 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions).

6	<input type="checkbox"/>	The corporation is using the adjusted seasonal installment method.
7	<input type="checkbox"/>	The corporation is using the annualized income installment method.
8	<input type="checkbox"/>	The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
9	Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year			
10	Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column			
11	Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15			
<i>Complete lines 12 through 18 of one column before going to the next column.</i>				
12	Enter amount, if any, from line 18 of the preceding column			
13	Add lines 11 and 12			
14	Add amounts on lines 16 and 17 of the preceding column			
15	Subtract line 14 from line 13. If zero or less, enter -0-			
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-			
17	Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18			
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column			

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2013

Department of the Treasury Internal Revenue Service

For calendar year 2013 or other tax year beginning 2013, and ending 2013, and ending 2013

Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Form header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; D Employer identification number; E Unrelated business activity codes; F Group exemption number; G Check organization type.

Form section H through J: H Describe the organization's primary unrelated business activity (ATTACHMENT 1); I During the tax year, was the corporation a subsidiary...; J The books are in care of LILY LIM, Telephone number 212-455-9800.

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13 including Gross receipts, Cost of goods sold, Rent income, etc.

Table for Part II: Deductions Not Taken Elsewhere. Rows 14-34 including Compensation of officers, Salaries and wages, Repairs and maintenance, etc.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here [] See instructions and:
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
(1) \$ [] (2) \$ [] (3) \$ []
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ []
(2) Additional 3% tax (not more than \$100,000) \$ []
c Income tax on the amount on line 34 35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: [] Tax rate schedule or [] Schedule D (Form 1041) 36
37 Proxy tax. See instructions 37
38 Alternative minimum tax 38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies 39

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a
b Other credits (see instructions) 40b
c General business credit. Attach Form 3800 (see instructions) 40c
d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d
e Total credits. Add lines 40a through 40d 40e
41 Subtract line 40e from line 39 41
42 Other taxes. Check if from: [] Form 4255 [] Form 8611 [] Form 8697 [] Form 8866 [] Other (attach schedule) 42
43 Total tax. Add lines 41 and 42 43 0
44 a Payments: A 2012 overpayment credited to 2013 44a
b 2013 estimated tax payments 44b
c Tax deposited with Form 8868. 44c
d Foreign organizations: Tax paid or withheld at source (see instructions) 44d
e Backup withholding (see instructions) 44e
f Credit for small employer health insurance premiums (Attach Form 8941) 44f
g Other credits and payments: [] Form 2439 [] Form 4136 [] Other Total 44g
45 Total payments. Add lines 44a through 44g 45
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached. 46
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed 47
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48
49 Enter the amount of line 48 you want: Credited to 2014 estimated tax [] Refunded [] 49

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here [] Yes [] No X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. [] Yes [] No X
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ []

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

1 Inventory at beginning of year 1
2 Purchases 2
3 Cost of labor 3
4 a Additional section 263A costs (attach schedule) 4a
b Other costs (attach schedule) 4b
5 Total. Add lines 1 through 4b 5
6 Inventory at end of year 6
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2, 7
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? [] Yes [] No X

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer [] Date [] Title []
May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Paid Preparer Use Only
Print/Type preparer's name JOCELYNE C MILLER
Preparer's signature [] Date []
Check [] if self-employed PTIN P00634378
Firm's name KPMG LLP Firm's EIN 13-5565207
Firm's address 1676 INTERNATIONAL DRIVE Phone no. 703-286-8000
MCLEAN, VA 22102

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1) OFFICE BUILDING SPACE

(2)

(3)

(4)

2. Rent received or accrued

Table with columns for (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income. Includes rows for (1), (2), (3), (4), Total, and (c) Total income.

Schedule E - Unrelated Debt-Financed Income (see instructions)

Table with columns for 1. Description of debt-financed property, 2. Gross income from or allocable to debt-financed property, 3. Deductions directly connected with or allocable to debt-financed property, 4. Amount of average acquisition debt, 5. Average adjusted basis, 6. Column 4 divided by column 5, 7. Gross income reportable, 8. Allocable deductions, and Totals.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table for Exempt Controlled Organizations with columns for 1. Name of controlled organization, 2. Employer identification number, 3. Net unrelated income, 4. Total of specified payments made, 5. Part of column 4 that is included in the controlling organization's gross income, and 6. Deductions directly connected with income.

Nonexempt Controlled Organizations

Table for Nonexempt Controlled Organizations with columns for 7. Taxable income, 8. Net unrelated income, 9. Total of specified payments made, 10. Part of column 9 that is included in the controlling organization's gross income, and 11. Deductions directly connected with income.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals ▶		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) . . . ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1-5) ▶		Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).			Enter here and on page 1, Part II, line 27.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) ATCH 4		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14. ▶			

ATTACHMENT 1

ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY.

LEASING OF OFFICE BUILDING SPACE AND SOFTWARE CUSTOMIZATION

ATTACHMENT 2FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

ADVERTISEMENT	5,678.
OFFICE CLEANING & MAINTENANCE	28,117.
COMPUTER EXPENSE & SUPPLIES	11,457.
OFFICE SUPPLIES	13,961.
POSTAGE & DELIVERY	990.
TELECOMMUNICATIONS	40,739.
CONTRACTED SERVICES	4,679.
CONFERENCE & MEETINGS	153.
MANAGEMENT FEES	235,984.
INSURANCE EXPENSE	6,298.
MOVING	5,528.
MISCELLANEOUS EXPENSE	25.
 PART II - LINE 28 - OTHER DEDUCTIONS	 <u>353,609.</u>

SCHEDULE C - RENT INCOME DEDUCTIONS

ATTACHMENT 3

OFFICE BUILDING SPACE

RENT & UTILITIES	165,991.
EQUIPMENT RENTAL	19,810.
TOTAL	<u>185,801.</u>

ATTACHMENT 4

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
DENNIS WHITE	DIRECTOR	0	0
TOTAL COMPENSATION			<u>0</u>