#### 60036

Form:

Department of the Treasury Internal Revenue Service

# PUBLIC COPY Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 2010 Open to Public Inspection

<u> </u>	For the 2010 ca	lendar year, or tax year beginning U//	U1/1U , and ending U6/3U	/ 1 1	i	
В	Check if applicable:	C Name of organization			D Emplo	yer identification number
	Address change	NeighborIm	pact	* *************************************	]	
	Name change	Doing Business As			93-	0884929
	•	Number and street (or P.O. box if mail is not de	elivered to street address)	Room/suite	E Teleph	one number
Ш	Initial return	2303 SW 1st St	•			-548-2380
	Terminated	City or town, state or country, and ZIP + 4	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
		Redmond	OR 97756		G Gross rece	ipts\$ 15,950,638
	Amended return		010 37730	····	G Gloss leve	
	Application pending	F Name and address of principal officer:		H(a) Is this a g	group return for a	affiliates? Yes X No
		Sharon Miller		H(b) Are all a	affiliatos inclu	ded? Yes No
		2303 SW 1st St	00 0775	1 ''		st. (see instructions)
		Redmond	OR 97756		io, allaona ii	ac (ace manuchona)
<u></u>	Tax-exempt statu		insert no.) 4947(a)(1) or 527			
<u>J</u>	Website: ► V	www.neighborimpact.org	<u> </u>	H(c) Group e		
K	Form of organization	: X Corporation Trust Association	Other >	L Year of formation: 1	.985	M State of legal domicile: OR
F	Part I Si	ummary				
	T	escribe the organization's mission or most s	ignificant activities:			
-	200	Cahadala A				
20						• • • • • • • • • • • • • • • • • • • •
E	,					
Governance		nis box ▶ if the organization discontinue	at its apprehing or disposed of more th	on 25% of its pot as	eofe	
င္ပိ	2 Check tr					15
•ಶ	3 Number	of voting members of the governing body (F				15
Activities		of independent voting members of the gove				
≅	5 Total nur	mber of individuals employed in calendar ye	ear 2010 (Part V, line 2a)			264
支		mber of volunteers (estimate if necessary)				285
•	7a Total un	related business revenue from Part VIII, col	umn (C), line 12		7a	
	b Net unre	lated business taxable income from Form 9	90-T, line 34		7b	<u> </u>
				Prior Ye		Current Year
ø	8 Contribu	tions and grants (Part VIII, line 1h)		14,96		15,353,855
Revenue	9 Program	service revenue (Part VIII, line 2g)			1,001	279,237
Š	10 Investme	ent income (Part VIII, column (A), lines 3, 4,		2	4,885	33,973
ž		venue (Part VIII, column (A), lines 5, 6d, 8c		1 17	7,947	283,573
	L .	venue – add lines 8 through 11 (must equal	***************************************	1 7 7 4 7	8,639	15,950,638
_		and similar amounts paid (Part IX, column (A			6 <b>,</b> 157	6,327,680
	i	paid to or for members (Part IX, column (A)	***************************************		-,	
	AE Calarias			5.71	4,867	5,540,772
es	15 Salaries	, other compensation, employee benefits (P			1,007	5/510/712
sesued	16a Professi	onal fundraising fees (Part IX, column (A), li		- •		
	1	ndraising expenses (Part IX, column (D), line	* *************************************		0 440	2 424 574
ij	17 Outer cx	penses (Part IX, column (A), lines 11a–11d		25 01	9,442	2,434,574
	18 Total ex	penses. Add lines 13–17 (must equal Part D	X, column (A), line 25)		0,466	14,303,026
		e less expenses. Subtract line 18 from line 1	12		8,173	1,647,612
5	8			Beginning of Cu		End of Year
386	20 Total as	sets (Part X, line 16)			2,732	8,780,409
Net Assets or	21 Total lial	bilities (Part X, line 26)			1,051	1,071,139
ž	22 Net asse	ets or fund balances. Subtract line 21 from I	ine 20	5,54	1,681	7,709,270
I	Part II S	ignature Block				
_ ι	Inder penalties of	perjury, I declare that I have examined this return,	including accompanying schedules and stater	nents, and to the best o	of my knowled	lge and belief, it is
tı	rue, correct, and c	omplete. Declaration of preparer (other than officer	r) is based on all information of which prepare	r has any knowledge.		
Si	gn 🔽	Signature of officer PURLIC COPY			Date	114
	еге	Sharon Miller	Exe	ecutive Di	rector	•
110		Type or print name and title				
			Preparer's signature	Date	Check	if PTIN
D۵	: al	ype preparer's name	Preparer's signature	Date		
Pa	DOI:U	Hummel C Doth	D C			nployed P00991199
	eparer Firm's		F.C.		Firm's EIN	93-0819646
US	e Only	P.O. Box 10086	4.4.0			E41 COT 0000
			440		Phone no.	<u>541-687-2320</u>
		ss this return with the preparer shown above				Yes No
		eduction Act Notice, see the separate inst	tructions.			Form <b>990</b> (2010)
DA	A			PHRIC	And the same of	

