



2015 Income Tax Returns

LOCAL INITIATIVES SUPPORT CORPORATION

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

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning , 2015, 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 \$ 138,337,375.
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		J Website: WWW.LISC.ORG				H(c) Group exemption number ▶
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: TO ASSIST COMMUNITY RESIDENTS THROUGHOUT URBAN AND RURAL AREAS OF THE UNITED STATES TO TRANSFORM DISTRESSED NEIGHBORHOODS INTO HEALTHY AND SUSTAINABLE COMMUNITIES.		
	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 25.	
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5 684.	
	6 Total number of volunteers (estimate if necessary)	6 0.	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 241,168.	
7b Net unrelated business taxable income from Form 990-T, line 34	7b 0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 105,519,668.	Current Year 98,640,981.
	9 Program service revenue (Part VIII, line 2g)	29,105,677.	37,109,462.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	316,813.	1,009,058.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	543,530.	198,077.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	135,485,688.	136,957,578.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	41,323,187.
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)		37,726,116.	39,433,859.
16a Professional fundraising fees (Part IX, column (A), line 11e)		153,679.	141,625.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,365,750.			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		44,136,791.	39,794,775.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		123,339,773.	121,483,767.
19 Revenue less expenses. Subtract line 18 from line 12	12,145,915.	15,473,811.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 487,398,511.	End of Year 532,851,753.
	21 Total liabilities (Part X, line 26)	241,774,939.	272,503,613.
	22 Net assets or fund balances. Subtract line 21 from line 20.	245,623,572.	260,348,140.

COPY FOR PUBLIC INSPECTION

Part II Signature Block

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

Sign Here	Signature of officer	Date 11/07/2016	
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name DEVIN L DUNCAN	Preparer's signature <i>Devin L Duncan</i>	Date 11/07/2016
	Firm's name ▶ KPMG LLP	Firm's EIN ▶ 13-5565207	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ 345 PARK AVENUE NEW YORK, NY 10154-0102	Phone no. 212-758-9700	PTIN P01249521

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** (2015)

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, 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018

Telephone No. ► 212 455-9800 FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2016, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year 2015 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.

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

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

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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 LILY 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 11/15, 2016.

5 For calendar year 2015, 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 _____

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 Joyce C. Thill Title Paid Preparer Date 8/3/16

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

SEE SCHEDULE O.

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

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

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

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

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

4a (Code:) (Expenses \$ 50,037,748. including grants of \$) (Revenue \$ 22,789,339.)

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

4b (Code:) (Expenses \$ 42,113,508. including grants of \$ 42,113,508.) (Revenue \$)

PROJECT GRANTS. LISC PROVIDES GRANTS TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO SUPPORT THEIR EFFORTS TO TRANSFORM DISTRESSED COMMUNITIES. IN 2015, LISC ISSUED GRANTS TO 818 ENTITIES THROUGHOUT THE COUNTRY TO SUPPORT THE DEVELOPMENT OF 4,667 UNITS OF AFFORDABLE HOMES AND APARTMENTS; 414,801 SQUARE FEET OF COMMERCIAL, COMMUNITY, AND EDUCATIONAL FACILITY SPACE; AND THE CAPACITY BUILDING, OPERATIONS, AND OTHER COMMUNITY DEVELOPMENT ACTIVITIES OF NON-PROFIT COMMUNITY BASED ORGANIZATIONS.

4c (Code:) (Expenses \$ 8,933,189. including grants of \$) (Revenue \$ 14,429,252.)

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

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

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

4e Total program service expenses 101,084,445.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No checkboxes. Rows include questions 20a through 38 regarding organizational operations, financial statements, grants, compensation, tax-exempt bonds, and controlled entities.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No response columns. Includes entries for Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 990, Form 720, and Form 709.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (26), 1b (25), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 1
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

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

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

Check if Schedule O contains a response or note to any line in this Part VII. 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 & DIRECTOR	35.00 0.	X		X				531,198.	0.	48,796.
(2) GREGORY BELINFANTI DIRECTOR	1.00 0.	X						0.	0.	0.
(3) LISA CASHIN VICE CHAIR & DIRECTOR	1.00 0.	X		X				0.	0.	0.
(4) AUDREY CHOI DIRECTOR	1.00 0.	X						0.	0.	0.
(5) LARRY DALE DIRECTOR	1.00 0.	X						0.	0.	0.
(6) MICHELLE DE LA UZ DIRECTOR	1.00 0.	X						0.	0.	0.
(7) SALLY DURDAN DIRECTOR	1.00 0.	X						0.	0.	0.
(8) TOMAS ESPINOZA DIRECTOR	1.00 0.	X						0.	0.	0.
(9) DEAN ESSERMAN DIRECTOR	1.00 0.	X						0.	0.	0.
(10) ELLEN GILLIGAN DIRECTOR	1.00 0.	X						0.	0.	0.
(11) LISA GLOVER DIRECTOR	1.00 0.	X						0.	0.	0.
(12) COLVIN W. GRANNUM DIRECTOR	1.00 0.	X						0.	0.	0.
(13) LISA HASEGAWA DIRECTOR	1.00 0.	X						0.	0.	0.
(14) KEVIN JOHNSON DIRECTOR	1.00 0.	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) TIM MCFADDEN ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(16) BRANDEE MCHALE ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(17) KATHY MERCHANT ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(18) RONALD PHILLIPS ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(19) ANDREW PLEPLER ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(20) REY RAMSEY ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(21) RICHARD RAPSON ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(22) LATA REDDY ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(23) ROBERT RUBIN ----- CHAIRMAN & DIRECTOR	1.00 ----- 0.	X		X			0.	0.	0.	
(24) NILDA RUIZ ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(25) GEORGE WALKER ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
1b Sub-total							531,198.	0.	48,796.	
c Total from continuation sheets to Part VII, Section A							6,106,465.	938,200.	1,574,524.	
d Total (add lines 1b and 1c)							6,637,663.	938,200.	1,623,320.	

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 ► 96

	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
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 11

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) DENNIS WHITE ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(27) REENA ABRAHAM ----- VICE PRESIDENT	35.00 ----- 0.			X			163,727.	0.	35,906.	
(28) MARYJO ALLEN ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			205,161.	0.	34,272.	
(29) DENISE ALTAY ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			251,118.	0.	38,866.	
(30) SUZANNE ANARDE ----- VICE PRESIDENT	35.00 ----- 0.			X			148,526.	0.	15,463.	
(31) ELISE BALBONI ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			192,658.	0.	52,186.	
(32) GERALDINE BAUM ----- SENIOR VICE PRESIDENT	35.00 ----- 0.			X			215,779.	0.	33,841.	
(33) COURTNEY BRANKER ----- ASSISTANT TREASURER	35.00 ----- 0.			X			124,664.	0.	40,103.	
(34) MARIANO DIAZ ----- VICE PRESIDENT (THRU 02/2015)	35.00 ----- 0.			X			102,949.	0.	11,075.	
(35) JOE DIFILIPPI ----- SENIOR VICE PRESIDENT & CIO	35.00 ----- 0.			X			213,673.	0.	46,787.	
(36) ANIKA GOSS-FOSTER ----- VICE PRESIDENT (THRU 12/2015)	35.00 ----- 0.			X			165,835.	0.	49,917.	
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 **▶** 96

	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			
(37) MICHAEL HEARNE EXECUTIVE VP & CFO	35.00 0.			X			277,052.	0.	8,413.	
(38) CELAYNE HILL VICE PRES & DEP GEN COUNSEL	35.00 0.			X			145,362.	0.	28,376.	
(39) JOSEPH HORIYE PROGRAM VICE PRESIDENT	35.00 0.			X			145,855.	0.	13,801.	
(40) KEVIN JORDAN SENIOR VICE PRESIDENT	35.00 0.			X			192,417.	0.	52,186.	
(41) MATTHEW JOSEPHS SENIOR VICE PRESIDENT	35.00 0.			X			205,791.	0.	55,956.	
(42) MICHAEL LEVINE EXEC VP & GEN COUNSEL & SEC	35.00 0.			X			276,444.	0.	40,330.	
(43) LILY LIM SENIOR VICE PRES/CONTROLLER	35.00 0.			X			193,308.	0.	47,415.	
(44) RICHARD MANSON PROGRAM VICE PRESIDENT	35.00 0.			X			163,083.	0.	39,107.	
(45) BETH MARCUS SENIOR VICE PRESIDENT	35.00 0.			X			186,198.	0.	54,552.	
(46) CONSTANCE MAX VP & CHIEF CREDIT OFFICER	35.00 0.			X			160,521.	0.	48,961.	
(47) ORAMENTA NEWSOME PROGRAM VICE PRESIDENT	35.00 0.			X			161,752.	0.	40,103.	
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 ► 96

	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			
(48) DENISE NOTICE-SCOTT EXECUTIVE VP FOR PROGRAMS	35.00 0.			X			279,689.	0.	38,652.	
(49) KENNETH PATRICK MAHER VICE PRESIDENT	35.00 0.			X			154,207.	0.	27,521.	
(50) RICHARD PINNER ASSISTANT SECRETARY	35.00 0.			X			119,445.	0.	24,902.	
(51) WILLIAM TAFT PROGRAM VICE PRESIDENT	35.00 0.			X			149,929.	0.	47,699.	
(52) MICHAEL TANG VICE PRESIDENT	35.00 0.			X			136,679.	0.	25,773.	
(53) CHRISTINA TRAVERS VICE PRESIDENT & TREASURER	35.00 0.			X			132,807.	0.	23,235.	
(54) CHARLES VLIK PROGRAM VICE PRESIDENT	35.00 0.			X			162,089.	0.	16,812.	
(55) KEVIN BOES SENIOR VICE PRESIDENT	1.00 40.00			X			0.	377,660.	52,725.	
(56) JOSEPH HAGAN SENIOR VICE PRESIDENT	1.00 40.00			X			0.	560,540.	218,904.	
(57) SAM MARKS EXECUTIVE DIRECTOR	35.00 0.					X	170,165.	0.	34,177.	
(58) SUSANA VASQUEZ EXECUTIVE DIRECTOR	35.00 0.					X	165,301.	0.	41,336.	
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 **▶** 96

	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			
(59) ANDRIANA ABARIOTES EXECUTIVE DIRECTOR	35.00 0.					X		135,628.	0.	48,951.
(60) JOHN CHRISTOPHER WALKER DIRECTOR OF RESEARCH	35.00 0.					X		170,179.	0.	52,452.
(61) JEANNE COLA EXECUTIVE DIRECTOR	35.00 0.					X		141,932.	0.	48,077.
(62) ROBERT VAN METER EXECUTIVE DIRECTOR	35.00 0.					X		141,225.	0.	47,653.
(63) COLLETTE WILLIAMS ASSISTANT CONTROLLER	35.00 0.					X		155,317.	0.	38,039.
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 ▶ 96

	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.

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d	7,421,000.					
	e Government grants (contributions)	1e	39,679,355.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	51,540,626.					
	g Noncash contributions included in lines 1a-1f: \$		15,294.					
	h Total. Add lines 1a-1f			98,640,981.				
	Program Service Revenue	2a <u>EQUITY IN EARNINGS OF AFFILIATES</u>			Business Code			
			531390	13,357,565.	13,357,565.			
b <u>COMMUNITY DEVELOPMENT FEES</u>			531390	7,294,707.	7,053,539.	241,168.		
c <u>INTEREST-COMMUNITY DEVEL. LOANS</u>			531390	11,510,624.	11,510,624.			
d <u>CONSULTING INCOME</u>			531390	1,774,191.	1,774,191.			
e <u>LOAN FEES - LEGAL & CLOSING COSTS</u>			531390	2,581,239.	2,581,239.			
f All other program service revenue				591,136.	591,136.			
g Total. Add lines 2a-2f				37,109,462.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).			1,108,562.			1,108,562.	
	4 Income from investment of tax-exempt bond proceeds			0.				
	5 Royalties			0.				
	6a Gross rents	(i) Real	371,710.					
		(ii) Personal						
		b Less: rental expenses		682,546.				
		c Rental income or (loss)		-310,836.				
	d Net rental income or (loss)				-310,836.		-310,836.	
	7a Gross amount from sales of assets other than inventory	(i) Securities	594,018.	(ii) Other	3,729.			
		b Less: cost or other basis and sales expenses			695,145.	2,106.		
		c Gain or (loss)			-101,127.	1,623.		
		d Net gain or (loss)				-99,504.		-99,504.
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a						
	b Less: direct expenses	b						
	c Net income or (loss) from fundraising events				0.			
9a Gross income from gaming activities. See Part IV, line 19	a							
b Less: direct expenses	b							
c Net income or (loss) from gaming activities				0.				
10a Gross sales of inventory, less returns and allowances	a							
b Less: cost of goods sold	b							
c Net income or (loss) from sales of inventory				0.				
Miscellaneous Revenue				Business Code				
11a <u>RECOVERIES</u>		900099	337,389.	337,389.				
b <u>WORKERS COMP REFUND</u>		900099	123,535.			123,535.		
c <u>CREDIT CARD REBATE</u>		900099	35,081.			35,081.		
d All other revenue		900099	12,908.	12,908.				
e Total. Add lines 11a-11d			508,913.					
12 Total revenue. See instructions.			136,957,578.	37,218,591.	241,168.	856,838.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	40,515,502.	40,515,502.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,598,006.	1,598,006.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	7,066,583.	3,438,045.	2,813,290.	815,248.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	23,830,480.	15,597,101.	5,213,803.	3,019,576.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,863,703.	1,227,831.	399,658.	236,214.
9 Other employee benefits	4,582,540.	2,969,120.	1,067,598.	545,822.
10 Payroll taxes	2,090,553.	1,298,233.	533,091.	259,229.
11 Fees for services (non-employees):				
a Management	3,523,356.	3,065,750.	457,606.	
b Legal	1,412,169.	1,349,510.	42,159.	20,500.
c Accounting	429,840.		429,840.	
d Lobbying	236,814.	147,062.	60,388.	29,364.
e Professional fundraising services. See Part IV, line 17.	141,625.			141,625.
f Investment management fees	224,693.		224,693.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	8,200,884.	8,200,884.		
12 Advertising and promotion	53,551.	26,803.	21,396.	5,352.
13 Office expenses	1,359,567.	844,291.	346,690.	168,586.
14 Information technology	746,439.	463,539.	190,342.	92,558.
15 Royalties	0.			
16 Occupancy	3,527,399.	2,614,376.	390,990.	522,033.
17 Travel	2,666,663.	1,991,885.	454,006.	220,772.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	697,922.	450,825.	166,252.	80,845.
20 Interest	5,554,290.	5,554,290.		
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	631,368.	392,081.	160,998.	78,289.
23 Insurance	846,415.		846,415.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MOLD REMEDIATION -----	5,009,367.	5,009,367.		
b PROV. FOR LOSS ON LOAN REC -----	2,305,562.	2,305,562.		
c PROV. FOR LOSS ON OTHER REC. -----	153,637.	153,637.		
d PROV. FOR UNCOLL RCVRB GNTS -----	1,073,337.	1,073,337.		
e All other expenses -----	1,141,502.	797,408.	214,357.	129,737.
25 Total functional expenses. Add lines 1 through 24e	121,483,767.	101,084,445.	14,033,572.	6,365,750.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	5,813,689.	1	13,037,368.
	2 Savings and temporary cash investments	68,444,063.	2	72,471,679.
	3 Pledges and grants receivable, net	20,748,628.	3	21,078,942.
	4 Accounts receivable, net	30,254,917.	4	28,984,213.
	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	2,411,539.	9	2,056,911.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,239,988.		
	b Less: accumulated depreciation	10b 3,627,945.	2,070,691.	10c 1,612,043.
	11 Investments - publicly traded securities	111,340,355.	11	113,970,581.
	12 Investments - other securities. See Part IV, line 11	15,851,072.	12	15,726,215.
	13 Investments - program-related. See Part IV, line 11	169,999,715.	13	199,200,564.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	60,463,842.	15	64,713,237.
16 Total assets. Add lines 1 through 15 (must equal line 34)	487,398,511.	16	532,851,753.	
Liabilities	17 Accounts payable and accrued expenses	19,543,485.	17	21,432,524.
	18 Grants payable	24,636,556.	18	27,715,109.
	19 Deferred revenue	90,154.	19	175,145.
	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	10,756,084.	23	18,926,506.
	24 Unsecured notes and loans payable to unrelated third parties	185,497,318.	24	202,981,907.
	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	1,251,342.	25	1,272,422.
	26 Total liabilities. Add lines 17 through 25	241,774,939.	26	272,503,613.
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	111,680,376.	27	126,867,536.
	28 Temporarily restricted net assets	133,943,196.	28	133,480,604.
	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	245,623,572.	33	260,348,140.	
34 Total liabilities and net assets/fund balances	487,398,511.	34	532,851,753.	

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	136,957,578.
2	Total expenses (must equal Part IX, column (A), line 25)	2	121,483,767.
3	Revenue less expenses. Subtract line 2 from line 1	3	15,473,811.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	245,623,572.
5	Net unrealized gains (losses) on investments	5	-749,243.
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	260,348,140.

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	

Form **990** (2015)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 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 (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

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

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

Schedule A (Form 990 or 990-EZ) 2015

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) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (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; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (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; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2015 (88.90%); 15 Public support percentage from 2014 Schedule A, Part II, line 14 (91.59%); 16a 33 1/3% support test - 2015; 16b 33 1/3% support test - 2014; 17a 10%-facts-and-circumstances test - 2015; 17b 10%-facts-and-circumstances test - 2014; 18 Private foundation.

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) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2011, (b) 2012, (c) 2013, (d) 2014, (e) 2015, (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; 14 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2015, 2014. Row 15: Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2014 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2015, 2014. Row 17: Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2014 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2015. 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

19b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a	
b A family member of a person described in (a) above?	11 b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>	11 c	

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Part VI **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	2011	2012	2013	2014	2015	TOTAL
MISCELLANEOUS REVENUE	627,625.	154,817.	184,157.	552,735.	158,616.	1,677,950.
TOTALS	<u>627,625.</u>	<u>154,817.</u>	<u>184,157.</u>	<u>552,735.</u>	<u>158,616.</u>	<u>1,677,950.</u>

Schedule of Contributors

2015

▶ **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
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Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization
- Form 990-PF 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

Caution. An organization that 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
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____	\$ 7,421,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____	\$ 4,149,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____	\$ 3,360,965.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____	\$ 2,211,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____	\$ 2,296,133.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____	\$ 2,658,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	_____	\$ 2,011,666.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2015

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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

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

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

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

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

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

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

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) 2015

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)		123,224.	123,224.
b Total lobbying expenditures to influence a legislative body (direct lobbying)		487,579.	487,579.
c Total lobbying expenditures (add lines 1a and 1b)		610,803.	610,803.
d Other exempt purpose expenditures		120,872,964.	120,872,964.
e Total exempt purpose expenditures (add lines 1c and 1d)		121,483,767.	121,483,767.
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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(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	512,477.	639,530.	625,153.	610,803.	2,387,963.
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	146,752.	147,758.	140,077.	123,224.	557,811.

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

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

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

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 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

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

Blank lines for providing supplemental information as required by Part IV.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

Employer identification number

LOCAL INITIATIVES SUPPORT CORPORATION

13-3030229

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2015

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Amount, 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment %
b Permanent endowment %
c Temporarily restricted endowment %
The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
Table with columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

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

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) LOANS TO COMMUNITY	192,885,358.	COST
(2) DEVELOPMENT PROJECTS		
(3) RECOVERABLE GRANTS TO CDPS	6,251,301.	COST
(4) NMSC INVEST IN PROJECT P'SHIP	63,905.	COST
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	199,200,564.	

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) ACCRUED INTEREST RECEIVABLE	1,730,259.
(2) DUE FROM AFFILIATES	1,767,990.
(3) INVESTMENT IN AFFILIATES	58,950,673.
(4) OTHER RECEIVABLES	1,308,501.
(5) FEE RECEIVABLE	573,380.
(6) NOTE RECEIVABLE	382,434.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	64,713,237.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO AFFILIATES	1,272,422.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	1,272,422.

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

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

1	Total revenue, gains, and other support per audited financial statements		1	127,558,400.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-749,243.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	-749,243.	
3	Subtract line 2e from line 1	3	128,307,643.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	8,649,935.	
c	Add lines 4a and 4b	4c	8,649,935.	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	136,957,578.	

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

1	Total expenses and losses per audited financial statements		1	112,833,832.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	682,546.	
e	Add lines 2a through 2d	2e	682,546.	
3	Subtract line 2e from line 1	3	112,151,286.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	9,332,481.	
c	Add lines 4a and 4b	4c	9,332,481.	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	121,483,767.	

Part XIII Supplemental Information.

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

SEE PAGE 5

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 1(2)

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

SCHEDULE D, PART X, LINE 2

LISC IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 510(C)(3) OF THE U.S. INTERNAL REVENUE CODE (THE CODE). LISC HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION AND HAS BEEN DESIGNATED A "PUBLICLY SUPPORTED" ORGANIZATION OF THE TYPE DESCRIBED IN SECTIONS 170(B)(1)(A)(VI) AND 509(A)(1) OF THE CODE.

THE ORGANIZATION RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. INCOME GENERATED FROM ACTIVITIES UNRELATED TO THE ORGANIZATION'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER INTERNAL REVENUE CODE SECTION 511. THE ORGANIZATION DID NOT RECOGNIZE ANY UNRELATED BUSINESS INCOME TAX LIABILITIES FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014.

SCHEDULE D, PART XI, LINE 4B

LINE 4B CONSISTS OF REVENUE FROM THE FOLLOWING LIMITED LIABILITY COMPANIES (LLC). LISC IS THE SOLE MEMBER OF EACH LLC AND CONSOLIDATES THESE ENTITIES ON ITS FORM 990 BUT NOT IN ITS STAND-ALONE FINANCIAL

Part XIII Supplemental Information (continued)

STATEMENTS (SEE SCHEDULE R).

NEW MARKETS SUPPORT COMPANY, LLC	\$ 7,770,181
LISC LOUISIANA LOAN FUND, LLC	\$ 97,942
LISC COOK COUNTY HOUSING PRESERVATION LLC	\$ 146,058
NEIGHBORHOOD REVITALIZATION NYC LLC	\$ 5,406,741
NEIGHBORHOOD PROPERTIES, LLC	\$ 72,562
REDUCTION IN REVENUE DUE TO ELIMINATION ENTRIES FROM TRANSACTIONS AMONG DISREGARDED ENTITIES	\$ (4,161,003)
LINE 4B ALSO INCLUDES (\$682,546) OF RECLASSIFICATION OF RENTAL EXPENSES.	

TOTAL	\$ 8,649,935

SCHEDULE D, PART XII, LINE 2D

RECLASSIFICATION OF RENTAL EXPENSES	\$682,546
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SCHEDULE D, PART XII, LINE 4B

LINE 4B CONSISTS OF EXPENSE 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	\$ 7,711,700
LISC LOUISIANA LOAN FUND, LLC	\$ 20,292
LISC COOK COUNTY HOUSING PRESERVATION LLC	\$ 4,430
NEIGHBORHOOD REVITALIZATION NYC LLC	\$ 5,406,741
NEIGHBORHOOD PROPERTIES, LLC	\$ 71,725

Part XIII Supplemental Information *(continued)*

REDUCTION IN EXPENSE DUE TO ELIMINATION ENTRIES	
FROM TRANSACTIONS AMONG DISREGARDED ENTITIES	\$ (3,882,407)

TOTAL	\$ 9,332,481

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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		5,008,924.
(2) EUROPE			INVESTMENTS		5,320,602.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					10,329,526.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					10,329,526.

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

Schedule F (Form 990) 2015

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

2015

**Open to Public
Inspection**

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**

b If "Yes," list the 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 CAROLYN BESS	FUNDRAISING CAMPAIGN		X		20,850.	-20,850.
2 DAMON THOMPSON	GRANT PROPOSALS		X		6,400.	-6,400.
3 DMS CONSULTING	GRANT WRITING		X		8,000.	-8,000.
4 HEATHER TOTTY	GRANT WRITING		X		6,720.	-6,720.
5 KATHLEEN PARISI	EVENT PLANNING		X		6,600.	-6,600.
6 LATANYA FIX	GRANT WRITING		X		11,828.	-11,828.
7 MARTHA BERNICKER	FUNDRAISING RESEARCH		X		12,500.	-12,500.
8 KG CONSULTING	FUNDRAISING STRATEGY		X		67,927.	-67,927.
9						
10						
Total					140,825.	-140,825.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))	
Revenue	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" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

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 conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, COLUMN (I)

(1) CAROLYN BESS
 152 WALTER STREET
 ROSLINDALE, MA 02131

(2) DAMON THOMPSON
 11401 PLAINVIEW

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

DETROIT, MI 48228

(3) DMS CONSULTING

2136 W WALTON STREET

CHICAGO, IL 60622

(4) HEATHER TOTTY

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

242 HALL ROAD

BARRINGTON, NH 03825

(5) KATHLEEN PARISI

424 EAST 75TH STREET

NEW YORK, NY 10021

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

(6) LATANYA FIX

106 RILEY LANE

HOUSTON, TX 77003

(7) MARTHA BERNICKER

107 HILLSIDE CIRCLE

VILLANOVA, PA 19085

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

(8) KG CONSULTING

5009 BELT ROAD, NW

WASHINGTON DC 20016

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, COLUMN (IV)

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

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) 9TH WARD FIELD OF DREAMS 616 BARONNE STREEET, NEW ORLEANS LA 70113	26-4795007	501(C)(3)	200,000.				SEE PART IV
(2) A CHILD'S VIEW INC 1735 MIN SPRING AVE, N PROVIDENCE RI 02904	26-0515416	S CORP	11,038.				SEE PART IV
(3) A NEW LEAF INC 868 EAST UNIVERSITY DR, MESA AZ 85203	86-0256667	501(C)(3)	180,000.				SEE PART IV
(4) A SAFE HAVEN FOUNDATION 2750 W. ROOSEVELT ROAD, CHICAGO IL 60608	36-4444200	501(C)(3)	30,000.				SEE PART IV
(5) ABILITY HOUSING OF NORTHEAST FLORIDA 76 SOUTH LAURA ST, JACKSONVILLE FL 32202	59-3087085	501(C)(3)	117,423.				SEE PART IV
(6) ACHIEVEMENT FIRST INC 335 ADAMS ST, BROOKLYN NY 11201	65-1203744	501(C)(3)	35,000.				SEE PART IV
(7) ACTION FOR BOSTON COMMUNITY DVLPMNT INC 178 TREMONT ST, BOSTON MA 02111	04-2304133	501(C)(3)	76,081.				SEE PART IV
(8) ACTS COMMUNITY DEVELOPMENT CORP 1445 NORTH 24TH ST, MILWAUKEE, WI 53205	39-1837474	501(C)(3)	25,000.				SEE PART IV
(9) ADAMS BROWN COUNTIES ECONOMIC OPP INC 406 WEST PLUM ST, GEORGETOWN OH 45121	31-0710683	501(C)(3)	34,000.				SEE PART IV
(10) AEON 901 NORTH 3RD ST, MINNEAPOLIS MN 55401	41-1558711	501(C)(3)	50,000.				SEE PART IV
(11) AFFORDABLE HOUSING & SERVICES COLLABORATIVE 536 GRANITE ST, BRAINTREE MA 02184	04-3555681	501(C)(3)	15,000.				SEE PART IV
(12) AFRICAN ECONOMIC DEVELOPMENT SOLUTIONS 1821 UNIVERSITY AVE W, ST. PAUL MN 55104	80-0345712	501(C)(3)	29,500.				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) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

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Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ALGIERS CHARTER SCHOOL ASSOC. 3520 GNRL DEGAULLE, NEW ORLEANS LA 70114	20-3737902	501(C)(3)	25,000.				SEE PART IV
(2) ALLIANCE FOR MULTICULTURAL COMMUNITY SVCS 6440 HILLCROFT, STE 411 HOUSTON TX 77081	76-0171217	501(C)(3)	149,796.				SEE PART IV
(3) ALLSTON BRIGHTON COMMUNITY DVPMT CORP 20 LINDEN STREET, ALLSTON MA 02134	04-2716278	501(C)(3)	10,250.				SEE PART IV
(4) AMAZING KIDS ACADEMY 2 MORGAN MILL ROAD, JOHNSTON RI 02919	32-0321526	S CORP	7,965.				SEE PART IV
(5) AMERICAN INDIAN COMMUNITY DVLP CORPORATION 1508 E FRANKLIN AVE, MINNEAPOLIS MN 55404	41-1716667	501(C)(3)	55,000.				SEE PART IV
(6) AMERICAN INDIAN COMMUNITY HSG ORG 202 WEST 2ND STREET, DULUTH MN 55805	41-1782394	501(C)(3)	8,449.				SEE PART IV
(7) AMOS HOUSE P.O. BOX 72873, PROVIDENCE RI 02907	05-0387218	501(C)(3)	48,990.				SEE PART IV
(8) AMR ALLIANCES 1390 EISENHOWER PLACE, ANN ARBOR MI 48108	38-3039064	C CORP	10,000.				SEE PART IV
(9) ARCHWAY HOUSING & SERVICES INC P.O. BOX 9189, DENVER CO 80219	84-1335158	501(C)(3)	20,000.				SEE PART IV
(10) ARLINGTON COMMUNITY TRABAJANCO 530 BROADWAY ST, LAWRENCE MA 01841-1244	04-3408855	501(C)(3)	15,000.				SEE PART IV
(11) ARTSTECH 1522 HOLMES STREET, KANSAS CITY MO 64108	43-1013392	501(C)(3)	19,350.				SEE PART IV
(12) AS220 INC 95 MATHEWSON STREET, PROVIDENCE RI 02903	22-2754566	501(C)(3)	25,000.				SEE PART IV

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ 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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of 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)	52,500.				SEE PART IV
(2) ASIAN ECONOMIC DEVELOPMENT ASSOCIATION 377 UNIVERSITY AVE W., ST. PAUL MN 55104	41-1911474	501(C)(3)	69,500.				SEE PART IV
(3) ASOCIACION DE PUERTORRIQUENOS 1900 N. 9TH STREET, PHILADELPHIA PA 19122	23-1930630	501(C)(3)	243,280.				SEE PART IV
(4) ASSOCIATED MINISTRIES OF TACOMA 901 SOUTH 13TH STREET, TACOMA WA 98405	91-0847534	501(C)(3)	38,346.				SEE PART IV
(5) AURORA/ST. ANTHONY NEIGHBORHOOD DVLP CORP. 774 UNIVERSITY AVE W., ST. PAUL MN 55104	41-1432372	501(C)(3)	169,500.				SEE PART IV
(6) AVENUE COMMUNITY DEVELOPMENT CORPORATION 2505 WASHINGTON AVE., HOUSTON TX 77007	76-0380602	501(C)(3)	224,757.				SEE PART IV
(7) AVIA CAKES LLC 3344 N. 60TH STREET, MILWAUKEE WI 53216	27-4544514	LLC - C CORP	9,500.				SEE PART IV
(8) AVONDALE COMPREHENSIVE DVLPMT. 3494 READING ROAD, CINCINNATI OH 45229	45-2412695	501(C)(3)	223,500.				SEE PART IV
(9) BACK OF THE YARDS NEIGHBORHOOD COUNCIL 1751 W. 47TH STREET, CHICAGO IL 60609	36-2079600	501(C)(3)	16,135.				SEE PART IV
(10) BAME RENAISSANCE COMMUNITY DVLP CORPORATION 3085 K. STREET, SAN DIEGO CA 92102	33-0677938	501(C)(3)	51,550.				SEE PART IV
(11) BANANA KELLY COMMUNITY IMPROVEMENT 863 PROSPECT AVENUE, BRONX NY 10459	13-2934000	501(C)(3)	31,000.				SEE PART IV
(12) BAY AREA COMMUNITY RESOURCES 171 CARLOS DRIVE, SAN RAFAEL CA 94903	94-2346815	501(C)(3)	57,865.				SEE PART IV

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BEACON INTERFAITH HOUSING COLLABORATIVE 2610 UNIVERSITY AVE. W., ST PAUL MN 55114	41-1953599	501(C)(3)	55,000.				SEE PART IV
(2) BEDFORD STUYVESANT RESTORATION CORPORATION 276 FIFTH AVENUE, NEW YORK NY 10001	11-6083182	501(C)(3)	54,500.				SEE PART IV
(3) BELLWETHER HOUSING 1651 BELLEVUE AVENUE, SEATTLE WA 98122-2014	91-1116960	501(C)(3)	25,000.				SEE PART IV
(4) BELMONT HOUSING RESOURCES FOR WYN 1195 MAIN STREET, BUFFALO NY 14209	16-1080227	501(C)(3)	60,000.				SEE PART IV
(5) BETTER HOMES 5 NORTHAMPTON AVE, SPRINGFIELD MA 01109	04-6190467	501(C)(3)	10,000.				SEE PART IV
(6) BEYOND THE BALL 2657 S. LAWDALE, CHICAGO IL 60623	26-1440472	501(C)(3)	10,000.				SEE PART IV
(7) BICKERDIKE REDEVELOPMENT CORPORATION 2550 WEST NORTH AVENUE, CHICAGO IL 60647	23-7087890	501(C)(3)	25,000.				SEE PART IV
(8) BIG CAR MEDIA INC 615 N. ALABAMA ST, INDIANAPOLIS IN 46204	11-3725157	501(C)(3)	20,200.				SEE PART IV
(9) BLACK FAMILY DEVELOPMENT INC 2995 EAST GRAND BLVD., DETROIT MI 48202	38-2248479	501(C)(3)	42,000.				SEE PART IV
(10) BLUE HILLS COMMUNITY SERVICES 5008 PROSPECT AVENUE, KANSAS CITY MO 64130	51-0141323	501(C)(3)	45,000.				SEE PART IV
(11) BOARD OF EDUCATION CITY OF PEORIA 3202 N. WISCONSIN AVENUE, PEORIA IL 61603	37-6001759	GOVERNMENT	50,000.				SEE PART IV
(12) BOARD OF ED CITY SCHOOL, CITY OF ROCHESTER 131 WEST BROAD STREET, ROCHESTER NY 14614	16-6002010	GOVERNMENT	200,000.				SEE PART IV

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BOARD OF TRUSTEES OF COMMUNITY COLLEGE DIST 226 W JACKSON BLVD, CHICAGO IL 60606	36-2606236	GOVERNMENT	42,500.				SEE PART IV
(2) BOARD OF TRUSTEES OF THE UNIV. OF ILLINOIS 809 S MARSHFIELD AVE CHICAGO IL 60612	37-6000511	501(C)(3)	10,730.				SEE PART IV
(3) BOSTON LOCAL DEVELOPMENT 43 HAWKINS STREET, BOSTON MA 02114	04-2681311	501(C)(3)	200,000.				SEE PART IV
(4) BOYS, GIRLS, ADULT COMMUNITY HIGHWAY 49, BLDG, 306, MARVELL AZ 72366	71-0540330	501(C)(3)	25,500.				SEE PART IV
(5) BREAKTHROUGH URBAN MINISTRIES 402 N. ST. LOUIS AVE., CHICAGO IL 60624	36-3810926	501(C)(3)	10,000.				SEE PART IV
(6) BRIDGE HOUSING CORP - SOUTHERN 600 CALIFORNIA ST, SAN FRANCISCO CA 94108	94-3233154	501(C)(3)	30,471.				SEE PART IV
(7) BRIDGEPORT NEIGHBORHOOD TRUST 570 STATE STREET, BRIDGEPORT CT 06604	22-2809353	501(C)(3)	65,000.				SEE PART IV
(8) BRIDGING COMMUNITIES INC 6900 MCGRAW, DETROIT MI 48210	38-3434841	501(C)(3)	26,750.				SEE PART IV
(9) BRIGHT BEGINNINGS, INC. 128 M STREET NW, WASHINGTON DC 20001	52-1697917	501(C)(3)	16,500.				SEE PART IV
(10) BRIGHTON CENTER, INC. 741 CENTRAL AVE., NEWPORT KY 41072	61-0673886	501(C)(3)	185,319.				SEE PART IV
(11) BRIGHTON NEIGHBORHOOD ASSOC. 1002 BRIGHTON BEACH AVE, BROOKLYN NY 11223	11-2435523	501(C)(3)	75,000.				SEE PART IV
(12) BROOKLYN BUEARU OF COMMUNITY SVCE 285 SCHERMERHORN ST, BROOKLYN NY 11217	11-1630780	501(C)(3)	50,000.				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) (2015)

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(Form 990)**

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

OMB No. 1545-0047

2015

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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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BUILD INC. 5100 W HARRISON ST, CHICAGO IL 60644	23-7022085	501(C)(3)	8,000.				SEE PART IV
(2) BUILDING BLOCKS OF KALAMAZOO 1219 S. PARK ST, KALAMAZOO MI 49001	06-1705642	501(C)(3)	17,075.				SEE PART IV
(3) BUILDING BRIDGES ACROSS THE RIVER 1901 MISSISSIPPI AVE., WASHINGTON DC 20020	52-2013526	501(C)(3)	45,000.				SEE PART IV
(4) BUTCHER TOWN LLC 801 NORTH 23RD STREET, RICHMOND VA 23223	46-3908123	LLC - P	10,000.				SEE PART IV
(5) CABRILLO ECONOMIC DEVELOPMENT 702 COUNTY SQR DR, VENTURA CA 93003-5450	95-3681521	501(C)(3)	34,000.				SEE PART IV
(6) CAMPHOR MEMORIAL UNITED METHODIST CHURCH 585 FULLER AVENUE, ST. PAUL MN 55103-2246	36-2167731	501(C)(3)	7,500.				SEE PART IV
(7) CAP SERVICES INC 5499 HIGHWAY 10 E., STEVENS POINT WI 54481	39-1080897	501(C)(3)	33,432.				SEE PART IV
(8) CAPITAL CITY COMMUNITY CENTER 25 DANFORTH STREET, PROVIDENCE RI 02908	05-0259090	501(C)(3)	9,000.				SEE PART IV
(9) CAPITOL HILL HOUSING IMPROVEMENT PROGRAM 1620 12TH AVE, SUITE 205 SEATTLE WA 98122	91-0979968	GOVERNMENT	36,844.				SEE PART IV
(10) CARITAS COMMUNITIES INC 25 BRAINTREE HILL OFFCE, BRAINTREE MA 02184	04-2875899	501(C)(3)	10,000.				SEE PART IV
(11) CARIAGE HOUSE DAY CARE LTD 156 SHAW AVENUE, CRANSTON RI 02905	05-0423296	S CORP	9,494.				SEE PART IV
(12) CASCAP INC 231 SOMERVILLE AVENUE, SOMERVILLE MA 02143	23-7299493	501(C)(3)	10,000.				SEE PART IV

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Schedule I (Form 990) (2015)

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**Grants and Other Assistance to Organizations,
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2015

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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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CATALYTIC DEVELOPMENT FUNDING CORP. 50 E. RIVERCENTER BLVD., COVINGTON KY 41011	26-3389252	501(C)(3)	10,000.				SEE PART IV
(2) CATHOLIC BISHOP OF CHICAGO-ST.SABINA EMPLOY 7909 S. RACINE AVENUE, CHICAGO IL 60620	36-2171123	501(C)(3)	33,469.				SEE PART IV
(3) CBR COALITION 321 NORTH CLARK ST,34TH FL CHICAGO IL 60654	95-2743174	C CORP	8,000.				SEE PART IV
(4) CENTER FOR CHANGING LIVES 1955 N. ST. LOUIS AVENUE, CHICAGO IL 60647	36-3731388	501(C)(3)	252,883.				SEE PART IV
(5) CENTER FOR GREAT NEIGHBORHOODS OF COVINGTON 1650 RUSSELL STREET, COVINGTON KY 41011	61-0733046	501(C)(3)	460,967.				SEE PART IV
(6) CENTER FOR LAND REFORM 111 E. COURT ST, SUITE 2C-1 FLINT MI 48502	27-0718458	501(C)(3)	10,000.				SEE PART IV
(7) CENTER FOR PREVENTION OF ABUSE P.O. BOX 3855, PEORIA IL 61612-3855	37-1037950	501(C)(3)	20,000.				SEE PART IV
(8) CENTRAL DETROIT CHRISTIAN CDC 8840 SECOND AVENUE, DETROIT MI 48202	38-3128822	501(C)(3)	137,250.				SEE PART IV
(9) CENTRAL MISSISSIPPI HOUSING & DEVELOPMENT 120 FAITH LANE, CANTON MS 39046	45-4742548	501(C)(3)	35,000.				SEE PART IV
(10) CENTRAL MISSOURI COMMUNITY ACT 807-B NO. PROVIDENCE RD, COLUMBIA MO 65203	43-0835026	501(C)(3)	51,000.				SEE PART IV
(11) CENTRAL STATES SER-JOBS FOR PROGRESS 3948 WEST 26TH STREET, CHICAGO IL 60623	36-1211270	501(C)(3)	154,218.				SEE PART IV
(12) CENTRO DE SALUD Y ESPERANZA 2001 S. CALIFORNIA AVE, CHICAGO IL 60608	32-0115907	501(C)(3)	37,630.				SEE PART IV