Part III		m Service Accomplishments contains a response to any c	uestion in this Part III	<u>X</u>
	scribe the organization's mi	ssion:		<del></del>
A D:J1L		in East and a single during the	wear which were not listed on the	0
prior For	n 990 or 990-EZ?		year which were not listed on the	$igcup {Yes} \ oxed{{X}}$ No
•	describe these new services		. 16	
3 Did the o	-	ng, or make significant changes in how	vit conducts, any program	$oxed{oxed}$ Yes $oxed{oxed{X}}$ No
	describe these changes on		thus a last of a same and its this own and a	Continu
			three largest program services by expenses. ruired to report the amount of grants and alloo	
		nue, if any, for each program service re		
				· · · · · · · · · · · · · · · · · · ·
4a (Code:	) (Expenses \$	3,920,429 including gran	its of \$ $23,811$ ) (Revenue	ue \$ 4,330,786)
Early	Care and Educ	ation Programs:	l mandinger and solf	.,
The He	ad Start Prog	ram promotes school	l readiness and self- ducation, parent	
involv	rement. family	support, health se		
servi	es and nutrit	ious meals for prin	marily low-income	
famili	es and childr	en with disabilitie	es or other special	
necus.	CILLIA CALC	Megonifices Beries be	LICITED, PIOVIGCIO GIIG.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
employ	vers with info	rmation and referra	al services.	
• • • • • • • • • • • • • • • • • • • •				
4b (Code:	) (Expenses \$	7,122,410 including grar	nts of \$ 5,553,060 ) (Reveni	ue \$ 8,230,708)
Emerge	ency Services	and Food Programs:		
			utes food to a network	
partņe	er agencies in	Crook, Deschutes	and Jefferson Counties	. These groups
are 11	ndependent non	-prolits and/or chi	urches that include em n bag programs, shelte	rs childcare
and se	nior programs	Emergency Services	ces provide emergency	rental
assist	ance, crisis	and winter energy	assistance. Homeless	clients are
assist	ed through th	e family shelter,	assistance. Homeless transitional housing,	as well as
inform	nation and ref	erral for individua	als and families to ot	her services.
. ,				
An (Code:	\/Evpanses \$	2 - 250 - 252 including gray	nts of \$ 1,081,660 ) (Reven	ne.s. 2.310.228.)
Housi	ng Center Prog	rams:		•• • /
Weath	rization is a	year-round program	m that makes improveme	nts to homes to
reduce	e enerav loss	for clients at or I	below 60% of the state	area median
income	. Improvemen	ts may include ins	ulation, heating syste	ms and air
seali	ng. There is	a nome evaluation plant on	process to determine wown their home. Home	nat items will
Servi	res offer a va	riety of programs	including foreclosure	prevention
classe	es and counsel	ing, first time hor	meownership classes an	d counseling,
downpa	avment assista	nce loans, reverse	mortgage counseling,	financial
litera	acy classes an	d counseling, home	owner rehabilitation	loans, and a
matche	ed saving prog	ram (IDA).		
4d Other pr	ogram services. (Describe i	n Schedule O.)	distribution of the second of	,
(Expens		including grants of \$	) (Revenue \$	)
	ogram service expenses			
DAA			•	Form <b>990</b> (2010)

. Ya	The Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_	v	
	complete Schedule A	1 2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		25	
3	Note to the second Control of the Co	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	<b> </b>		
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
_	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			.,
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	_		X
	complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-	40		Х
	endowments? If "Yes," complete Schedule D, Part V  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		23.
11			100	
_	VII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	i walioni andidika		100.000
а	The Cale dula D. Dart VI	11a	Х	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	<u> </u>		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	ŀ
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		37	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X	\ <del>\</del>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
42	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140		23
15	the control of the co	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	"		1
10	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
·	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	<u> </u>	X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	ŀ	1