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Part I General Information on Grants and Assistance

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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) CEOS FOR CITIES 1717 EUCLID AVE, CLEVELAND OH 44115	13-4302280	501(C)(3)	7,500.				SEE PART IV
(2) CHICAGO COMMONS ASSOC. 515 EAST 50TH STREET, CHICAGO IL 60615	36-2169136	501(C)(3)	219,500.				SEE PART IV
(3) CHICAGO MEN IN ACTION P.O. BOX 10738, CHICAGO IL 60610	27-1060296	501(C)(3)	7,500.				SEE PART IV
(4) CHICAGO NEIGHBORHOOD INITIATIVES 1000 E. 111TH STREET, CHICAGO IL 60628	27-1832686	501(C)(3)	41,500.				SEE PART IV
(5) CHICANOS POR LA CAUSA 1112 EAST BUCKEYE, PHOENIX AZ 85034	86-0227210	501(C)(3)	34,000.				SEE PART IV
(6) CHILD, INC 160 DRAPER AVENUE, WARWICK RI 02889	05-0370733	501(C)(3)	50,000.				SEE PART IV
(7) CHILDREN'S ATHLETIC NETWORK & DANCE OPPORTU 13621 N. FLORIDA AVENUE, TAMPA FL 33613	59-3193026	501(C)(3)	200,000.				SEE PART IV
(8) CHILDREN'S FRIEND AND SERVICE 153 SUMMER STREET, PROVIDENCE RI 02903	05-0258819	501(C)(3)	113,975.				SEE PART IV
(9) CHINATOWN COMMUNITY DEVELOPMENT CENTER 1525 GRANT AVE, SAN FRANCISCO CA 94133	94-2514053	501(C)(3)	122,581.				SEE PART IV
(10) CHINATOWN SERVICE CENTER 767 NORTH HILL ST, LOS ANGELES CA 90012	95-2918844	501(C)(3)	57,000.				SEE PART IV
(11) CHINESE COMMUNITY CENTER 9800 TOWN PARK DR, HOUSTON TX 77036	76-0067885	501(C)(3)	116,966.				SEE PART IV
(12) CHRISTIAN ACTIVITIES COUNCIL 47 VINE STREET, HARTFORD CT 06112	06-0689693	501(C)(3)	20,000.				SEE PART IV

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- 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) CHURCH COMMUNITY HOUSING CORPORATION 50 WASHINGTON SQUARE, NEWPORT RI 02840	05-0343709	501(C)(3)	77,500.				SEE PART IV
(2) CHWC INC 2 SOUTH 14TH STREET, KANSAS CITY KS 66102	48-0934993	501(C)(3)	9,216.				SEE PART IV
(3) CINCINNATI WORKS 708 WALNUT ST, CINCINNATI OH 45202	31-1656186	501(C)(3)	100,000.				SEE PART IV
(4) CITIZENS HOUSING & PLANNING COUNCIL 42 BROADWAY, NEW YORK NY 10004	13-1782468	501(C)(3)	8,000.				SEE PART IV
(5) CITY CONNECT DETROIT 613 ABBOTT , 3RD FL DETROIT MI 48226	38-3570727	501(C)(3)	14,000.				SEE PART IV
(6) CITY HEIGHTS COMMUNITY DVLPMT 4001 EL CAJON BLVD, SAN DIEGO CA 92105	95-3661177	501(C)(3)	88,800.				SEE PART IV
(7) CITY OF COVINGTON 20 WEST PIKE ST, COVINGTON KY 41011	61-6001804	GOVERNMENT	20,000.				SEE PART IV
(8) CITY OF NEWARK, NEW JERSEY 920 BROAD STREET, NEWARK NJ 07102	22-6002138	GOVERNMENT	100,000.				SEE PART IV
(9) CITY OF PEORIA 419 FULTON STREET, STE 300 PEORIA IL 61602	37-6001761	GOVERNMENT	171,500.				SEE PART IV
(10) CITY OF PROVIDENCE 25 DORRANCE STREET, PROVIDENCE RI 02903	05-6000329	GOVERNMENT	5,500.				SEE PART IV
(11) CLARA WHITE MISSION INC. 613 W. ASHLEY ST., JACKSONVILLE FL 33202	59-6002104	501(C)(3)	80,000.				SEE PART IV
(12) CLARETIAN ASSOCIATES 9108 S. BRANDON AVE, CHICAGO IL 60617	36-4087259	501(C)(3)	35,000.				SEE PART IV

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Schedule I (Form 990) (2015)

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

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(1) CLARK STREET DAY CARE INC 19 CLARK STREET, WESTERLY RI 02891	27-0763322	S CORP	45,000.				SEE PART IV
(2) CLIFFORD BEERS HOUSING 1200 WILSHIRE BLVD., LOS ANGELES CA 90017	95-4485263	501(C)(3)	40,000.				SEE PART IV
(3) COACHELLA VALLEY HOUSING COALITION 45-701 MONROE ST., SUITE G INDIO CA 92201	95-3814898	501(C)(3)	66,000.				SEE PART IV
(4) COALITION FOR NONPROFIT HOUSING & ECONOMIC 1432 U STREET NW, WASHINGTON DC 20009	52-1750323	501(C)(3)	26,000.				SEE PART IV
(5) COALITION ON RESPONSIBLE COMMUNITY DVLPT. 3101 SOUTH GRAND AVE, LOS ANGELES CA 90007	20-2445113	501(C)(3)	120,500.				SEE PART IV
(6) COASTAL ENTERPRISES 36 WATER STREET, WISCASSET ME 04578	01-0347504	501(C)(3)	125,792.				SEE PART IV
(7) CODMAN SQUARE NEIGHBORHOOD DEVELOPMENT CORP 587 WASHINGTON STREET, DORCHESTER MA 02124	04-2752507	501(C)(3)	22,094.				SEE PART IV
(8) CODY ROUGE COMMUNITY ACTION 19321 W. CHICAGO , DETROIT MI 48228	27-1841875	501(C)(3)	23,850.				SEE PART IV
(9) COMITE DE BIEN ESTAR INC 963 EAST B STREET, SAN LUIS AZ 85349	86-0427342	501(C)(3)	35,000.				SEE PART IV
(10) COMMON PLACE INC 514 S. SHELLEY STREET, PEORIA IL 61605-1837	37-0918811	501(C)(3)	10,000.				SEE PART IV
(11) COMMONBOND COMMUNITIES 1080 MONTREAL AVE, ST. PAUL MN 55116	41-1260469	501(C)(3)	166,250.				SEE PART IV
(12) COMMUNICATING ARTS CREDIT UNION 630 HOWARD ST, DETROIT MI 48226	38-0480308	501(C)(3)	546,000.				SEE PART IV

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ 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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) COMUNIDADES LATINAS UNIDAS EN SERVICIO 797 EAST 7TH STREET, ST PAUL MN 55106	41-1386986	501(C)(3)	182,497.				SEE PART IV
(2) COMMUNITIES CREATING OPPORTUNITIES 2400 TROOST AVE, KANSAS CITY MO 64108	43-1127845	501(C)(3)	40,500.				SEE PART IV
(3) COMMUNITIES FIRST, INC. 310 E. THIRD ST, 6TH FL FLINT MI 48502	27-3600343	501(C)(3)	45,000.				SEE PART IV
(4) COMMUNITY ACTION DULUTH 2424 W. 5TH ST, DULUTH MN 55806	41-1410670	501(C)(3)	229,499.				SEE PART IV
(5) COMMUNITY ACTION PARTNERSHIP OF PROVIDENCE 518 HARTFORD AVENUE, PROVIDENCE RI 02909	46-1472304	501(C)(3)	23,829.				SEE PART IV
(6) COMMUNITY ALLIANCE OF THE FAR EASTSIDE INC 8902 E. 38TH ST, INDIANAPOLIS IN 46226	35-2018453	501(C)(3)	25,000.				SEE PART IV
(7) COMMUNITY CARE ALLIANCE 800 CLINTON STREET, WOONSOCKET RI 02895	05-0312278	501(C)(3)	227,497.				SEE PART IV
(8) COMMUNITY DEVELOPMENT OF SOUTH BERKSHIRE 17 BRIDGE ST, GREAT BARRINGTON MA 01230	04-3010725	501(C)(3)	16,175.				SEE PART IV
(9) COMMUNITY DEVELOPMENT TECHNOLOGIES 520 W. 23RD ST, LOS ANGELES CA 90007	95-4546040	501(C)(3)	40,000.				SEE PART IV
(10) COMMUNITY ECONOMIC DEVELOPMENT 1118 S. WASHINGTON AVE., LANSING MI 48910	38-3445097	501(C)(3)	35,500.				SEE PART IV
(11) COMMUNITY FIRST 3940 W. LISBON AVENUE, MILWAUKEE WI 53208	45-0635770	501(C)(3)	6,926.				SEE PART IV
(12) COMMUNITY HOUSING DVLPMT. 1535-A FRED JACKSON WAY, RICHMOND VA 94801	68-0235719	501(C)(3)	59,000.				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) (2015)

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(Form 990)**

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

2015

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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

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) COMMUNITY HOUSING IMPROVEMENT SYSTEM & PLAN 1001 WILLOW STREET , CHICO CA 95928-5958	94-2223398	501(C)(3)	50,000.				SEE PART IV
(2) COMMUNITY HOUSING INC 8403 COLESVILLE RD, SILVER SPRING MD 20910	52-1804975	501(C)(3)	74,822.				SEE PART IV
(3) COMMUNITY SERVICES LEAGUE 404 N. NOLAND RD , INDEPENDENCE MO 64050	43-0976396	501(C)(3)	17,282.				SEE PART IV
(4) COMMUNITY VENTURES 1501 CHERRY STREET , PHILADELPHIA PA 19102	23-2462126	501(C)(3)	8,500.				SEE PART IV
(5) COUNTY OF MARICOPA TEMPE SCHOOL 3205 S. RURAL ROAD , TEMPE AZ 85282	86-6000480	GOVERNMENT	100,000.				SEE PART IV
(6) CREATIVE ENTERPRISE ZONE 2314 UNIVERSITY AVE W, ST. PAUL MN 55114	41-1479097	501(C)(3)	28,000.				SEE PART IV
(7) CYPRESS HILLS LOCAL DEVELOPMENT CORPORATION 625 JAMAICA AVENUE, BROOKLYN NY 11208	11-2683663	501(C)(3)	367,500.				SEE PART IV
(8) DAYTON'S BLUFF DISTRICT 4 COMMUNITY COUNCIL 798 7TH STREET E, ST. PAUL MN 55106	41-1434818	501(C)(3)	35,000.				SEE PART IV
(9) DAYTON'S BLUFF NEIGHBORHOOD HOUSING SVCS 823 EAST SEVENTH STREET, ST. PAUL MN 55106	41-1386097	501(C)(3)	112,000.				SEE PART IV
(10) DC HABITAT FOR HUMANITY 2115 WARD COURT NW, WASHINGTON DC 20037	52-1589700	501(C)(3)	25,000.				SEE PART IV
(11) DC WHEEL PRODUCTIONS INC 3225 8TH STREET, NE WASHINGTON DC 20017	52-1118504	501(C)(3)	16,000.				SEE PART IV
(12) DEBTWAVE CREDIT COUNSELING INC 9325 SKY PARK COURT , SAN DIEGO CA 92123	91-2156504	501(C)(3)	12,000.				SEE PART IV

- 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) (2015)

**SCHEDULE I
(Form 990)**

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) DELTA COMMUNITY DVLPM T & LAW CTR. 10515 W. MARKHAM, LITTLE ROCK AR 72205	27-0598497	501(C)(3)	18,500.				SEE PART IV
(2) DETROIT NON-PROFIT HOUSING CORP 2990 W. GRAND BLVD, DETROIT MI 48202	38-1970562	501(C)(3)	18,750.				SEE PART IV
(3) DORCHESTER BAY ECONOMIC DVLPM T CORP 594 COLUMBIA ROAD, DORCHESTER MA 02125-336	04-2681632	501(C)(3)	10,500.				SEE PART IV
(4) DOUGLASS COMMUNITY ASSOC. 1000 W. PATERSON ST, KALAMAZOO MI 49007	38-1359200	501(C)(3)	7,500.				SEE PART IV
(5) DOWNTOWN PHOENIX COMMUNITY DVLPM T CTR 101 N. 1ST AVE, PHOENIX AZ 85003	86-1027337	501(C)(4)	45,000.				SEE PART IV
(6) DOWNTOWN TOMORROW INC. 141 E. MICHIGAN ST., KALAMAZOO MI 49007	38-2513286	501(C)(3)	7,500.				SEE PART IV
(7) DR. DAY CARE CUMBERLAND & WEST 203 CONCORD ST, STE 301 PAWTUCKET RI 02860	20-3000107	S CORP	10,500.				SEE PART IV
(8) DR. DAY CARE IV 203 CONCORD ST, STE 301 PAWTUCKET RI 02860	27-3090444	S CORP	68,455.				SEE PART IV
(9) DR. DAY CARE WEST WARWICK 203 CONCORD ST, STE 301 PAWTUCKET RI 02860	45-1502348	S CORP	9,910.				SEE PART IV
(10) DR. DAY CARE INC 203 CONCORD ST, STE 301 PAWTUCKET RI 02860	20-3000107	S CORP	10,000.				SEE PART IV
(11) EAH INC 2169 FRANCISCO BLVD E., SAN RAFAEL CA 94901	94-1699153	501(C)(3)	30,000.				SEE PART IV
(12) EAST BAY ASIAN YOUTH CENTER 2025 EAST 12TH ST., OAKLAND CA 94606	94-2925799	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 ▶

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

2015

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Department of the Treasury
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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) EAST BAY CENTER FOR THE PERFORMING ARTS 339 11TH STREET , RICHMOND VA 94801	94-1692171	501(C)(3)	15,000.				SEE PART IV
(2) EAST BAY COMMUNITY ACTION PROGRAM 19 BROADWAY, NEWPORT RI 02840	05-0310024	501(C)(3)	102,857.				SEE PART IV
(3) EAST BLUFF NEIGHBORHOOD HSG. SVCES. 1839 N. WISCONSIN AVE., PEORIA IL 61603	37-1192779	501(C)(3)	214,546.				SEE PART IV
(4) EAST LA COMMUNITY CORP 530 S. BOYLE AVE , LOS ANGELES CA 90033	95-4531076	501(C)(3)	45,500.				SEE PART IV
(5) EAST SIDE NEIGHBORHOOD DVLPMT. CO. 925 PAYNE AVE, SUITE 201 ST. PAUL MN 55130	41-1367503	501(C)(3)	35,000.				SEE PART IV
(6) EAST TOLEDO FAMILY CENTER 1020 VARLAND AVE, C - 111 TOLEDO OH 43605	34-4429426	501(C)(3)	118,600.				SEE PART IV
(7) ECOLIBRIUM3 2304 W. SUPERIOR ST., DULUTH MN 55806	45-2746481	501(C)(3)	130,462.				SEE PART IV
(8) ECONOMIC & COMM. DVLPMT. INST. 1655 OLD LEOPARD AVE, COLUMBUS OH 43219	31-1145544	501(C)(3)	20,000.				SEE PART IV
(9) ECUMENICAL ASSOCIATION FOR HOUSING 2169 FRANCISCO BLVD E, SAN RAFAEL CA 94901	94-1699153	501(C)(3)	40,000.				SEE PART IV
(10) EDISON NEIGHBORHOOD ASSOCIATION 816 WASHINGTON AVE, KALAMAZOO MI 49001	38-2108671	501(C)(3)	57,000.				SEE PART IV
(11) EDNA MARTIN CHRISTIAN CENTER 2605 E. 25TH STREET, INDIANAPOLIS IN 46218	35-1072577	501(C)(3)	103,200.				SEE PART IV
(12) EDWARD WATERS COLLEGE 1658 KINGS RD., JACKSONVILLE FL 32209	59-1146751	501(C)(3)	13,125.				SEE PART IV

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Schedule I (Form 990) (2015)

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Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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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) EL CENTRO DE LA RAZA 2524 16TH AVENUE SOUTH , SEATTLE WA 98144	91-0899927	501(C)(3)	35,000.				SEE PART IV
(2) EMERGE COMMUNITY DEVELOPMENT CORPORATION 1101 W BDWAY AVE. N., MINNEAPOLIS MN 55411	41-1277423	501(C)(3)	200,000.				SEE PART IV
(3) ENGLEWOOD COMMUNITY DEVELOPMENT CORP. 57 N. RURAL STREET, INDIANAPOLIS IN 46201	35-2003744	501(C)(3)	216,650.				SEE PART IV
(4) EPISCOPAL COMMUNITY SVCS OF SAN FRANCISCO 165 EIGHT ST ,3RD FL SAN FRANCISCO CA 94103	94-3096716	501(C)(3)	13,400.				SEE PART IV
(5) ESPERANZA COMMUNITY HOUSING CORP 3655 S. GRAND AVE , LOS ANGELES CA 90007	95-4230345	501(C)(3)	35,000.				SEE PART IV
(6) EXETER-WEST GREENWICH REGIONAL SCHOOLS 940 NOOSENECK HILL RD, W GREENWICH RI 02817	05-0309472	GOVERNMENT	55,000.				SEE PART IV
(7) FAYETTE COUNTY COMMUNITY ACTION 108 N. BEESON AVE., UNIONTOWN PA 15401	25-1180898	501(C)(3)	39,125.				SEE PART IV
(8) FEDERATION OF APPALACHIAN HSG ENTERPRISES 106 PASCO STREET, BEREA KY 40403	31-0986871	501(C)(3)	83,470.				SEE PART IV
(9) FIFTH AVENUE COMMITTEE 621 DEGRAW ST, BROOKLYN NY 11217	11-2475743	501(C)(3)	135,000.				SEE PART IV
(10) FIRST STEP DAYCARE INC 500 PROSPECT STREET , PAWTUCKET RI 02860	05-0467378	S CORP	10,100.				SEE PART IV
(11) FLANNER HOUSE OF INDIANAPOLIS 2424 MARTIN L KING, INDIANAPOLIS IN 46208	35-0942628	501(C)(3)	155,110.				SEE PART IV
(12) FOCUS:HOPE 1355 OAKMAN BLVD., DETROIT MI 48238	38-1948285	501(C)(3)	325,823.				SEE PART IV

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(1) FOUR DIRECTIONS DEVELOPMENT CORP 20 GODFREY DRIVE, ORONO ME 04473	01-0544468	501(C)(3)	10,841.				SEE PART IV
(2) FRANKLIN COUNTY COMMUNITY 324 WELLS STREET, GREENFIELD MA 01301	04-2678309	501(C)(3)	49,000.				SEE PART IV
(3) FRIENDS OF JEWISH CMMTY HSG FOR THE ELDERLY 30 WALLINGFORD ROAD, BRIGHTON MA 02135	04-2607197	501(C)(3)	10,000.				SEE PART IV
(4) FRIENDS OF RHODE ISLAND AVENUE 2300 R.I. AVE NE, WASHINGTON DC 20018	46-0716370	501(C)(3)	20,000.				SEE PART IV
(5) FRIENDS OF TEAM ACADEMY 60 PARK PLACE, SUITE 802 NEWARK NJ 07102	20-1018667	501(C)(3)	200,750.				SEE PART IV
(6) FUNDS FOR PHILADELPHIA INC CITY HALL, ROOM 708 PHILADELPHIA PA 19107	23-2174863	501(C)(3)	45,000.				SEE PART IV
(7) GABRIEL'S PLACE 3618 READING ROAD, CINCINNATI OH 45229	45-5333845	501(C)(3)	27,500.				SEE PART IV
(8) GADS HILL CENTER 1919 W. CULLERTON STREET, CHICAGO IL 60608	36-2167082	501(C)(3)	10,000.				SEE PART IV
(9) GARDEN STATE CONSUMER CREDIT COUNSELING 225 WILLOWBROOK ROAD, FREEHOLD NJ 07728	22-3120920	501(C)(3)	127,500.				SEE PART IV
(10) GARFIELD PARK COMMUNITY COUNCIL 300 N. CENTRAL PARK AVE, CHICAGO IL 60624	45-4055306	501(C)(3)	44,102.				SEE PART IV
(11) GARLAND BUSINESS DISTRICT P.O. BOX 9413, SPOKANE WA 99209	26-0536130	501(C)(3)	15,000.				SEE PART IV
(12) GARRETT COUNTY COMMUNITY ACTION 104 E. CENTER ST, OAKLAND CA 21550	52-0820662	501(C)(3)	34,861.				SEE PART IV

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**Grants and Other Assistance to Organizations,
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(1) GOODWILL INDUSTRIES OF GREATER DETROIT 3111 GRAND RIVER AVENUE , DETROIT MI 48208	38-1362823	501(C)(3)	18,750.				SEE PART IV
(2) GOODWILL OF SOUTHWESTERN PA 118 52ND STREET , PITTSBURG PA 15201	25-1098928	501(C)(3)	94,000.				SEE PART IV
(3) GRACE AND TRUTH COMMUNITY DEVELOPMENT CORP 932 N SHORE DR, JACKSONVILLE FL 32208	33-1020194	501(C)(3)	33,000.				SEE PART IV
(4) GRANDMONT ROSEDALE DEVELOPMENT CORPORATION 19800 GRAND RIVER, 6TH FL DETROIT MI 48223	38-2885952	501(C)(3)	155,940.				SEE PART IV
(5) GREATER AUBURN-GRESHAM DVLP CORPORATION 1159 WEST 79 ST, CHICAGO IL 60620	36-4377387	501(C)(3)	104,600.				SEE PART IV
(6) GREATER GREENVILLE HOUSING & REVITALIZATION 503 WASHINGTON AVENUE, GREENVILLE MS 38701	64-0814978	501(C)(3)	14,000.				SEE PART IV
(7) GREATER SOUTHWEST DEVELOPMENT CORPORATION 2601 WEST 63RD ST, CHICAGO IL 60629	36-2858304	501(C)(3)	68,556.				SEE PART IV
(8) GREATER SPOKANE LOW COMMUNITY 315 W. MISSION, SPOKANE WA 99201	91-1494828	501(C)(3)	20,000.				SEE PART IV
(9) GROUNDSWELL COMMUNITY MURAL 540 PRESIDENT ST, BROOKLYN NY 11215	11-3427213	501(C)(3)	15,000.				SEE PART IV
(10) GROWING HOME INC 2732 NORTH CLARK, CHICAGO IL 60614	36-3989426	501(C)(3)	15,500.				SEE PART IV
(11) GUADALUPE CENTERS INC 1015 AVE C E CHAVEZ, KANSAS CITY MO 64108	44-0610781	501(C)(3)	60,000.				SEE PART IV
(12) HABITAT FOR HUMANITY PHILADELPHIA INC 1829 N 19TH STREET, PHILADELPHIA PA 19121	42-1580163	501(C)(3)	22,500.				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 ▶

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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HABITAT FOR HUMANITY - COASTAL FAIRFIELD CO 1542 BARNUM AVENUE, BRIDGEPORT CT 06610	22-2597077	501(C)(3)	17,000.				SEE PART IV
(2) HABITAT FOR HUMANITY, JACKSONVILLE 2404 HUBBARD STREET, JACKSONVILLE FL 32206	59-2880071	501(C)(3)	25,000.				SEE PART IV
(3) HAMILTON COUNTY LAND REUTILIZATION CORP 299 E. SIXTH ST, STE 2A CINCINNATI OH 45202	45-4552306	GOVERNMENT	5,340.				SEE PART IV
(4) HAP, INC 322 MAIN STREET, SPRINGFIELD MA 01105	04-2518368	501(C)(3)	25,000.				SEE PART IV
(5) HAWAIIAN COMMUNITY ASSETS INC 200 N. VINEYARD BLVD, HONOLULU HI 96817	99-0348767	501(C)(3)	33,000.				SEE PART IV
(6) HAWTHORNE SOCIAL SERVICE ASSOCIATION INC 2440 WEST OHIO ST., INDIANAPOLIS IN 46222	35-0874274	501(C)(3)	182,138.				SEE PART IV
(7) HEAVENS VIEW COMMUNITY DEVELOP 602 W. RICHMOND AVENUE, PEORIA IL 61606	36-3713695	501(C)(3)	20,000.				SEE PART IV
(8) HELP USA, INC. 5 HANOVER SQ, 17TH FL NEW YORK NY 10004	13-3922973	501(C)(3)	30,000.				SEE PART IV
(9) HERRON HIGH SCHOOL 110 EAST 16TH ST, INDIANAPOLIS IN 46202	20-2010941	501(C)(3)	10,000.				SEE PART IV
(10) HESTER STREET COLLABORATIVE 113 HESTER STREET, NEW YORK NY 10002	20-0774906	501(C)(3)	30,000.				SEE PART IV
(11) HIGH POINT ACADEMY 6750 NORTH DUNKIN STREET, AURORA CO 80019	55-0899587	501(C)(3)	200,000.				SEE PART IV
(12) HIGHLAND COMMUNITY BUILDERS 1404 N. RANDOLPH AVENUE, ELKINS WV 26241	20-3583045	501(C)(3)	68,000.				SEE PART IV

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(1) HILLTOWN COMMUNITY DEVELOPMENT 387 MAIN ROAD , CHESTERFIELD MA 01012	04-2741009	501(C)(3)	15,647.				SEE PART IV
(2) HISPANIC AMERICAN COUNCIL 930 LAKE STREET, SUITE A KALAMAZOO MI 49001	38-2437758	501(C)(3)	17,000.				SEE PART IV
(3) HISPANIC ASSOC. OF CONTRACTORS & ENTERPRISE 167 W ALLEGHENY AVE., PHILADELPHIA PA 19140	23-2142317	501(C)(3)	42,500.				SEE PART IV
(4) HMONG AMERICAN PARTNERSHIP 1075 ARCADE STREET, ST. PAUL MN 55106	41-1667580	501(C)(3)	30,000.				SEE PART IV
(5) HOME START INC. 5005 TEXAS ST, STE 203 SAN DIEGO CA 92108	95-3138268	501(C)(3)	115,000.				SEE PART IV
(6) HOMEOWNER'S REHAB INC 280 FRANKLIN STREET , CAMBRIDGE MA 02139	04-2519279	501(C)(3)	10,000.				SEE PART IV
(7) HOMESTEAD AFFORDABLE HOUSING INC 115 WEST 4TH ST, STE 100 HOLTON KS 66436	48-1206434	501(C)(3)	21,000.				SEE PART IV
(8) HOPE COMMUNITY INC. 174 E. 104TH STREET, NEW YORK NY 10029	23-7013134	501(C)(3)	8,700.				SEE PART IV
(9) HORN OF AFRICA COMMUNITY IN NORTH AMERICA 5296 UNIVERSITY AVE STE SAN DIEGO CA 92105	33-0696380	501(C)(3)	12,000.				SEE PART IV
(10) HOUSE OF HOPE CDC 3188 POST ROAD, SUITE 210 WARWICK RI 02886	05-0448151	501(C)(3)	50,000.				SEE PART IV
(11) HOUSEABOUTIT INC P.O. BOX 4342, LITTLE ROCK AR 72214	56-2514622	501(C)(3)	18,500.				SEE PART IV
(12) HOUSING & NEIGHBORHOOD DVLPMNT SVCS 15 SOUTH ESSEX AVENUE REAR, ORANGE NJ 07050	22-2712067	501(C)(3)	40,000.				SEE PART IV

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(1) HSG AUTHORITY OF THE CITY OF SAN ANTONIO 818 S. FLORES , SAN ANTONIO TX 78204	74-6002108	GOVERNMENT	6,960.				SEE PART IV
(2) HSG DVLPMT CONSORTIUM OF SEATTLE-KING CTY 1402 3RD AVE, STE 1230 SEATTLE WA 98101	94-3073588	501(C)(3)	19,458.				SEE PART IV
(3) HOUSTON COMMUNITY COLLEGE SYSTEM 3100 MAIN STREET , HOUSTON TX 77002	74-1709152	GOVERNMENT	119,675.				SEE PART IV
(4) HOWARD-SUAMICO SCHOOL DISTRICT 2700 LINEVILLE ROAD , GREEN BAY WI 54313	39-6031599	GOVERNMENT	200,000.				SEE PART IV
(5) HUMAN RESOURCE DVLMT COUNCIL OF DIST IX 32 S. TRACY AVE., BOZEMAN MT 59715-4659	81-0350886	501(C)(3)	66,000.				SEE PART IV
(6) IMAGINE HOUSING 10604 NE 38TH PL, STE 215 KIRKLAND WA 98033	94-3110312	501(C)(3)	30,000.				SEE PART IV
(7) IMPACT CAPITAL 401 SECOND AVE SOUTH, SEATTLE WA 98104	94-3196958	501(C)(3)	48,000.				SEE PART IV
(8) IMPACT SERVICES CORP 1952 E.ALLEGHENY AVE, PHILADELPHIA PA 19134	23-2087348	501(C)(3)	40,000.				SEE PART IV
(9) INDIANA UNIVERSITY P.O BOX 66057, INDIANAPOLIS IN 46266-6057	35-6001673	501(C)(3)	49,000.				SEE PART IV
(10) INDIANAPOLIS NEIGHBORHOOD HSG PARTNERSHIP 3550 N. WASHI BLVD, INDIANAPOLIS IN 46205	35-1742529	501(C)(3)	8,733.				SEE PART IV
(11) INSTITUTO DEL PROGRESO LATINO 2520 S. WESTERN AVENUE, CHICAGO IL 60608	36-2937375	501(C)(3)	266,210.				SEE PART IV
(12) INTERCONGREGATION COMMUNITIES ASSOCIATION 12990 ST. DAVIDS RD, MINNETONKA MN 55345	41-0979010	501(C)(3)	20,000.				SEE PART IV

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) INTERFAITH HOUSING SERVICES 1326 E. AVENUE A, HUTCHINSON KS 67501	48-1099496	501(C)(3)	21,000.				SEE PART IV
(2) INTERIM COMMUNITY DEVELOPMENT 310 MAYNARD AVENUE SOUTH, SEATTLE WA 98104	91-1071278	501(C)(3)	20,000.				SEE PART IV
(3) INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET, NEW YORK NY 10168	13-5660870	501(C)(3)	212,498.				SEE PART IV
(4) IRONBOUND COMMUNITY CORPORATION 179 VAN BUREN ST, SUITE 114 NEWARK NJ 07105	22-1916086	501(C)(3)	23,000.				SEE PART IV
(5) IVANHOE NEIGHBORHOOD COUNCIL 3700 WOODLAND , KANSAS CITY MO 64109-2761	43-1843831	501(C)(3)	111,896.				SEE PART IV
(6) JACKSON COUNTY BOARD OF EDUCATION 398 HOSPITAL ROAD, SYLVA NC 28779	56-6001054	GOVERNMENT	200,000.				SEE PART IV
(7) JAMAICA PLAIN NEIGHBORHOOD DVLPMPT CORP 31 GERMANIA ST., JAMAICA PLAIN MA 02130	04-2652919	501(C)(3)	10,000.				SEE PART IV
(8) JAMESTOWN EARLY LEARNING CENTER 87 NORTH MAIN ROAD, JAMESTOWN RI 02835	05-0486363	C CORP	57,500.				SEE PART IV
(9) JAMMAT HOUSING & COMMUNITY DVLPMPT CORP 700 ELMWOOD AVENUE, PROVIDENCE RI 02907	05-0463993	501(C)(3)	30,190.				SEE PART IV
(10) JANE ADDAMS RESOURCE CORPORATION 4432 N. RAVENSWOOD AVE., CHICAGO IL 60640	36-3682559	501(C)(3)	405,031.				SEE PART IV
(11) JEFFERSON EAST INC. 14628 E. JEFFERSON AVENUE, DETROIT MI 48215	38-3231066	501(C)(3)	49,750.				SEE PART IV
(12) JEWISH VOCATIONAL SERVICE INC 29 WINTER STREET,, 5TH FL BOSTON MA 02108	04-2104357	501(C)(3)	100,000.				SEE PART IV

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(1) JOHN H. BONER COMMUNITY CENTER 2236 EAST TENTH ST., INDIANAPOLIS IN 46201	23-7204495	501(C)(3)	186,675.				SEE PART IV
(2) JOURNEY HOUSE, INC. 2110 W. SCOTT STREET, MILWAUKEE WI 53204	39-1203539	501(C)(3)	69,500.				SEE PART IV
(3) JUST A START CORPORATION 1035 CAMBRIDGE ST, CAMBRIDGE MA 02141	23-7121174	501(C)(3)	10,000.				SEE PART IV
(4) JUXTAPOSITION INC. 2007 EMERSON AVE N, MINNEAPOLIS MN 55411	41-1851915	501(C)(3)	85,000.				SEE PART IV
(5) KALAMAZOO COUNTY LAND BANK 1523 RIVERVIEW DR., KALAMAZOO MI 49004	27-0721363	GOVERNMENT	138,000.				SEE PART IV
(6) KALAMAZOO COUNTY TREASURER 201 W. KALAMAZOO AVE, KALAMAZOO MI 49007	38-6004860	GOVERNMENT	135,000.				SEE PART IV
(7) KALAMAZOO NEIGHBORHOOD HOUSING 802 S. WESTNEDGE, KALAMAZOO MI 49008	38-2391442	501(C)(3)	52,000.				SEE PART IV
(8) KAREN ORGANIZATION OF SAN DIEGO 5354 UNIVERSITY AVE, SAN DIEGO CA 92105	27-2917644	C CORP	6,000.				SEE PART IV
(9) KEEP INDIANAPOLIS BEAUTIFUL 1029 E. FLETCHER AVE, INDIANAPOLIS IN 46203	31-1005792	501(C)(3)	40,000.				SEE PART IV
(10) KENTUCKY HIGHLANDS COMMUNITY DVLPMNT CORP 362 OLD WHITLEY ROAD, LONDON KY 40744	61-1253192	501(C)(3)	116,344.				SEE PART IV
(11) KING PARK AREA DEVELOPMENT CORPORATION 2430 N. DELAWARE, INDIANAPOLIS IN 46205	35-1704590	501(C)(3)	42,240.				SEE PART IV
(12) LA CASA DE DON PEDRO 75 PARK AVENUE, NEWARK NJ 07104	23-7249368	501(C)(3)	10,098.				SEE PART IV

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(1) LA CASA DE SALUD 966 PROSPECT AVENUE, BRONX NY 10459-3270	02-0693325	501(C)(3)	50,000.				SEE PART IV
(2) LACONIA AREA COMMUNITY LAND TRUST 658 UNION AVENUE, LACONIA NH 03246	02-0426348	501(C)(3)	51,000.				SEE PART IV
(3) LAFAYETTE SQUARE AREA COALITION 3610 GUION ROAD, INDIANAPOLIS IN 46222	20-4008623	501(C)(3)	85,500.				SEE PART IV
(4) LAKE STREET COUNCIL 919 E. LAKE STREET, MINNEAPOLIS MN 55407	41-0975738	501(C)(3)	10,000.				SEE PART IV
(5) LAKEWOOD SCHOOL DISTRICT NO. 3 17110 160 DR. N.E., N. LAKEWOOD WA 98259	91-0967947	GOVERNMENT	200,000.				SEE PART IV
(6) LONDON, BONE, BAKER ARCHITECTS 734 N. MILWAUKEE AVENUE, CHICAGO IL 60622	36-3514997	S CORP	15,000.				SEE PART IV
(7) LATINO ECONOMIC DVLPMNT. CTR 1501 E LAKE ST LWR LVL MINNEAPOLIS MN 55407	51-0467167	501(C)(3)	61,500.				SEE PART IV
(8) LAWNDALE CHRISTIAN DEVELOPMENT CORPORATION 3843 W. OGDEN AVE, 2ND FL CHICAGO IL 60623	36-3573036	501(C)(3)	18,000.				SEE PART IV
(9) LIGHTHOUSE OF OAKLAND COUNTY P.O. BOX 430508 STE 202, PONTIAC MI 48343	38-2391381	501(C)(3)	94,020.				SEE PART IV
(10) LITTLE ANGELS ACADEMY CHILDCARE 415 CENTRAL AVENUE, JOHNSTON RI 02919	13-4305227	LLC	8,750.				SEE PART IV
(11) LITTLE VILLAGE COMMUNITY DEVELOPMENT CORP 2756 S. HARDING AVE. CHICAGO IL 60623-4412	36-3727669	501(C)(3)	37,595.				SEE PART IV
(12) LOGAN SQUARE NEIGHBORHOOD ASSOCIATION 2840 N. MILWAUKEE AVE., CHICAGO IL 60618	36-2638491	501(C)(3)	56,000.				SEE PART IV

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(1) LOOKING UPWARDS INC 438 E MAIN ROAD, MIDDLETOWN RI 02842	05-0376075	501(C)(3)	5,108.				SEE PART IV
(2) LTSC COMMUNITY DEVELOPMENT CORP 231 E THIRD ST, LOS ANGELES CA 90013	95-4444102	501(C)(3)	75,500.				SEE PART IV
(3) LUMBEE LAND DEVELOPMENT INC 6984 NC HWY 711 WEST, PEMBROKE NC 28372	56-2259380	501(C)(3)	20,000.				SEE PART IV
(4) LUTHERAN SOCIAL SERVICE OF MINNESOTA 2485 COMO AVE. SUITE B, ST. PAUL MN 55108	41-0872993	501(C)(3)	152,433.				SEE PART IV
(5) LUTHERAN SOCIAL SERVICES HOUSING 3911 20TH AVENUE S, FARGO ND 58103	26-2358686	501(C)(3)	20,000.				SEE PART IV
(6) LUTHERAN SOCIAL SERVICE OF NORTHWESTERN OH 2149 COLLINGWOOD BLVD., TOLEDO OH 43620	34-4428225	501(C)(3)	91,500.				SEE PART IV
(7) MADISON PARK DEVELOPMENT 184 DUDLEY ST, STE 102, BOSTON MA 02119	23-7164223	501(C)(3)	10,000.				SEE PART IV
(8) MADISONVILLE COMMUNITY URBAN REDVLP CORP. 5906 MADISON ROAD, CINCINNATI OH 45227	51-0178908	501(C)(3)	202,500.				SEE PART IV
(9) MAGIC YEARS CHILD CARE GALLERY 2890 POST ROAD, WARWICK RI 02886	05-0482131	S CORP	8,000.				SEE PART IV
(10) MANNA, INC. 828 EVARTS STREET, NE, WASHINGTON DC 20018	52-1260698	501(C)(3)	68,100.				SEE PART IV
(11) MAPLETON-FALL CREEK DVLPMENT CORP 130 E 30TH ST, INDIANAPOLIS IN 46205	35-1654999	501(C)(3)	70,000.				SEE PART IV
(12) MARY RIGG NEIGHBORHOOD CENTER 1920 W. MORRIS ST., INDIANAPOLIS IN 46221	35-0868954	501(C)(3)	180,000.				SEE PART IV

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LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MATTHEWS-DICKEY BOY'S & GIRLS' CLUB 4245 N KINGSHIGHWAY BLVD, ST. LOUIS MO 63115	43-6060717	501(C)(3)	50,000.				SEE PART IV
(2) MATRIX HUMAN SERVICES 120 PARSONS, DETROIT MI 48201	38-1358015	501(C)(3)	37,125.				SEE PART IV
(3) MATTIE RHODES MEMORIAL SOCIETY 1740 JEFFERSON ST, KANSAS CITY MO 64108	44-0546343	501(C)(3)	102,728.				SEE PART IV
(4) MEDIA ARTS CENTER, SAN DIEGO 2921 EL CAJON BLVD., SAN DIEGO CA 92104	33-0871577	501(C)(3)	12,000.				SEE PART IV
(5) MERCY HOUSING & HUMAN DVLPMNT INC 1135 FORD STREET, GULFPORT MS 39507-2808	72-1354070	501(C)(3)	34,000.				SEE PART IV
(6) MERCY HOUSING NORTHWEST 2505 3RD AVE STE 204, SEATTLE WA 98121	91-1546525	501(C)(3)	40,000.				SEE PART IV
(7) MERRICK COMMUNITY SERVICES 965 PAYNE AVE SUITE 300, ST. PAUL MN 55130	41-0693851	501(C)(3)	20,000.				SEE PART IV
(8) METEC 2605 W. KRAUSE, PEORIA IL 61605	37-1410246	501(C)(3)	137,624.				SEE PART IV
(9) METRO COMMUNITY DEVELOPMENT INC 503 S. SAGINAW ST., #285 FLINT MI 48502	38-3072010	501(C)(3)	96,000.				SEE PART IV
(10) METRO NORTH COMMUNITY DVLPT CORPORATION 3101 N. MAIN ST, JACKSONVILLE FL 32206	31-1761439	501(C)(3)	94,958.				SEE PART IV
(11) METROPOLITAN FAMILY SERVICES 1 N. DEARBORN, STE 513 CHICAGO IL 60602	36-2167940	501(C)(3)	289,750.				SEE PART IV
(12) MI CASA INC. 6230 3RD ST NW, STE 2 WASHINGTON DC 20011	52-1796840	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) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