	Checklist of Required Schedules (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		v	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<del> </del> -
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		Х	
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	_^_	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			·
	employees? If "Yes," complete Schedule J	23		X
24a	· · · · · · · · · · · · · · · · · · ·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			3.7
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			١
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part i	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	9.8		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			1
	Schedule L, Part IV	28b	Ì	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			ľ
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Parti	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			<b>1</b>
٠.	IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X	<b>1</b>
a	Did the organization receive any payment from or engage in any transaction with a			İ
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	177	ĺ		
36	Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			1
V.	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		† <u> </u>
<b>J</b> 1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		X
38	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		T
JU	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form	990 (2010) NeighborImpact 93-0884	1929	· · · · · · · · · · · · · · · · · · ·	F	age :
of the parties of the	rt V Statements Regarding Other IRS Filings and Tax Compliance	,			
	Check if Schedule O contains a response to any question in this Part \	<u>/</u>			-
		1a 186		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 186 1b 0	$\dashv$		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	10 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		4.	Χ	1
_	reportable gaming (gambling) winnings to prize winners?		1c	Δ.	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<b>2a</b> 264			
	Statements, filed for the calendar year ending with or within the year covered by this return		2b	Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns to the control of the control o		20	21	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	15)			Х
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a 3b		1 23
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	outhority	30	ļ	+
4a					
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		4a		X
	account)?		70		1
b	If "Yes," enter the name of the foreign country:	Accounte		1	
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial		5a		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a 5b		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction for the form 8896 T2	Chons	5c		122
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		30		+
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to		6a		X
	organization solicit any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions.		- Oa		+**
þ		ons or	6b		
_	gifts were not tax deductible?		90		
7	Organizations that may receive deductible contributions under section 170(c).	goods			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods	7a		Х
	and services provided to the payor?		7b		+**
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	,	7.5	-	+
C		as	7c		X
_	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		123
đ	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		Х
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont		7f		X
T	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		X
g	If the organization received a contribution of qualified intellectual property, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	79 7h		$\frac{1}{X}$
h	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	2007 110 2 7 0111 1000 07		100	
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ı			
	the state of the s		۱.	2002-0606-0	20000000000
•	Sponsoring organizations maintaining donor advised funds.	,,,		in our	
9			_		13
a			9b	<b>†</b>	$\dagger$
10	Section 501(c)(7) organizations. Enter:				
a a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	$\exists$		
11	Section 501(c)(12) organizations. Enter:	177			
''a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources				
D	the state of the s	11b	1	1444	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	100102100700000000000000000000000000000	2,300,000
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
b 13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.			9.65	
۲.	Enter the amount of reserves the organization is required to maintain by the states in which				100
þ	the organization is licensed to issue qualified health plans	13b		15	
_		13c	$\neg$		
с 14а		100	14a		Х
	If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu		. —	+	1

The second of th

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 to any question in this Part VI

Sec	tion A. Governing Body and Management		V	B. L.
4	Enter the number of voting members of the governing body at the end of the tax year 15		Yes	No_
1a	Enter the number of voting members included in line 1a, above, who are independent  15  15			instant.
b	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer, director, trustee, or key employee?	2		Χ
_	Did the organization delegate control over management duties customarily performed by or under the direct	1		
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	1	Х
_	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4		5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Does the organization have members or stockholders?	"		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	7a		Х
_	of the governing body?	7b		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	70		71
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	0-	Χ	
а	The governing body?	8a	X	<b></b>
b	Each committee with authority to act on behalf of the governing body?	8b	21	<del></del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			X
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	lo Cod	~ \	Λ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	ie Cou		
			Yes	X
10a	Does the organization have local chapters, branches, or affiliates?	10a		ΙΔ.
b	If "Yes," does the organization have written policies and procedures governing the activities of such			
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		7.7	
	form?	11a	_X_	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	eastralle)	37	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	├─
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	<u> </u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	┞
13	Does the organization have a written whistleblower policy?	13	X	<del> </del>
14	Does the organization have a written document retention and destruction policy?	14	Χ	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	Usin da		
а	The organization's CEO, Executive Director, or top management official	15a	Χ	<u> </u>
b	Other officers or key employees of the organization	15b	X	<u>'</u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	di di		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	100		
	with a taxable entity during the year?	16a	AT 04.40 MILE VI.	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the	151.51		
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
	for public inspection. Indicate how you make these available. Check all that apply.			
	$\overline{X}$ Own website $\overline{X}$ Another's website $\overline{X}$ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
	and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ▶ Ursula Houck 2303 S.W. First Street			
R		1-54	8-2	<u> 380</u>