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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) MID CENTRAL COMMUNITY ACTION 1301 W. WASHINGTON ST, BLOOMINGTON IL 61701	37-0903245	501(C)(3)	10,000.				SEE PART IV
(2) MIDTOWN INDIANAPOLIS INC C/O CICF, 615 N.AL ST INDIANAPOLIS IN 46204	80-0228952	501(C)(3)	30,000.				SEE PART IV
(3) MIDWEST MINNESOTA CDC 119 GRAYSTONE PLAZA, DETROIT LAKES MN 56501	41-0972298	501(C)(3)	50,000.				SEE PART IV
(4) MILWAUKEE POLICE DEPARTMENT P.O. BOX 531, MILWAUKEE WI 53201-0531	39-6005532	GOVERNMENT	20,000.				SEE PART IV
(5) MINISTRY WITH COMMUNITY INC 440 N. CHURCH ST, KALAMAZOO MI 49007	38-2596981	C CORP	10,000.				SEE PART IV
(6) MINNEAPOLIS BICYCLE COALITION 1428 WA AVE, MINNEAPOLIS MN 55454	27-1539442	501(C)(3)	7,500.				SEE PART IV
(7) MINNEAPOLIS PUBLIC HOUSING 1001 WA AVE N, MINNEAPOLIS MN 55401	41-1677709	GOVERNMENT	20,000.				SEE PART IV
(8) MISSION HILL NEIGHBORHOOD HOUSING SVCES INC 1620 TREMONT STREET, BOSTON MA 02120	23-7428011	501(C)(3)	10,000.				SEE PART IV
(9) MISSISSIPPI ACTION FOR COMMUNITY EDUCATION 119 S. THEOBALD ST., GREENVILLE MS 38701	64-0465680	501(C)(3)	55,500.				SEE PART IV
(10) MODEL CITIES COMMUNITY DVLP CORPORATION 839 UNIVERSITY AVE W, ST. PAUL MN 55104	41-1936584	501(C)(3)	245,000.				SEE PART IV
(11) MON VALLEY INITIATIVE 303-305 EAST EIGHTH AVE, HOMESTEAD PA 15120	25-1591350	501(C)(3)	142,000.				SEE PART IV
(12) MOUNT AIRY, USA 6703 GERMANTOWN AVE, PHILADELPHIA PA 19119	22-2526396	501(C)(3)	28,791.				SEE PART IV

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(1) MOUNT VERNON MANOR INC. 3311 WALLACE ST, PHILADELPHIA PA 19104	23-2037301	501(C)(3)	5,200.				SEE PART IV
(2) MOUNTAIN ASSOC. FOR COMMUNITY ECONOMIC DVLP 433 CHESTNUT STREET, BEREA KY 40403	31-0900246	501(C)(3)	73,474.				SEE PART IV
(3) MULTI-SERVICE CENTER P.O. BOX 23699, FEDERAL WAY WA 98093	23-7120815	501(C)(3)	20,000.				SEE PART IV
(4) MUTUAL HOUSING ASSOC OF GREATER HARTFORD 95 NILES STREET, HARTFORD CT 06105	22-2925052	501(C)(3)	226,900.				SEE PART IV
(5) MUTUAL HOUSING ASSOC. OF SOUTHWESTERN CT 63 STILLWATER AVENUE, STAMFORD CT 06902	22-3035152	501(C)(3)	63,000.				SEE PART IV
(6) N STREET VILLAGE INC 1333 N STREET NW, WASHINGTON DC 20005-3601	52-1007373	501(C)(3)	30,000.				SEE PART IV
(7) NATIONAL COALITION FOR HOMELESS VETERANS 333 1/2 PA AVE. SE, WASHINGTON DC 20003	52-1826860	501(C)(3)	60,000.				SEE PART IV
(8) NATIVE AMERICAN CONNECTIONS 4520 N. CENTRAL AVE, PHOENIX AZ 85012	86-0293585	501(C)(3)	89,000.				SEE PART IV
(9) NEAR EAST AREA RENEWAL INC 2336 E. 10TH ST, INDIANAPOLIS IN 46201	20-0146547	501(C)(3)	10,000.				SEE PART IV
(10) NEAR NORTH DEVELOPMENT CORPORATION 2123 N. MERIDIAN ST., INDIANAPOLIS IN 46202	35-1427889	501(C)(3)	12,505.				SEE PART IV
(11) NEAR WEST SIDE COMMUNITY DVLP CORPORATION 216 SOUTH HOYNE AVE, CHICAGO IL 60612	36-3607203	501(C)(3)	20,000.				SEE PART IV
(12) NEIGHBORHOOD DEVELOPMENT CENTER 663 UNIVERSITY AVE, ST. PAUL MN 55104	41-1738791	501(C)(3)	40,500.				SEE PART IV

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(1) NEIGHBORHOOD ECONOMIC DVLPM. CORP. 10 W MAIN STREET, MESA AZ 85201	86-0888028	501(C)(3)	219,600.				SEE PART IV
(2) NEIGHBORHOOD HOUSING SVCS OF NEW BRITAIN 223 BROAD ST, NEW BRITAIN CT 06053	06-1006312	501(C)(3)	40,000.				SEE PART IV
(3) NEIGHBORHOOD HOUSING SERVICES OF NEW HAVEN 333 SHERMAN AVE, NEW HAVEN CT 06511	06-1021268	501(C)(3)	75,500.				SEE PART IV
(4) NEIGHBORHOOD HOUSING SERVICES OF TOLEDO 704 2ND ST, TOLEDO OH 43605	34-1230687	501(C)(3)	22,174.				SEE PART IV
(5) NEIGHBORHOOD NONPROFIT HOUSING 195 W.GOLF COURSE RD, STE 1, LOGAN UT 84321	87-0559307	501(C)(3)	44,711.				SEE PART IV
(6) NEIGHBORHOOD RECOVERY COMMUNITY DEVELOPMENT 5445 ALMEDA RD., HOUSTON TX 77004	76-0377117	501(C)(3)	121,816.				SEE PART IV
(7) NEIGHBORHOOD RESOURCE CENTER 1519 WILLIAMSBURG RD, RICHMOND VA 23231	33-1024355	501(C)(3)	120,500.				SEE PART IV
(8) NEIGHBORHOOD SELF-EMPLOYMENT INITIATIVE 111 MONUMENT CIRCLE, INDIANAPOLIS IN 46204	35-2028160	501(C)(3)	25,000.				SEE PART IV
(9) NESSAIR 6630 HOPKINS RD, N. CHESTERFIELD VA 23234	46-1399683	LLC - P	10,000.				SEE PART IV
(10) NEW COMMUNITY CORP 233 WEST MARKET STREET, NEWARK NJ 02108	22-1911104	501(C)(3)	172,300.				SEE PART IV
(11) NEW DIRECTIONS INC 11303 WILSHIRE BLVD, LOS ANGELES CA 90073	95-4242745	501(C)(3)	20,000.				SEE PART IV
(12) NEW ECOLOGY, INC. 15 COURT SQUARE, SUITE 420 BOSTON MA 02108	04-3447828	501(C)(3)	169,750.				SEE PART IV

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(1) NEW HOPE COMMTY DVLPMT NON-PROFIT HSG CORP 19487 EVERGREEN, DETROIT MI 48219	38-2975829	501(C)(3)	27,150.				SEE PART IV
(2) NEW HOPE HOUSING INC. 117 TEXAS AVENUE, HOUSTON TX 77002	73-1419279	501(C)(3)	7,500.				SEE PART IV
(3) NEW KENSINGTON COMMUNITY DVLPMT CORP 2515 FRANKFORD AVE, PHILADELPHIA PA 19125	22-2610536	501(C)(3)	35,000.				SEE PART IV
(4) NEW NEIGHBORHOODS INC. 76 PROGRESS DR, STE 140 STAMFORD CT 06902	06-0864050	501(C)(3)	185,575.				SEE PART IV
(5) NEW YORK CITY DEPARTMENT OF EDUCATION 44-36 VERNON BOULEVARD LONG ISLAND NY 11101	13-6400434	GOVERNMENT	200,000.				SEE PART IV
(6) NEWPORT COUNTY YMCA 792 VALLEY ROAD, MIDDLETOWN RI 02842	05-0258916	501(C)(3)	56,750.				SEE PART IV
(7) NORRIS SQUARE COMMUNITY ALLIANCE 174 DIAMOND ST, PHILADELPHIA PA 19122	23-9233412	501(C)(3)	30,000.				SEE PART IV
(8) NORRIS SQUARE NEIGHBORHOOD 2141 N. HOWARD ST, PHILADELPHIA PA 19122	23-2045157	501(C)(3)	10,000.				SEE PART IV
(9) NORTH COUNTY LIFELINE 200 MICHIGAN AVE, VISTA CA 92084	95-2794253	501(C)(3)	111,524.				SEE PART IV
(10) NORTH EAST COMMUNITY ACTION CORP 16 N. COURT ST, BOWLING GREEN MO 63334	43-1017571	501(C)(3)	51,000.				SEE PART IV
(11) NORTH FLORIDA EDUCATIONAL DVLPMT CORP P.O. BOX 550, GRETNA FL 32332	59-2801357	501(C)(3)	33,000.				SEE PART IV
(12) NORTH LAWNSDALE EMPLOYMENT NETWORK 3726 W. FLOURNOY, CHICAGO IL 60624	36-4295189	501(C)(3)	310,431.				SEE PART IV

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(1) NORTH RIVER COMMISSION 3403 W. LAURENCE AVE, CHICAGO IL 60625	39-2526797	501(C)(3)	25,000.				SEE PART IV
(2) NORTHEAST BROOKLYN HOUSING DVLPM T CORP 132 RALPH AVE, 5TH FL BROOKLYN NY 11233	11-2737223	501(C)(3)	120,750.				SEE PART IV
(3) NORTHEAST ENTREPRENEUR FUND 202 WEST SUPERIOR ST, DULUTH MN 55802	36-3566632	501(C)(3)	85,650.				SEE PART IV
(4) NORTHEAST FLORIDA COMMUNITY ACTION AGENCY P.O. BOX 52025, JACKSONVILLE FL 32201	59-1090517	C CORP	33,999.				SEE PART IV
(5) NORTHEAST SOUTH DAKOTA COMMUNITY ACTION PROG 104 ASH STREET EAST, SISSETON SD 57262	46-0282100	501(C)(3)	50,696.				SEE PART IV
(6) NORTHERN CAMBRIA CDC 4200 CRAWFORD AVE NORTHERN CAMBRIA PA 15714	25-1534235	501(C)(3)	43,000.				SEE PART IV
(7) NORTHERN ECONOMIC INITIATIVES 1401 PRESQUE ISLE AVE, MARQUETTE MI 49855	38-3024786	501(C)(3)	33,000.				SEE PART IV
(8) NORTHSIDE ASSOCIATION FOR COMMUNITY DVLPM T 612 NORTH PARK ST, KALAMAZOO MI 49007	38-2536811	501(C)(3)	22,000.				SEE PART IV
(9) NORTHSIDE ECONOMIC OPPORTUNITY NETWORK 1011 W. BROADWAY AVE., MINNEAPOLIS MN 55411	80-0163521	501(C)(3)	41,431.				SEE PART IV
(10) NORTHSIDE INSTITUTIONS NBHD ALLIANCE 20 SARGEANT STREET, HARTFORD CT 06105	22-3887275	501(C)(3)	150,000.				SEE PART IV
(11) NORTHWEST JACKSONVILLE CDC 3416 MONCRIEF RD, JACKSONVILLE FL 32209	31-1809770	501(C)(3)	168,500.				SEE PART IV
(12) NORTHWEST MONTANA HUMAN RESOURCES 214 MAIN ST, KALISPELL MT 59901	81-0366018	501(C)(3)	53,792.				SEE PART IV

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(1) NORTHWEST SIDE HOUSING CENTER 5233 W DIVERSEY AVE, CHICAGO IL 60639	20-1413891	501(C)(3)	100,275.				SEE PART IV
(2) NOVA WORKFORCE INSTITUTE OF NE LOUISIANA 212 WALNUT ST, STE 100 MONROE LA 71201	30-0462723	501(C)(3)	15,000.				SEE PART IV
(3) NUESTRA COMUNIDAD DEVELOPMENT CORP 56 WARREN ST, SUITE 200 ROXBURY MA 02119	04-2741543	501(C)(3)	5,550.				SEE PART IV
(4) NUEVA ESPERANZA INC 4261 NORTH 5TH ST, PHILADELPHIA PA 19140	23-2552707	501(C)(3)	30,000.				SEE PART IV
(5) OAKLAND PLANNING & DEVELOPMENT CORP 235 ATWOOD ST, REAR PITTSBURG PA 15213	25-1382510	501(C)(3)	71,500.				SEE PART IV
(6) OCEAN BAY COMMUNITY DVLPMT. 434 BEACH 54TH STREET, ARVERNE NY 11692	84-1622031	501(C)(3)	104,200.				SEE PART IV
(7) OLNEYVILLE HOUSING CORPORATION 66 CHAFFEE STREET, PROVIDENCE RI 02909	22-3010422	501(C)(3)	209,140.				SEE PART IV
(8) ONE DETROIT CREDIT UNION 630 HOWARD STREET, DETROIT MI 48226	38-0480308	501(C)(14)	211,496.				SEE PART IV
(9) ONE ROOF COMMUNITY HOUSING 12 E. 4TH STREET, SUITE 201 DULUTH MN 55805	41-1678328	501(C)(3)	49,600.				SEE PART IV
(10) OPERATION ABLE OF MICHIGAN 4750 WOODWARD AVE, STE 201 DETROIT MI 48201	38-2861705	501(C)(3)	131,484.				SEE PART IV
(11) OPERATION NEW HOPE, INC. 1830 N. MAIN ST, JACKSONVILLE FL 32206	59-3590360	501(C)(3)	159,436.				SEE PART IV
(12) OPPORTUNITY RESOURCE FUND 7700 2ND AVE, SUITE 608, DETROIT MI 48202	38-2784136	501(C)(3)	783,996.				SEE PART IV

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(1) ORFORD VILLAGE HOUSING DVLPMT 619 HARTFORD RD, MANCHESTER CT 06040	06-1428945	501(C)(3)	10,000.				SEE PART IV
(2) OVER THE RAINBOW LEARNING CENTER II 50 NIANATIC AVENUE, PROVIDENCE RI 02907	46-1023656	S CORP	40,000.				SEE PART IV
(3) OZARK ACTION 710 E. MAIN ST, WEST PLAINS MO 65775	43-0838508	501(C)(3)	93,000.				SEE PART IV
(4) PATH VENTURES 340 N. MADISON AVE, LOS ANGELES CA 90004	20-1892523	501(C)(3)	30,000.				SEE PART IV
(5) PATHFINDER SERVICES INC 2824 THEATER AVE, HUNTINGTON IN 46750	35-1122311	501(C)(3)	67,500.				SEE PART IV
(6) PATHSTONE CORPORATION 400 E. AVE, STE 200 ROCHESTER NY 14607	16-0984913	501(C)(3)	62,804.				SEE PART IV
(7) PATHWAYS - VA INC 1200 W. WASHINGTON ST, PETERSBURG VA 23803	54-1868900	501(C)(3)	90,575.				SEE PART IV
(8) PATHWAYS MILWAUKEE INC 8800 W. BLUEMOUND RD, MILWAUKEE WI 53226	45-1539053	501(C)(3)	45,000.				SEE PART IV
(9) PAWTUCKET CENTRAL FALLS DVLPMT CORP 204 BROAD STREET, PAWTUCKET RI 02860	22-3241611	501(C)(3)	163,999.				SEE PART IV
(10) PAWTUCKET DAY NURSERY ASSOC 25 THORNLEY STREET, PAWTUCKET RI 02860	05-0258926	501(C)(3)	10,000.				SEE PART IV
(11) PEARL RIVER VALLEY OPPORTUNITY INC 756 HWY 98 BYPASS, COLUMBIA MS 39429	64-0433756	501(C)(3)	19,500.				SEE PART IV
(12) PEOPLE UNITED FOR SUSTAINABLE HOUSING 271 GRANT ST, BUFFALO NY 14213	20-3558447	501(C)(3)	59,500.				SEE PART IV

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

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

Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PEOPLE'S EMERGENCY CENTER 324 NORTH 39TH ST., PHILADELPHIA PA 19104	23-2017882	501(C)(3)	93,799.				SEE PART IV
(2) PEOPLES EMERGENCY CENTER CDC 325 N. 39 ST, STE 120 PHILADELPHIA PA 19104	23-2687223	501(C)(3)	240,422.				SEE PART IV
(3) PEORIA CITIZEN'S COMMITTEE FOR ECONOMIC OPP 711 W. MCBEAN STREET, PEORIA IL 61605	37-6058636	501(C)(3)	615,000.				SEE PART IV
(4) PEORIA OPPORTUNITIES FOUNDATION 521 E. KANSAS STREET, PEORIA IL 61603	37-1392514	501(C)(3)	25,050.				SEE PART IV
(5) PEORIA PARK DISTRICT FOUNDATION 2218 N PROSPECT ROAD, PEORIA IL 61603	37-1368760	501(C)(3)	52,000.				SEE PART IV
(6) PHILADELPHIA ASSOCIATION OF CDC 1315 WALNUT ST, PHILADELPHIA PA 19107	23-2707112	501(C)(3)	18,575.				SEE PART IV
(7) PILLSBURY UNITED COMMUNITIES 414 S. 8TH ST, MINNEAPOLIS MN 55404	41-0916478	501(C)(3)	10,000.				SEE PART IV
(8) PITTSBURGH PARTNERSHIP FOR NEIGHBORHOOD DVL 225 ROSS ST, STE 202, PITTSBURG PA 15219	25-1578436	501(C)(3)	56,801.				SEE PART IV
(9) PLANNING OFFICE FOR URBAN AFFAIRS INC 84 STATE STREET, #600, BOSTON MA 02109	23-7089722	501(C)(3)	10,000.				SEE PART IV
(10) POWDERHORN RESIDENTS GROUP 2017 EAST 38TH ST, MINNEAPOLIS MN 55407	41-1280596	501(C)(3)	45,000.				SEE PART IV
(11) PRAIRIELAND COUNCIL INC 201 E HURST AVE, HAVANA IL 62644	35-2194442	501(C)(3)	41,158.				SEE PART IV
(12) PRESBYTERIAN HOMES & FAMILY SVCS 150 LINDEN AVE, LYNCHBERG VA 24503	54-0346118	501(C)(3)	90,000.				SEE PART IV

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
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1 (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) PRICE HILL WILL 3724 ST. LAWRENCE AVE, CINCINNATI OH 45205	20-1452663	501(C)(3)	300,691.				SEE PART IV
(2) PRIMECARE COMMUNITY HEALTH INC 1431 N.WESTERN AVE, CHICAGO IL 60622	36-3845253	501(C)(3)	28,580.				SEE PART IV
(3) PROGRESO LATINO INC 626 BROAD STREET, CENTRAL FALLS RI 02863	05-0380608	501(C)(3)	56,328.				SEE PART IV
(4) PROJECT FOR PRIDE IN LIVING 1035 E. FRANKLIN AVE., MINNEAPOLIS MN 55404	23-7232208	501(C)(3)	270,500.				SEE PART IV
(5) PROSPECT PARK 2020 2950 UNIVERSITY AVE, MINNEAPOLIS MN 55414	46-2407192	501(C)(3)	29,500.				SEE PART IV
(6) PROVIDENCE HOUSING AUTHORITY 100 BROAD ST, SUITE 130 PROVIDENCE RI 02903	05-6000193	GOVERNMENT	134,936.				SEE PART IV
(7) PUBLIC COUNCIL 610 S. ARDMORE AVE, LOS ANGELES CA 90005	23-7105149	501(C)(3)	35,000.				SEE PART IV
(8) PUDDING PLEASE LLC 2715 EAST BROAD STREET, RICHMOND VA 23223	46-4453650	LLC - S CORP	10,000.				SEE PART IV
(9) QUAD COMMUNITIES DEVELOPMENT CORPORATION 4659 S.COTTAGE GROVE AVE., CHICAGO IL 60653	81-0618445	501(C)(3)	45,703.				SEE PART IV
(10) R. WAGNER INC 205 HALLENE RD, STE 324, WARWICK RI 02886	05-0456439	S CORP	10,400.				SEE PART IV
(11) REBUILDING TOGETHER PHILADELPHIA P.O. BOX 42752, PHILADELPHIA PA 19101	23-2549594	501(C)(3)	49,500.				SEE PART IV
(12) RESOURCES FOR COMMUNITY DEVELOPMENT 2730 TELEGRAPH AVE., BERKELEY CA 94705	94-2952466	501(C)(3)	25,250.				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) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

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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

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

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) RILEY AREA DEVELOPMENT CORP. 875 MA AVE, INDIANAPOLIS IN 46204	31-0963438	501(C)(3)	132,920.				SEE PART IV
(2) RIVERWORKS DEVELOPMENT CORP. 526 E. CONCORDIA AVE, MILWAUKEE WI 53212	39-1731739	501(C)(3)	184,668.				SEE PART IV
(3) ROCKDALE COUNTY BOARD OF COMMISSIONERS P.O. BOX 289, CONYERS GA 30012	58-6000882	GOVERNMENT	7,000.				SEE PART IV
(4) ROCKHURST UNIVERSITY 1100 ROCKHURST RD, KANSAS CITY MO 64110	44-0545813	501(C)(3)	100,000.				SEE PART IV
(5) ROGER WILLIAMS DAY CARE CENTER 64 APPLGATE LANE, PROVIDENCE RI 02905	05-0340915	501(C)(3)	5,069.				SEE PART IV
(6) ROMAN CATHOLIC DIOCESE OF COVINGTON 1600 DIXIE HIGHWAY, PARK HILLS KY 41011	61-0458380	501(C)(3)	200,000.				SEE PART IV
(7) ROSEBRIDGE INC 3118 SPRING GARDEN ST, PHILADELPHIA PA 19104	23-2687223	501(C)(3)	7,500.				SEE PART IV
(8) RUBICON PROGRAMS, INC. 2500 BISSELL AVENUE, RICHMOND CA 94804	94-2301550	501(C)(3)	192,000.				SEE PART IV
(9) RUPCO INC 289 FAIR STREET, KINGSTON NY 12401	22-2368174	501(C)(3)	35,000.				SEE PART IV
(10) RURAL COMMUNITY ASSISTANCE CORP. 3120 FREEBRD DR., W. SACRAMENTO CA 95691	94-2512284	501(C)(3)	12,000.				SEE PART IV
(11) RURAL HOUSING DVLPMT CORP 709 N. 1890 W, #39A, PROVO UT 84601	87-0622732	501(C)(3)	51,000.				SEE PART IV
(12) RURAL ULSTER PRESERVATION CO 289 FAIR STREET, KINGSTON NY 12401	22-2368174	501(C)(3)	25,500.				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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2015

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) S.A.Y. DETROIT 150 STIMSON ST, STE 1013 DETROIT MI 48201	20-4786626	501(C)(3)	200,000.				SEE PART IV
(2) SACRED HEART COMMUNITY SVCE. 1381 S FIRST ST, STE 250 SAN JOSE CA 95110	23-7179787	501(C)(3)	145,000.				SEE PART IV
(3) SAFER FOUNDATION 571 W. JACKSON BLVD., CHICAGO IL 60661	36-2762168	501(C)(3)	93,656.				SEE PART IV
(4) SALEM HARBOR COMMUNITY DVLPMT 102 LAFAYETTE STREET, SALEM MA 01970	04-2686893	501(C)(3)	15,000.				SEE PART IV
(5) SAN DIEGO HOUSING COMMISSION 1122 BROADWAY, SAN DIEGO CA 92101	95-3390896	GOVERNMENT	180,000.				SEE PART IV
(6) SANTA MARIA COMMUNITY SERVICES 617 STRAINER AVE, CINCINNATI OH 45204	31-0537141	501(C)(3)	304,791.				SEE PART IV
(7) SANTEE-LYNCHES AFFORDABLE HOUSING & CDC 255 BROAD STREET, SUMTER SC 29150	57-0951975	501(C)(3)	44,850.				SEE PART IV
(8) SARAH'S CIRCLE 2551 17TH ST NW, WASHINGTON DC 20009	52-1338101	501(C)(3)	25,500.				SEE PART IV
(9) SARGENT SHRIVER NATIONAL CENTER 50 E. WA ST, STE 500 CHICAGO IL 60602	36-3151279	501(C)(3)	50,000.				SEE PART IV
(10) SATELLITE AFFORDABLE HOUSING 1521 UNIVERSITY AVE, BERKELEY CA 94703	94-3031375	501(C)(3)	20,000.				SEE PART IV
(11) SCHOOL DISTRICT OF KANSAS CITY, MISSOURI 1211 MCGEE, KANSAS CITY MO 64106	44-6003108	GOVERNMENT	225,000.				SEE PART IV
(12) SCHOOL DISTRICT OF LA CROSSE 1500 RANGER DRIVE, LA CROSSE WI 54603	39-6002841	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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Schedule I (Form 990) (2015)

**SCHEDULE I
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**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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SEATTLE CHINATOWN/INTL DIST.PRESERV&DVLPMT 409 MAYNARD AVE. S, SEATTLE WA 98104	91-0968693	501(C)(3)	40,000.				SEE PART IV
(2) SELF-HELP ENTERPRISES 8445 W. ELOWIN COURT, VISALIA CA 93291	94-1592676	501(C)(3)	53,600.				SEE PART IV
(3) SENIORS FOUNDATION 600 S. 70TH ST, BLDG #7 LINCOLN NE 68510	47-0630837	501(C)(3)	20,000.				SEE PART IV
(4) SER METRO DETROIT 9301 MICHIGAN AVE., DETROIT MI 48210	38-2080820	501(C)(3)	211,490.				SEE PART IV
(5) SER JOBS FOR PROG. OF THE TEXAS GULF COAST 201 BROADWAY, HOUSTON TX 77026	74-1590387	501(C)(3)	230,608.				SEE PART IV
(6) SEVEN HILLS NEIGHBORHOOD HOUSE 901 FINDLEY ST, CINCINNATI OH 45214	31-0648619	501(C)(3)	63,900.				SEE PART IV
(7) SHELDON OAK CENTRAL, INC. 54 S. PROSPECT ST, HARTFORD CT 06106	06-1011060	501(C)(3)	239,500.				SEE PART IV
(8) SKID ROW HOUSING TRUST 1317 E. SEVENTH ST, LOS ANGELES CA 90021	95-4205316	501(C)(3)	35,000.				SEE PART IV
(9) SKYWAY SOLUTIONS P.O. BOX 78580, SEATTLE WA 98179	27-2975837	501(C)(3)	47,200.				SEE PART IV
(10) SMITH HILL COMMUNITY DVLPMT 231 DOUGLAS AVENUE, PROVIDENCE RI 02908	05-0466422	501(C)(3)	25,000.				SEE PART IV
(11) SMITHFIELD AVENUE CONGREGATION 514 SMITHFIELD AVENUE, PAWTUCKET RI 02860	05-0264669	501(C)(3)	21,400.				SEE PART IV
(12) SOMERVILLE COMMUNITY CORP 337 SOMERVILLE AVE, SOMERVILLE MA 02143	23-7293380	501(C)(3)	10,000.				SEE PART IV

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(1) SOUTH COUNTY COMMUNITY ACTION 1935 KINGSTOWN ROAD, WAKEFIELD RI 02879	05-0351121	501(C)(3)	17,150.				SEE PART IV
(2) SOUTH EAST EFFECTIVE DVLPMT 5117 RAINIER AVE S, SEATTLE WA 98118	91-0947619	501(C)(3)	20,000.				SEE PART IV
(3) SOUTH SIDE MISSION OF PEORIA 1127 S. LARAMIE ST, PEORIA IL 61605	37-0663572	501(C)(3)	15,000.				SEE PART IV
(4) SOUTHEAST ALABAMA SELF HELP P.O. DRAWER 1080, TUSKEGEE INST AL 36087	63-0571776	501(C)(3)	33,000.				SEE PART IV
(5) SOUTHEAST COMMUNITY SERVICES 901 SHELBY ST, 4TH FL INDIANAPOLIS IN 46203	35-1318068	501(C)(3)	209,000.				SEE PART IV
(6) SOUTHERN MUTUAL HELP ASSOC 3602 OLD JEANERETTE RD, NEW IBERIA LA 70563	72-0696092	501(C)(3)	67,500.				SEE PART IV
(7) SOUTHWEST BOSTON CDC 11 FAIRMOUNT AVENUE, HYDE PARK MA 02136	04-3562853	501(C)(3)	18,958.				SEE PART IV
(8) SOUTHWEST DETROIT BUSINESS ASSOC 7752 W. VERNOR HWY, DETROIT MI 48209	38-2262287	501(C)(3)	78,000.				SEE PART IV
(9) SOUTHWEST HOUSING SOLUTIONS CORP 1920 25TH STREET, DETROIT MI 48216	38-2324335	501(C)(3)	569,249.				SEE PART IV
(10) SOUTHWEST MINNESOTA HOUSING PARTNERSHIP 2401 BROADWAY AVE, SLAYTON MN 56172	41-1721815	501(C)(3)	94,838.				SEE PART IV
(11) SOUTHWEST ORGANIZING PROJECT 2609 W 63RD ST, CHICAGO IL 60629	36-4090773	501(C)(3)	159,600.				SEE PART IV
(12) SPACE 4 ART INC 325 15TH ST, SAN DIEGO CA 92101	27-4003216	501(C)(3)	22,100.				SEE PART IV

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(1) SPANISH SPEAKING UNITY COUNCIL 1900 FRUITVALE AVE, OAKLAND CA 94601	94-1670490	501(C)(3)	20,000.				SEE PART IV
(2) SPOKANE HOUSING VENTURES 715 E. SPRAGUE AVE, SPOKANE WA 99202	91-1551154	501(C)(3)	30,000.				SEE PART IV
(3) ST. NICK'S ALLIANCE 2 KINGSLAND AVE, BROOKLYN NY 11211	51-0192170	501(C)(3)	26,500.				SEE PART IV
(4) STOP ABUSIVE FAMILY ENVIRONMENTS P.O. BOX 669, WELCH WV 24801	55-0647494	501(C)(3)	25,000.				SEE PART IV
(5) STOP WASTING ABANDONED PROPERTY INC 439 PINE ST, SUITE 1013 PROVIDENCE RI 02907	05-0370946	501(C)(3)	77,050.				SEE PART IV
(6) STOREFRONT FOR COMMUNITY DESIGN 205 E. BROAD ST, RICHMOND VA 23219	45-2644809	501(C)(3)	44,998.				SEE PART IV
(7) SUNS CORPORATION OF RICHMOND 1400 MECHANICSVILLE TPK, RICHMOND VA 23223	54-1921089	S CORP	15,000.				SEE PART IV
(8) SUNSHINE EARLY CHILD CARE CENTER 11 LAFRATE WAY, NORTH KINGSTOWN RI 02852	05-0446048	C CORP	60,000.				SEE PART IV
(9) SWEET WATER FOUNDATION P.O. BOX 43247, CHICAGO IL 60643	27-1391983	501(C)(3)	25,000.				SEE PART IV
(10) TAMAQUA AREA COMMUNITY PARTNER 114 WEST BROAD STREET, TAMAQUA PA 18252	23-2820326	501(C)(3)	49,000.				SEE PART IV
(11) TEAMWORK ENGLEWOOD 815 W 63RD ST, SUITE 1005 CHICAGO IL 60621	74-3102944	501(C)(3)	71,000.				SEE PART IV
(12) TEJANO CENTER FOR COMMUNITY CONCERNS 2950 BROADWAY, HOUSTON TX 77017	76-0377101	501(C)(3)	14,500.				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) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TENDERLOIN NEIGHBORHOOD DEVELOPMENT CORP. 201 EDDY ST, STE 270 SAN FRANCISCO CA 94102	94-2761808	501(C)(3)	74,073.				SEE PART IV
(2) THE ACADEMY FOR LITTLE CHILDREN INC 10 JAMES P. MURPHY HIGHWAY WARWICK RI 02893	05-0450703	S CORP	40,000.				SEE PART IV
(3) THE ARTS COMMISSION OF GREATER TOLEDO 1838 PARKWOOD AVENUE, TOLEDO OH 43604	34-1358701	501(C)(3)	25,000.				SEE PART IV
(4) THE BIG SANDBOX INC 1315 WALNUT STREET, PHILADELPHIA PA 19107	46-4273079	501(C)(3)	20,000.				SEE PART IV
(5) THE CARA PROGRAM 237 S. DESPLAINES, CHICAGO IL 60661	36-4268095	501(C)(3)	351,561.				SEE PART IV
(6) THE CENTER FOR NYC NEIGHBORHOODS 17 BATTERY PLACE SOUTH, NEW YORK NY 10004	83-0506416	501(C)(3)	30,000.				SEE PART IV
(7) THE CHILDREN'S MUSEUM OF INDIANAPOLIS 3000 N MERIDIAN ST, INDIANAPOLIS IN 46208	35-0867985	501(C)(3)	65,000.				SEE PART IV
(8) THE CHILDREN'S WORKSHOP INC 45 INDUSTRIAL RD, CUMBERLAND RI 02864	05-0451655	C CORP	223,216.				SEE PART IV
(9) THE COMMUNITY BUILDERS, INC. 95 BERKLEY STREET, BOSTON MA 02116	04-2324773	501(C)(3)	8,000.				SEE PART IV
(10) THE CRENULATED COMPANY, LTD. 1512 TOWNSEND AVE, BRONX NY 10452	14-1719016	501(C)(3)	206,000.				SEE PART IV
(11) THE DOWNTOWN SHAREHOLDERS OF KANSAS CITY 726 ARMSTRONG, KANSAS CITY MO 66101	41-2202699	501(C)(3)	125,322.				SEE PART IV
(12) THE ENTERPRISE CENTER CDC 4548 MARKET STREET, PHILADELPHIA PA 19139	30-0002632	501(C)(3)	55,000.				SEE PART IV

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Schedule I (Form 990) (2015)

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OMB No. 1545-0047

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Employer identification number

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(1) THE FOGARTY CENTER 220 WOONASQUATUCKET AV, PROVIDENCE RI 02911	05-0270834	501(C)(3)	20,000.				SEE PART IV
(2) THE GENESIS CENTER 620 POTTERS AVE, STE 2A PROVIDENCE RI 02907	22-3001721	501(C)(3)	55,759.				SEE PART IV
(3) THE GRADUATE CENTER CITY UNIV. OF NEW YORK 365 5TH AVENUE, NEW YORK NY 10016-4309	13-3893536	GOVERNMENT	30,000.				SEE PART IV
(4) THE HEALTHCARE CONNECTION INC 1401 STEFFEN AVENUE, CINCINNATI OH 45215	31-0822524	501(C)(3)	20,000.				SEE PART IV
(5) THE LASALLE FOUNDATION 1111 N.WELLS ST, SUTE 500W CHICAGO IL 60610	36-3511457	501(C)(3)	77,500.				SEE PART IV
(6) THE MARIPOSA CENTER 550 BRANCH AVENUE, PROVIDENCE RI 02904	11-3819923	501(C)(3)	21,000.				SEE PART IV
(7) THE NEIGHBORHOOD DEVELOPERS, INC. 4 GERRISH AVENUE, CHELSEA MA 02150	04-2660283	501(C)(3)	200,250.				SEE PART IV
(8) THE PROVIDENCE COMMUNITY HEALTH 375 ALLENS AVENUE, PROVIDENCE RI 02905-5010	05-0368134	501(C)(3)	25,000.				SEE PART IV
(9) THE PROVIDENCE PLAN 10 DAVOL SQR, STE 300 PROVIDENCE RI 02903	05-0467363	501(C)(3)	130,775.				SEE PART IV
(10) THE RESURRECTION PROJECT 1818 S. PAULINA AVE, CHICAGO IL 60608	36-3576073	501(C)(3)	102,100.				SEE PART IV
(11) THE RHODE ISLAND PUBLIC HEALTH FOUNDATION C/O BROWN UNIVERSITY, PROVIDENCE RI 02912	05-0474726	501(C)(3)	75,000.				SEE PART IV
(12) THE SCHOOL BOARD OF THE CITY OF RICHMOND 301 N NINTH STREET, RICHMOND VA 23219	54-1689909	GOVERNMENT	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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Schedule I (Form 990) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

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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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE STORK'S NEST CHILD ACADEMY 440 GEORGE WASHINGTON ,SMITHFIELD RI 02917	20-2262633	S CORP	54,760.				SEE PART IV
(2) THE SUPPORTIVE HOUSING NETWORK 247 WEST 37TH STREET, NEW YORK NY 10018	13-3755149	501(C)(3)	10,000.				SEE PART IV
(3) THE THRESHOLDS 4101 N. RAVENSWOOD AVE., CHICAGO IL 60613	36-2518901	501(C)(3)	15,000.				SEE PART IV
(4) THE VILLAGES COMMUNITY DVPMT. CORP. 8109 EAST JEFFERSON, DETROIT MI 48214	36-4598309	501(C)(3)	7,749.				SEE PART IV
(5) THOMAS-DALE DISTRICT & PLANNING COUNCIL 685 MINNEHAHA AVE., W, ST. PAUL MN 55104	41-0963444	501(C)(3)	28,000.				SEE PART IV
(6) TIERRA DEL SOL HOUSING CORP 880 ANTHONY DR., ST 3C & D ANTHONY NM 88021	85-0227016	501(C)(3)	54,000.				SEE PART IV
(7) TOLEDO BOTANICAL GARDEN BOARD INC 5403 ELMER DRIVE, TOLEDO OH 43615	34-1350559	501(C)(3)	16,000.				SEE PART IV
(8) TRANSITIONAL HOUSING CORP 5101 16TH ST NW, WASHINGTON DC 20011	52-1675958	501(C)(3)	27,500.				SEE PART IV
(9) TRI COUNTY HOUSING INC 34385 STATE HIGHWAY 167, FOWLER CO 81039	84-1296087	501(C)(3)	20,000.				SEE PART IV
(10) TRINITY RESTORATION INC 393 BROAD STREET , PROVIDENCE RI 02907	05-0502019	501(C)(3)	30,000.				SEE PART IV
(11) TRI-TOWN ECONOMIC OPPORTUNITY COMMITTEE 1126 HARTFORD AVENUE, JOHNSTON RI 02919	05-0309695	501(C)(3)	7,000.				SEE PART IV
(12) TUNICA COUNTY CDC POST OFFICE BOX 1402,STE 270 TUNICA MS 38676	64-0814239	501(C)(3)	30,100.				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) (2015)

**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

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.

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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) TWIN CITIES HOUSING DVLPMPT CORP 400 SELBY AVENUE, STE C, ST. PAUL MN 55102	36-3287080	501(C)(3)	15,000.				SEE PART IV
(2) TWIN CITIES HABITAT FOR HUMANITY 1954 UNIVERSITY AVE, ST. PAUL MN 55104-3433	36-3363171	501(C)(3)	50,000.				SEE PART IV
(3) UMPQUA COMMUNITY DEVELOPMENT CORP. 605 SOUTH E KANE ST., ROSEBURG OR 97470	93-1057208	501(C)(3)	128,700.				SEE PART IV
(4) UNIFIED VAILSBURG SERVICES 40-42 RICHELIEU TERRACE, NEWARK NJ 07106	23-7304852	501(C)(3)	35,000.				SEE PART IV
(5) UNITED METHODIST CHILDREN'S SERVICES OF WI 3940 W. LISBON, STE B MILWAUKEE WI 53208	39-1030611	501(C)(3)	74,355.				SEE PART IV
(6) UNITED NORTH CORPORATION 3106 LAGRANGE ST., TOLEDO OH 43608	20-8567856	501(C)(3)	149,880.				SEE PART IV
(7) UNITED STREETS NETWORKING & PLANNING 14901 E. WARREN, DETROIT MI 48224	38-2810323	501(C)(3)	35,250.				SEE PART IV
(8) UNITED WAY OF GREATER HOUSTON 50 WAUGH DR, HOUSTON TX 77007	74-1167964	501(C)(3)	110,000.				SEE PART IV
(9) UNITED WAY OF MASSACHUSETTS BA 51 SLEEPER STREET, BOSTON MA 02210	04-2382233	501(C)(3)	10,000.				SEE PART IV
(10) UNITED WAY OF THE BAY AREA 550 KEARNY ST, SAN FRANCISCO CA 94108	94-1312348	501(C)(3)	20,000.				SEE PART IV
(11) UNIVERSITY CITY DISTRICT 3940-42 CHESTNUT ST, PHILADELPHIA PA 19104	23-2913784	501(C)(3)	129,996.				SEE PART IV
(12) UNIVERSITY DISTRICT COMMUNITY DVLPMPT ASSOC 3242 MAIN STREET, BUFFALO NY 14214	16-1072548	C CORP	30,000.				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) (2015)

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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) UNIVERSITY OF INDIANAPOLIS 1400 EAST HANNA AVE, INDIANAPOLIS IN 46227	35-0868107	501(C)(3)	75,000.				SEE PART IV
(2) UPTOWN REINVESTMENT CORP INC 519 SOUTH SAGINAW ST, FLINT MI 48502	38-3493359	501(C)(3)	30,000.				SEE PART IV
(3) URBAN ECONOMIC DEVELOPMENT ASSN OF WI 2212 N.MARTIN L KING, MILWAUKEE WI 53212	39-1893799	501(C)(3)	25,000.				SEE PART IV
(4) URBAN EDGE HOUSING CORP 1542 COLUMBUS AVE, ROXBURY MA 02119-1026	22-2483475	501(C)(3)	10,250.				SEE PART IV
(5) URBAN HOMEWORKS 2015 EMERSON AVE N, MINNEAPOLIS MN 55411	41-1821520	501(C)(3)	60,000.				SEE PART IV
(6) URBAN LEAGUE OF ESSEX COUNTY 508 CENTRAL AVENUE, NEWARK NJ 07107	22-1554540	501(C)(3)	183,600.				SEE PART IV
(7) URBAN LEAGUE OF GREATER CINCINNATI 3458 READING ROAD, CINCINNATI OH 45229	31-0565428	501(C)(3)	125,102.				SEE PART IV
(8) URBAN NEIGHBORHOOD INITIATIVES 8300 LONGWORTH ST., DETROIT MI 48209	38-3417161	501(C)(3)	126,100.				SEE PART IV
(9) URBAN TILTH 31 MAINE AVENUE, RICHMOND CA 94804	20-4124161	501(C)(3)	15,000.				SEE PART IV
(10) VANGUARD COMMUNITY DEVELOPMENT CORP 2795 E GRAND BOULEVARD, DETROIT MI 48211	38-3201091	501(C)(3)	95,000.				SEE PART IV
(11) VIETNAM VETERANS OF SAN DIEGO 4141 PACIFIC HIGHWAY, SAN DIEGO CA 92110	95-3649525	501(C)(3)	40,000.				SEE PART IV
(12) VILLAGE OF THE ARTS AND HUMANITIES 2544 GERMANTOWN , PHILADELPHIA PA 19133	22-3045318	501(C)(3)	86,500.				SEE PART IV

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(1) VILLAGE OF VICKSBURG 126 N. KALAMAZOO AVE, VICKSBURG MI 49097	38-6004598	GOVERNMENT	10,000.				SEE PART IV
(2) VIRGINIA SUPPORTIVE HOUSING 1010 N. THOMPSON ST., RICHMOND VA 23226	54-1444564	501(C)(3)	46,000.				SEE PART IV
(3) VOLUNTEERS OF AMERICA ILLINOIS 47 W POLK STREET, STE 250-2 CHICAGO IL 6060	36-2723047	501(C)(3)	50,000.				SEE PART IV
(4) VOLUNTEERS OF AMERICA TEXAS 300 E. MIDWAY DRIVE, EULESS TX 76039	75-0827469	501(C)(3)	161,941.				SEE PART IV
(5) WAKE HEALTH SERVICES INC 1001 ROCK QUARRY ROAD , RALEIGH NC 27610	56-1004791	501(C)(3)	51,000.				SEE PART IV
(6) WALNUT HILLS REDEVELOPMENT FOUNDATION INC 730 EAST MCMILLAN AVE, CINCINNATI OH 45206	31-0921713	501(C)(3)	211,944.				SEE PART IV
(7) WAYNE METROPOLITAN COMMUNITY ACTION AGENCY 2121 BIDDLE AVE, WYANDOTTE MI 48192-4064	38-1976979	501(C)(3)	53,500.				SEE PART IV
(8) WEALTH WATCHERS INC. 1225 W. BEAVER ST, JACKSONVILLE FL 32204	01-0638984	501(C)(3)	13,520.				SEE PART IV
(9) WESLEY COMMUNITY CENTER INC. OF HOUSTON, TX 1410 LEE STREET, HOUSTON TX 77009	74-1132578	501(C)(3)	145,287.				SEE PART IV
(10) WEST ANGELES COMMUNITY DVLPMNT CORP 6028 CRENSHAW BLVD., LOS ANGELES CA 90043	95-4486925	501(C)(3)	35,000.				SEE PART IV
(11) WEST BANK BUSINESS ASSOC. 1420 WASHINGTON, MINNEAPOLIS MN 55418	41-1694119	501(C)(3)	28,000.				SEE PART IV
(12) WEST BROADWAY BUSINESS & AREA COALITION 1011 W. BROADWAY, MINNEAPOLIS MN 55411	41-1985423	501(C)(3)	57,400.				SEE PART IV

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(1) WEST END COMMUNITY CENTER 109 BUCKLIN STREET, PROVIDENCE RI 02907-258	51-0201816	501(C)(3)	10,000.				SEE PART IV
(2) WEST HARLEM GROUP ASSISTANCE 1652 AMSTERDAM AVE, NEW YORK NY 10031	23-7169558	501(C)(3)	116,800.				SEE PART IV
(3) WEST SIDE FEDERATION FOR SENIOR & SUPPORTIV 2345 BROADWAY, 2ND FL, NEW YORK NY 10024	13-2926433	501(C)(3)	45,000.				SEE PART IV
(4) WILSON COMMUNITY IMPROVEMENT 504 E. GREEN STREET, WILSON NC 27893-4176	56-1053307	501(C)(3)	72,000.				SEE PART IV
(5) WINDBER AREA SCHOOL DISTRICT 2301 GRAHAM AVENUE, WINDBER PA 15963	25-6003541	GOVERNMENT	200,000.				SEE PART IV
(6) WOMEN'S COMMUNITY REVITALIZATION PROJ 100 W. OXFORD, PHILADELPHIA PA 19122-3900	22-2840188	501(C)(3)	40,000.				SEE PART IV
(7) WOMEN'S EMPLOYMENT NETWORK 920 MAIN ST., STE. 100 KANSAS CITY MO 64105	43-1508734	501(C)(3)	30,000.				SEE PART IV
(8) WOMEN'S INSTITUTE FOR HSG AND ECON DVLPMT 15 COURT SQUARE, BOSTON MA 02108	04-2733078	501(C)(3)	49,697.				SEE PART IV
(9) WOODLAWN PUBLIC SAFETY ALLIANCE 6320 S. DORCHESTER AVENUE, CHICAGO IL 60637	46-2374359	501(C)(3)	25,000.				SEE PART IV
(10) WOONSOCKET NEIGHBORHOOD DEVELOPMENT CORP 719 FRONT STREET, WOONSOCKET RI 02895-5278	22-2907602	501(C)(3)	210,400.				SEE PART IV
(11) WSOS COMMUNITY ACTION COMMISSION 109 SOUTH FRONT STREET, FREMONT OH 43420	34-0975934	501(C)(3)	34,000.				SEE PART IV
(12) YEAR UP INC 40 FOUNTAIN ST., PROVIDENCE RI 02903-1830	04-3534407	501(C)(3)	21,721.				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) (2015)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2015

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) YMCA OF PAWTUCKET 660 ROOSEVELT AVENUE, PAWTUCKET RI 08260	05-0259114	501(C)(3)	7,331.				SEE PART IV
(2) YOUTH & FAMILY ENRICHMENT SVCES 1234 HYDE PARK AVE , HYDE PARK MA 02136	05-0588064	501(C)(3)	25,000.				SEE PART IV
(3) YOUTH POLICY INSTITUTE 634 S. SPRING ST., LOS ANGELES CA 90014	52-1278339	501(C)(3)	92,494.				SEE PART IV
(4) YWCA OF RHODE ISLAND 514 BLACKSTONE STREET, WOONSOCKET RI 02895	05-0310596	501(C)(3)	75,000.				SEE PART IV
(5) WAY TO GROW INC 1 FALCO STREET , NORTH PROVIDENCE RI 02911	05-0458150	S CORP	8,898.				SEE PART IV
(6) WEST ELMWOOD HOUSING DEVELOPMENT CORP. 224 DEXTER STREET, PROVIDENCE RI 02907	23-7138165	501(C)(3)	113,500.				SEE PART IV
(7) WESTBAY COMMUNITY ACTION 224 BUTTONWOODS AVENUE, WARWICK RI 02886	05-0311985	501(C)(3)	57,850.				SEE PART IV
(8) WESTERLY PUBLIC SCHOOLS 23 HIGHLAND AVENUE, WESTERLY RI 02891	05-6000576	GOVERNMENT	10,000.				SEE PART IV
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 527.

3 Enter total number of other organizations listed in the line 1 table 33.

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

Schedule I (Form 990) (2015)

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 AMERICORPS STIPENDS	198.	1,571,274.			
2 GRANTS	13.	26,730.			
3					
4					
5					
6					
7					

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 GRANTEES 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
1					
2					
3					
4					
5					
6					
7					

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

LISC PROVIDES PROJECT GRANTS TO COMMUNITY BASED ORGANIZATIONS THROUGHOUT THE COUNTRY TO SUPPORT THEIR EFFORTS TO TRANSFORM DISTRESSED NEIGHBORHOODS. LISC ISSUES GRANTS TO SUPPORT THE DEVELOPMENT OF AFFORDABLE HOMES AND APARTMENTS, COMMERCIAL, COMMUNITY AND EDUCATIONAL FACILITIES SPACE; AND THE CAPACITY BUILDING, OPERATIONS AND OTHER COMMUNITY DEVELOPMENT ACTIVITIES OF NON-PROFIT COMMUNITY BASED ORGANIZATIONS.

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					
2					
3					
4					
5					
6					
7					

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.

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

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2015

**Open to Public
Inspection**

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (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.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

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

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

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

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

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" 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		
3		
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) 2015

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1	MICHAEL RUBINGER PRESIDENT & CEO & DIRECTOR	(i)	524,760.	0.	6,438.	27,528.	23,733.	582,459.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
2	ANDRIANA ABARIOTES EXECUTIVE DIRECTOR	(i)	135,203.	0.	425.	15,016.	38,385.	189,029.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
3	REENA ABRAHAM VICE PRESIDENT	(i)	163,427.	0.	300.	14,688.	23,462.	201,877.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
4	MARYJO ALLEN SENIOR VICE PRESIDENT	(i)	198,981.	0.	6,180.	21,595.	15,770.	242,526.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
5	DENISE ALTAY SENIOR VICE PRESIDENT	(i)	190,626.	0.	60,492.	20,198.	19,352.	290,668.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
6	SUZANNE ANARDE VICE PRESIDENT	(i)	147,264.	0.	1,262.	15,463.	684.	164,673.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
7	ELISE BALBONI SENIOR VICE PRESIDENT	(i)	191,968.	0.	690.	20,572.	32,298.	245,528.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
8	GERALDINE BAUM SENIOR VICE PRESIDENT	(i)	213,799.	0.	1,980.	22,714.	11,811.	250,304.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
9	COURTNEY BRANKER ASSISTANT TREASURER	(i)	124,295.	0.	369.	13,404.	28,727.	166,795.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
10	JOHN CHRISTOPHER WALKER DIRECTOR OF RESEARCH	(i)	168,199.	0.	1,980.	18,338.	34,798.	223,315.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
11	JEANNE COLA EXECUTIVE DIRECTOR	(i)	141,496.	0.	436.	15,342.	34,279.	191,553.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
12	JOE DIFILIPPI SENIOR VICE PRESIDENT & CIO	(i)	211,693.	0.	1,980.	22,969.	26,062.	262,704.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
13	ANIKA GOSS-FOSTER VICE PRESIDENT (THRU 12/2015)	(i)	149,652.	0.	16,183.	17,782.	32,819.	216,436.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
14	MICHAEL HEARNE EXECUTIVE VP & CFO	(i)	276,362.	0.	690.	8,413.	2,244.	287,709.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
15	CELAYNE HILL VICE PRES & DEP GEN COUNSEL	(i)	144,083.	0.	1,279.	15,699.	15,638.	176,699.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.
16	JOSEPH HORIYE PROGRAM VICE PRESIDENT	(i)	145,405.	0.	450.	11,251.	4,282.	161,388.	0.
		(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 KEVIN JORDAN SENIOR VICE PRESIDENT	(i)	191,967.	0.	450.	20,572.	33,552.	246,541.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 MATTHEW JOSEPHS SENIOR VICE PRESIDENT	(i)	200,323.	5,000.	468.	21,792.	35,952.	263,535.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 MICHAEL LEVINE EXEC VP & GEN COUNSEL & SEC	(i)	274,426.	0.	2,018.	27,653.	14,946.	319,043.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4 LILY LIM SENIOR VICE PRES/CONTROLLER	(i)	192,618.	0.	690.	20,616.	29,043.	242,967.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 RICHARD MANSON PROGRAM VICE PRESIDENT	(i)	161,793.	0.	1,290.	17,478.	23,657.	204,218.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
6 BETH MARCUS SENIOR VICE PRESIDENT	(i)	185,508.	0.	690.	20,388.	37,764.	244,350.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
7 SAM MARKS EXECUTIVE DIRECTOR	(i)	169,865.	0.	300.	1,813.	34,440.	206,418.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 CONSTANCE MAX VP & CHIEF CREDIT OFFICER	(i)	159,831.	0.	690.	17,347.	33,728.	211,596.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 ORAMENTA NEWSOME PROGRAM VICE PRESIDENT	(i)	159,772.	0.	1,980.	17,395.	24,892.	204,039.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
10 DENISE NOTICE-SCOTT EXECUTIVE VP FOR PROGRAMS	(i)	278,399.	0.	1,290.	27,825.	11,503.	319,017.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
11 KENNETH PATRICK MAHER VICE PRESIDENT	(i)	153,757.	0.	450.	16,494.	12,603.	183,304.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
12 WILLIAM TAFT PROGRAM VICE PRESIDENT	(i)	149,239.	0.	690.	16,085.	32,298.	198,312.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
13 MICHAEL TANG VICE PRESIDENT	(i)	136,267.	0.	412.	14,646.	12,532.	163,857.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
14 CHRISTINA TRAVERS VICE PRESIDENT & TREASURER	(i)	132,565.	0.	242.	11,926.	13,303.	158,036.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
15 ROBERT VAN METER EXECUTIVE DIRECTOR	(i)	139,974.	0.	1,251.	15,144.	34,273.	190,642.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
16 CHARLES VLIK PROGRAM VICE PRESIDENT	(i)	160,109.	0.	1,980.	16,812.	684.	179,585.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 COLLETTE WILLIAMS ASSISTANT CONTROLLER	(i)	154,867.	0.	450.	16,771.	23,352.	195,440.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 KEVIN BOES SENIOR VICE PRESIDENT	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	242,360.	135,000.	300.	28,463.	25,982.	432,105.	0.
3 JOSEPH HAGAN SENIOR VICE PRESIDENT	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	358,560.	200,000.	1,980.	197,142.	22,282.	779,964.	0.
4 SUSANA VASQUEZ EXECUTIVE DIRECTOR	(i)	164,881.	0.	420.	17,944.	28,129.	211,374.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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 J, PART I, LINE 4A - SEVERANCE PAYMENTS

MARIANO DIAZ RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$22,396.

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

NATIONAL EQUITY FUND, INC., AN ENTITY RELATED TO LISC, AWARDS A LONGEVITY BONUS ACCRUED FOR AN ELIGIBLE EMPLOYEE. IN 2015, \$166,667 WAS ACCRUED FOR JOSEPH HAGAN.

SCHEDULE J, PART I, LINE 7 - NON-FIXED PAYMENT

AT THE DISCRETION OF THE BOARD OF DIRECTORS, MATTHEW JOSEPHS RECEIVED A BONUS OF \$5,000 BASED ON HIS PERFORMANCE ON CERTAIN SPECIAL PROJECTS.

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

2015

**Open to Public
Inspection**

Name of the organization

LOCAL INITIATIVES SUPPORT CORPORATION

Employer identification number

13-3030229

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

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

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

LISC IS BUILDING SUSTAINABLE COMMUNITIES BY ACHIEVING FIVE GOALS:

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

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

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

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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MARKETS SUPPORT COMPANY, LLC (NMSC), ALSO PROVIDES EQUITY FINANCING TO SUPPORT THE DEVELOPMENT OF AFFORDABLE HOUSING AND COMMERCIAL AND COMMUNITY SPACE THROUGHOUT THE COUNTRY AND TO CREATE JOBS. IN 2015, NEF AND NMSC APPROVED EQUITY INVESTMENTS FOR 11,072 AFFORDABLE HOUSING UNITS AND 498,813 SQUARE FEET OF COMMERCIAL AND COMMUNITY SPACE.

FORM 990, PART III, LINE 4C - LENDING

IN 2015, LISC APPROVED \$211,291,926 TO FINANCE 15,156 UNITS OF AFFORDABLE HOMES AND APARTMENTS, 3,079,127 SQUARE FEET OF COMMERCIAL, OFFICE, INDUSTRIAL, RECREATIONAL, AND OTHER COMMUNITY SPACE, SCHOOLS, AND CHILD CARE FACILITIES, GROCERY STORES AND FOOD MARKETS.

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

THE ORGANIZATION'S FORM 990 IS INITIALLY PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY THE ORGANIZATION'S FINANCE DEPARTMENT. THE FINANCE DEPARTMENT AND LEGAL DEPARTMENT THEN REVIEW AND PROVIDE COMMENTS ON THE RETURN AS DRAFTED BY THE ACCOUNTING FIRM. THE ORGANIZATION'S 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

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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 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 SECRETARY COLLECTS ANNUALLY FROM EACH LISC DIRECTOR, OFFICER, AND KEY EMPLOYEE A CONFLICT OF INTEREST QUESTIONNAIRE, WHICH REQUIRES EACH PERSON 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 REQUIRED TO SUBMIT TO THE LISC SECRETARY ANY CHANGES IN SUCH AFFILIATIONS AS THEY ARISE. PURSUANT TO THE 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

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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DISCUSSION AND VOTE ON SUCH MATTER AND IS REQUIRED TO LEAVE THE MEETING DURING DISCUSSION OF SUCH MATTER. THE LISC GENERAL COUNSEL AND SECRETARY MONITOR ANY POTENTIAL BOARD CONFLICT OF INTEREST WITH MATTERS BROUGHT BEFORE THE BOARD OR A BOARD COMMITTEE AND BOARD MEMBERS' COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SEC B, LINE 15 - PROCESS FOR DETERMINING COMPENSATION THE ANNUAL PERFORMANCE OF THE PRESIDENT AND CEO OF LISC, THE TOP MANAGEMENT OFFICIAL, IS REVIEWED IN EXECUTIVE SESSION BY THE LISC BOARD OF DIRECTORS, WHICH IS COMPRISED OF INDEPENDENT PERSONS (WITH THE EXCEPTION OF THE PRESIDENT AND CEO, WHO DOES NOT VOTE ON HIS OR OTHER OFFICER COMPENSATION). AN ANNUAL INTERNAL PERFORMANCE REVIEW FOR ALL OTHER LISC OFFICERS IS CONDUCTED BY EACH OFFICER'S RESPECTIVE DIRECT SUPERVISOR.

BASED ON THE REVIEW OF THE PRESIDENT AND CEO BY THE BOARD OF DIRECTORS, AND THE INTERNAL REVIEWS FOR ALL OTHER OFFICERS BY THEIR RESPECTIVE SUPERVISORS, THE PRESIDENT AND CEO AND THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES PRESENT COMPENSATION RECOMMENDATIONS FOR THE PRESIDENT AND CEO AND EACH OTHER LISC OFFICER TO THE LISC BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. THE OFFICERS' COMPENSATION IS REVIEWED IN EXECUTIVE SESSION OF THE BOARD OF DIRECTORS, AND NO OFFICERS, OTHER THAN THE PRESIDENT AND CEO AND THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES, ARE PRESENT DURING SUCH EXECUTIVE SESSION. THE PRESIDENT AND CEO AND THE SENIOR VICE PRESIDENT OF HUMAN RESOURCES ARE NOT PRESENT DURING THE REVIEW OF THEIR RESPECTIVE COMPENSATION. THE DISCUSSIONS OF, AND DECISIONS REGARDING, OFFICERS'

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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COMPENSATION ARE DOCUMENTED IN THE MINUTES OF THE MEETINGS OF THE BOARD OF DIRECTORS AT WHICH SUCH REVIEW IS CONDUCTED.

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

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

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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FORM 990, PART VI, SECTION B, LINE 16B - JOINT VENTURES

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

THE NMTC PROGRAM IS DESIGNED TO PROVIDE INVESTORS, SUCH AS BANKS, INSURANCE COMPANIES, INVESTMENT FUNDS, CORPORATIONS, AND INDIVIDUALS, WITH CREDITS AGAINST FEDERAL INCOME TAX IN RETURN FOR NEW INVESTMENTS MADE IN ELIGIBLE BUSINESSES AND COMMERCIAL PROJECTS IN LOW-INCOME AREAS. UNDER THE NMTC PROGRAM, INVESTMENTS IN LOW-INCOME AREAS ARE MADE THROUGH COMMUNITY DEVELOPMENT ENTITIES (CDES). NMSC SERVES AS THE MANAGING MEMBER IN CERTAIN CDES.

FORM 990, PART VI, SECTION C, LINE 19 - DISCLOSURE

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, FINANCIAL STATEMENTS, FORM 990, AND FORM 990-T AVAILABLE TO THE PUBLIC UPON REQUEST. ALSO, THE FEDERAL FORM 990, WHICH INCLUDES FINANCIAL AND OTHER DISCLOSURES IS AVAILABLE ON THE ORGANIZATION'S WEBSITE.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AK, CA, CT,

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

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

VA, WI,

Name of the organization LOCAL INITIATIVES SUPPORT CORPORATION	Employer identification number 13-3030229
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ATTACHMENT 2

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
CORPORATE F.A.C.T.S. 51248 PLYMOUTH VALLEY DRIVE PLYMOUTH, MI 48170	NEIGH DEV ASST/MGMT	544,450.
MERCY PORTFOLIO SERVICES 120 S. LASALLE STREET, #1850 CHICAGO, IL 60603	HSG/RES DATA MGMT	515,554.
NEIGHBORHOOD HOUSING SERVICES OF CHICAGO 1279 N. MILWAUKEE AVENUE CHICAGO, IL 60622	HSG/BUYER COORD/FACI	419,150.
KPMG LLP 345 PARK AVENUE NEW YORK, NY 10154	AUDIT & TAX SERVICE	399,240.
LOGAN SQUARE NEIGHBORHOOD ASSOC. 2840 N. MILWAUKEE AVENUE CHICAGO, IL 60618	CHILD HEAL. OUTREACH	247,196.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2015

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**

▶ **Attach to Form 990.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

LOCAL INITIATIVES SUPPORT CORPORATION

13-3030229

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) NEW MARKETS SUPPORT COMPANY, LLC 13-4251148 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	NMTC INVTS	IL	7,770,181.	8,340,549.	LISC
(2) LISC LOUISIANA LOAN FUND, LLC 20-8539633 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	FINANCING	NY	97,942.	1,941,485.	LISC
(3) NEIGHBORHOOD PROPERTIES, LLC 26-3674004 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	ASSET MGMT.	NY	72,562.	1,732,354.	LISC
(4) LISC COOK COUNTY HOUSING PRESERV., LLC 26-3479816 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	FINANCING	NY	146,058.	7,374.	LISC
(5) NEIGHBORHOOD REVITALIZATION NYC LLC 46-1901030 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	MOLD TREATMEN	NY	5,406,741.	0.	LISC
(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 13-3690780 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	CMTY DEVELOP	NY	501(C)(3)	9	LISC	X	
(2) NEF COMMUNITY INVESTMENTS, INC. 36-4229337 10 S. RIVERSIDE PLAZA, SUITE 1 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	501(C)(4)	N/A	NEF, INC.	X	
(3) LOCAL INITIATIVES MANAGED ASSET CORP. 11-2848981 501 SEVENTH AVENUE, 7TH FLOOR NEW YORK, NY 10018	LOWINCOMEHOUS	NY	501(C)(3)	9	LISC	X	
(4) NEW YORK EQUITY FUND, INC. 36-4041986 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	501(C)(4)	N/A	NEF, INC.	X	
(5) NATIONAL EQUITY FUND, INC. 36-3490231 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	501(C)(4)	N/A	LISC	X	
(6) OREGON CORP FOR AFFORDABLE HOUSING 93-1113844 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	OR	501(C)(3)	9	NEF, INC.	X	
(7)							

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

Schedule R (Form 990) 2015

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) 335 GREENACRE ROAD LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(2) ALSTON LAKE LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(3) BANK OF AMERICA CHIF II LLC 20 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(4) BANK OF AMERICA CHIF III LP 20 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(5) BANK OF AMERICA CHIF IV LP 26- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(6) BANK OF AMERICA CHIF V LP 26-3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) BANK OF AMERICA CHIF VI LP 27- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	BOACHIF FUNDMGR	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) COMMUNITY DEVELOPMENT ADVOCATES CENTRAL 26-1793642 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(2) COMMUNITY DEVELOPMENT ADVOCATES EAST INC 26-0807410 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(3) COMMUNITY DEVELOPMENT ADVOCATES TCG INC 27-2082864 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(4) COMMUNITY DEVELOPMENT ADVOCATES MIDWEST 26-0807338 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(5) COMMUNITY DEVELOPMENT ADVOCATES SOUTH IN 26-0807437 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(6) COMMUNITY DEVELOPMENT ADVOCATES WEST INC 26-0807380 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(7) NEF ASSIGNMENT CORPORATION 36-4326848 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) BANK OF AMERICA CHIF VII LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	BOACHIF FUNDMGR	N/A				X			X	
(2) BELLE HAVEN LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	MN	CDA INC	N/A				X			X	
(3) CALIFORNIA EQUITY FUND 1995 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	CA	NEF INC	N/A				X			X	
(4) CALIFORNIA EQUITY FUND 1996 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	CA	NEF INC	N/A				X			X	
(5) CALIFORNIA EQUITY FUND 1997 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	CA	NEF INC	N/A				X			X	
(6) CALIFORNIA EQUITY FUND 1998 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	CA	NEF INC	N/A				X			X	
(7) CALIFORNIA EQUITY FUND 1999 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	CA	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) NEF COMMUNITY CAPITAL INC. 36-4222908 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(2) NEF MORTGAGE CORPORATION 83-0337773 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(3) NEF SUPPORT CORPORATION 36-4326845 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(4) COMMUNITY DEVELOPMENT ADVOCATES, INC. 36-4009754 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOW-INCOME HO	IL	NEF, INC.	C CORP					
(5) COMMUNITY DEVELP. ADVOCATES DALE INC 45-2281616 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	MN	N/A	C CORP					
(6) COMMUNITY DEVELOPMENT ADVOCATES - CHI IN 27-2442712 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	N/A	C CORP					
(7) COMMUNITY DEVELOPMENT ADVOCATES - SNAP, 30-0795331 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	GA	N/A	C CORP					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CALIFORNIA EQUITY FUND 2000 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) CALIFORNIA EQUITY FUND 2002 LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) CALIFORNIA EQUITY FUND 2003 LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(4) CALIFORNIA EQUITY FUND 2004 LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(5) CALIFORNIA EQUITY FUND 2013 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) CASA PUEBLA INVESTORS LLC 36-4 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) CDC TAX CREDIT III 36-4235882 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF COMM. CAP	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) COMMUNITY DEVELOPMENT ADVOCATES DC, IN 61-1732817 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	IL	N/A	C CORP					
(2) COMMUNITY DEVELOPMENT ADVOCATES MELROSE, 36-4793220 10 S RIVERSIDE PLAZA STE 1700 CHICAGO, IL 60606	LOWINCOMEHOUS	LA	N/A	C CORP					
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CHICAGO EQUITY FUND 1995 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) CHICAGO EQUITY FUND 1996 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) CHICAGO EQUITY FUND 1997 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) CHICAGO EQUITY FUND 1998 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) CHICAGO EQUITY FUND 2000 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) CHICAGO EQUITY FUND 2001 LP 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) CHICAGO EQUITY FUND 2002 LP 30 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
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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) CHICAGO EQUITY FUND 2003 LP 30 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) CHICAGO EQUITY FUND 2004 LP 32 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) CITIGROUP CCDE INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(4) COVINGTON INVESTMENT FUND LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) CRESCENT COMMUNITY INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) DEBORAH'S PLACE III INVESTORS 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) FIFTH THIRD INVESTMENT FUND LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) FIRST CHICAGO LEASING IF LLC 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) FNBC LEASING INVESTMENT FUND L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) FOUR EIGHTY-ONE HSG INVEST FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) FOUR EIGHTY-ONE HSG INVEST FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) FOUR EIGHTY-ONE HSG INVEST FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) GLENVILLE HOMES III LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OH	CDA EAST INC	N/A				X			X	
(7) GS-NYEF 2009 27-1086070 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
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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) HARBOR VIEW PHASE I 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	CDA TCG INC	N/A				X			X	
(2) HILLCREST COMMONS LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	CDA TCG INC	N/A				X			X	
(3) HOMESTEAD EQUITY FND III PROPR 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(4) HOMESTEAD EQUITY FUND A-OREGON 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(5) HOMESTEAD EQUITY FUND A-WASHIN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(6) HOMESTEAD EQUITY FUND B-OREGON 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(7) HOMESTEAD EQUITY FUND II LP 93 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
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(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) HOMESTEAD EQUITY FUND III LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(2) HOMESTEAD EQUITY FUND IV LP 72 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(3) HOMESTEAD EQUITY FUND LP 93-12 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(4) HOMESTEAD EQUITY FUND V LP 20- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(5) HOMESTEAD EQUITY FUND VI LP 20 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(6) HOMESTEAD EQUITY FUND VII LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(7) HOMESTEAD EQUITY FUND VIII LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
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(6)									
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Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) HOMESTEAD EQUITY FUND X LIMITE 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) HOMESTEAD EQUITY FUND XI LIMIT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) HOMESTEAD NORTHERN CALIFORNIA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(4) HOMESTEAD PRESERVATION LLC 27- 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	OREGON AFF HSG	N/A				X			X	
(5) HOMESTEAD WESTERN COMMUNITIES 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(6) HORIZON VILLAGE ONE, LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	CDA TCG INC	N/A				X			X	
(7) IMANI NEIGHBORHOOD REVITALIZAT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	VA	CDA SOUTH INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
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(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	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) KEY CDC INVESTMENT FUND LLC 95 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) KEY USA INVESTMENT FUND LLC 95 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(4) MAURY SENIOR RETIREMENT 54-198 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	VA	CDA CENTRAL INC	N/A				X			X	
(5) METLIFE INVESTMENT FUND LLC 36 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(6) MLI INVESTMENT FUND II LP 26-2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) MOUNTAIN VIEW TERRACE APTS 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	AZ	CDA SOUTH INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
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(6)									
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Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) MS SHARED INVESTMENT FUND I LL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) MS SINGLE INVESTOR FUND I LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	MS FUND MGR LLC	N/A				X			X	
(3) MS SINGLE INVESTOR FUND II LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MGR LLC	N/A				X			X	
(4) NAHIF XVII - NEF LLC 90-606144 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(5) NAHIF XX - NEF LLC 20-1651241 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) NAT'L AFFORDABLE HSG INV I LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NAT'L AFFORDABLE HSG INV XIV 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
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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 CITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) NATIONAL EQUITY FUND 1993 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) NATIONAL EQUITY FUND 1994 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(4) NATIONAL EQUITY FUND 1995 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(5) NATIONAL EQUITY FUND 1995 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(6) NATIONAL EQUITY FUND 1996 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(7) NATIONAL EQUITY FUND 1996 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
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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 1997 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) NATIONAL EQUITY FUND 1997 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) NATIONAL EQUITY FUND 1999 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(4) NATIONAL EQUITY FUND 1999 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(5) NATIONAL EQUITY FUND 2000 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(6) NATIONAL EQUITY FUND 2001 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(7) NATIONAL EQUITY FUND 2002 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
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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 2003 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) NATIONAL EQUITY FUND 2004 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) NATIONAL EQUITY FUND 2005 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NATIONAL EQUITY FUND 2006 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(5) NATIONAL EQUITY FUND 2006 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(6) NATIONAL EQUITY FUND 2007 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NATIONAL EQUITY FUND 2007 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
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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 2008 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) NATIONAL EQUITY FUND 2008 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) NATIONAL EQUITY FUND 2009 LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF 2009 LLC	N/A				X			X	
(4) NEF 2011 INV FUND LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2011FUNDMGR	N/A				X			X	
(5) NATIONAL EQUITY FUND 2011 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2011 LLC	N/A				X			X	
(6) NATIONAL EQUITY FUND 2012 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2012FUNDMGR	N/A				X			X	
(7) NATIONAL EQUITY FUND 2013 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2013FUNDMGR	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEF AFFORD HOUS INVST FUND LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) NEF AFFORD HOUS INVSTFUND II L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) NEFAFFORDHOUS INVSTFUND III LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NEF CAPITAL ONE INVESTMENT FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(6) NEF ENCANTOPOINTE MID-TIER FD 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFENCANTOPTMGR	N/A				X			X	
(7) NEF FIRSTNIAGARAINVEST FD LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEF HEARTLAND FUND LLC 20-0083 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(2) NEF INVESTMENT PARTNERS FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) NEF INVESTMENT PARTNERS FD II 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) NEF INVESTMENTPARTNERS FD III 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF INVESTMENT PARTNERS FUND I 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) NEF NATIONAL COMM INV FUND II 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NEF NEIGHBORHOOD REVITALIATION 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEF NEIGHBORHOOD REVITALIZ. FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NN REVFUNDIIMGR	N/A				X			X	
(2) NEF NEW YORK SPECIAL TAX CREDI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) NEFORCHARDWESTCHASEMID-TIERFD 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFORCHARDWCMGR	N/A				X			X	
(4) NEF RBS CITIZENS INVEST FUND I 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) NEF REGIONAL FUND I - CHICAGO 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) NEW YORK EQUITY FUND 1988 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(7) NEW YORK EQUITY FUND 1989 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW YORK EQUITY FUND 1990 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(2) NEW YORK EQUITY FUND 1992 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(3) NEW YORK EQUITY FUND 1993 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(4) NEW YORK EQUITY FUND 1994 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(5) NEW YORK EQUITY FUND 1995 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(6) NEW YORK EQUITY FUND 1995 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	
(7) NEW YORK EQUITY FUND 2000 LP 3 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW YORK EQUITY FUND 2000 SERI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	NYEF INC	N/A				X			X	
(2) NEW YORK EQUITY FUND 2001 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(3) NEW YORK EQUITY FUND 2002 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(4) NEW YORK EQUITY FUND 2003 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(5) NEW YORK EQUITY FUND 2004 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(6) NEW YORK EQUITY FUND 2005 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(7) NEW YORK EQUITY FUND 2006 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
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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 2008 LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NYEF INC	N/A				X			X	
(2) NEWARK COMMUNITY INVESTMENT FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(3) NORTHERNCALIFORNIA INVESTFD LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) ONE ECONOMY FUND I LLC 20-2660 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(5) OREGON EQUITY FUND II LP 93-11 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(6) OREGON EQUITY FUND III LP 93-1 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	
(7) OREGON EQUITY FUND IV LP 93-12 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	OR	OREGON AFF HSG	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
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(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) PRESERVATION LLC 20-5160740 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) PROGRESSIVE FREMONT, LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA SOUTH INC	N/A				X			X	
(3) RELIANCE-LASALLE ASSOCIATES, L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	LA	CDA SOUTH INC	N/A				X			X	
(4) SOUTH LOOP INVESTORS LP 36-424 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) ST. JOHNS AVENUE ONE, LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(6) STANDARD FUND I LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) STATE FARM GOOD NEIGHBOR FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) TD BANKNORTH HOUSING INVESTMEN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) THE LA QUINTA EQUITY FUND LP 2 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) TIPSON ROAD APARTMENTS, LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	SC	CDA TCG INC	N/A				X			X	
(4) UNIVERSITY DALE APARTMENTS LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	MN	CDA DALE, INC	N/A				X			X	
(5) US AFFORDABLE HOUSING CIF II L 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(6) US AFFORDABLE HOUSING CIF LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	
(7) WASHINGTON MUTUAL CIF LLC 36-4 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
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(5)									
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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) WFCIH INVESTMENT FUND I LLC 27 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(2) WFCIH INVESTMENT FUND II LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(3) WINTRUST COMMUNITY INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(4) CHAPIN HOUSING LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DC	CDA DC, INC.	N/A				X			X	
(5) EUCLID HOUSING LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DC	CDA DC, INC.	N/A				X			X	
(6) CALIFORNIA EQUITY FUND 2014 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) NATIONAL EQUITY FUND 2014 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2014 FUND M	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
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(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEF INVESTMENT PARTNERS FUND V 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) NEF NATIONAL COMMUNITY INV FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) NEF REG'L FUND II - FLORIDA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(4) NEF REG'L FUND IV - NORTHEA 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2014 REGION	N/A				X			X	
(5) NEF REG'L FUND V - CHICAGO 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2014 REGION	N/A				X			X	
(6) MS SINGLE INVESTOR FD III LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	MS FUND MGR LLC	N/A				X			X	
(7) BANK OF AMERICA CHIF VIII LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	BOACHIF FUND MA	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) CATHAY SHARED INVEST FUND LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) NEF COMPASS SHARED INVEST I LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(3) NYC DISTRESSED MULTIFAMILY HSG 10 S RIVERSIDE PLAZA STE 1700	LOW&MOD INC HSG	DE	NYC DMH LLC	N/A				X			X	
(4) CALIFORNIA EQUITY FUND 2015 LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(5) FOUR EIGHTY-ONE HSG INVEST FUN 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) HOMESTEAD EQUITY FUND XII LIMI 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(7) NEF COMMUNITY INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF INC	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEF INVESTMENT PARTNERS FUND V 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) NEF KEY SHARED INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF KEY FUND MA	N/A				X			X	
(3) NEF PRESERVATION FUND I LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEF PRESERVATIO	N/A				X			X	
(4) NEF REGIONAL FUND VII - CHICAG 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEF 2015 REGION	N/A				X			X	
(5) NEF STCC AFFORDABLE HOUSING FU 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(6) NEF WEBSTER LIHTC FUND I LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	DE	NEFCI	N/A				X			X	
(7) NORTHERN CALIFORNIA INVESTMENT 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) WFCIH INVESTMENT FUND III LP 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	IL	NEFCI	N/A				X			X	
(2) MELROSE EAST II, LLC 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	LA	CDA MELROSE INC	N/A				X			X	
(3) CHASE NMTC WINTERS BUILDING, L 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) CORAL NEW HAVEN ASSOCIATES II 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	CT	N/A	N/A				X			X	
(5) EAST HARLEM ABYSSINIAN TRIANGL 10 S RIVERSIDE PLAZA STE 1700	LOWINCOMEHOUS	NY	N/A	N/A				X			X	
(6) LISC/BOA NM 40 INVESTMENT FUND 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 37, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 38, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 39, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 40, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 44, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 53, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 54, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 55, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 56, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 57, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 58, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 59, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 60, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 61, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 62, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 63, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 64, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 65, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 66, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 67, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 68, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 69, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 70, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 71, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 72, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 73, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 74, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 75, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 76, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 77, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 78, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 79, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 80, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 81, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 82, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 83, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 84, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 85, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 86, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 87, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 88, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 89, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 90, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
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Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 91, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 92, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 93, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT 94, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT 95, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT 96, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT 97, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT 98, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT 99, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT 100, LL 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT III, LL 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT IX, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT XIII, L 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT XIV, LL 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT XVI, LL 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT XVII, L 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NEW MARKETS INVESTMENT XVIII, 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NEW MARKETS INVESTMENT XX, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) NEW MARKETS INVESTMENT XXII, L 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6) NEW MARKETS INVESTMENT XXIX, L 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(7) NEW MARKETS INVESTMENT XXV, LL 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) NEW MARKETS INVESTMENT XXXI, L 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(2) NEW MARKETS INVESTMENT XXXIV, 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(3) NM 44 PYRAMID INVESTMENT FUND, 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(4) NMI XVI INVESTMENT FUND, LLC 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(5) TANGERINE PLAZA INVESTMENT FUN 10 S RIVERSIDE PLAZA STE 1700	COMMUNITY DEV	DE	N/A	N/A				X			X	
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

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

	Yes	No
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	C	7,421,000.	BOOK VALUE
(2) NATIONAL EQUITY FUND	D	20,000,000.	BOOK VALUE
(3) NATIONAL EQUITY FUND	L	675,000.	BOOK VALUE
(4) NATIONAL EQUITY FUND	O	114,293.	BOOK VALUE
(5) NATIONAL EQUITY FUND	P	303,796.	BOOK VALUE
(6) NATIONAL EQUITY FUND	Q	96,518.	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 sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

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