9 Page **7** 

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A)  Name and Title	(B) Average		(C) Position (check all that apply)		(D)  Reportable  compensation	(E) Reportable compensation from	(F) Estimated amount of			
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Susan Bailey Director	2.00	Х						0	0	0
(2) Tammy Baney Director	2.00	X						0	0	0
(3) Lynn Lundquist Director	2.00	Х						0	0	0
(4) Laura Beebe Director	2.00	Х						0	0	0
(5) Sharlene Weed Director	2.00	X						0	0	0
(6) Andrus Soper Director	2.00	Х						0	0	0
(7) Ellen Jacobs Director (8) Linda S. Walker	2.00	X						0	0	0
Sec/Treas	2.00	X		Х				. 0	0	0
(9) M. Teresa Lawren	2.00	X		Х				0	0	0
(10) Karole Stockton President	2.00	Х		X				0	0	0
(11) Walt Ponsford Director (12) Annette Allen	2.00	Х						0	0	0
Director	2.00	Х						0	0	0
One Control of Control	2.00	Х						0	0	0
(14) Seth Crawford Director	2.00	X						0	0	0
(15) Edward Onimus Director	2.00	Х						0	0	0
(16) Sharon Miller Exec. Dir. DAA	40.00			Х				92,014	0	16,266 Form <b>990</b> (2010)

(A) (B) Name and Title Average			(C) Position (check all that app						(D) Reportable	<b>(E)</b> Reportable	(F) Estimated
	Name and Thie	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director				Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Fis	Ursula Houck	40.00			Х				69,226	0	13,156
(18)											
(19)	· · · · · · · · · · · · · · · · · · ·										
(21)			<u> </u>			,					
(22)											
(23)											
(24)											
(25)											
(26)											
(27)											
(28)											:
1b	Sub-total							<b>•</b>	161,240		29,422
C	Total from continuation shee Total (add lines 1b and 1c)	_						<b>&gt;</b>	161,240		29,422
2	Total number of individuals (in	cluding but not	limite	ed to				bov	<del></del>		
3 4 5	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization and related organization and person listed on line 1 for services rendered to the organization.	ormer officer, did complete Sche e 1a, is the sum nizations greated a receive or acceganization? If "	recto dule of re thai	r or f J for eport 1 \$15	r suc able 50,00  pens	h ind com 00? I	dividen npens If "Ye  n from	ual satio s," o n ar	on and other compensation complete Schedule J for su my unrelated organization or	from the ch r individual	Yes No
Sec	ction B. Independent Contract Complete this table for your fire		ener	ated	inde	nend	lent :	cont	ractors that received more	than \$100 000 of	
_	compensation from the organi	zation.				, O110		T			(C)
	Name and ichart Family, Inc.	(A) business address		-		146	500	NE	Descrip	(B) fion of services	(C) Compensation
V	ancouver	W.F	<u> </u>	86	86			V	Weatherization	n .	768,78
	edmond Heating and edmond		ς ς	77			Во		1835 Weatherization	n .	190,11:
								-	· · · · · · · · · · · · · · · · · · ·		
							·····	-			
2	Total number of independent	contractors (incl	uding	g but	not	limit	ed to	tho	se listed above) who		

Pa	rt VI	II Statement of Revenue					And
			ind and had introduced	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
<u> </u>					revenue		512, 513, or 514
grants	1a	Federated campaigns 1a				hajay sayak ordes	
ᇤ	b	Membership dues 1b					
S, C	С	Fundraising events 1c					
a E	d	Related organizations 1d					
υE			583,433	debia a Erebiju		ani ang panggalang	
S		All other contributions, gifts, grants,					
語	•		770,422				
Contributions, gifts, and other similar an	_	Noncash contributions included in lines 1a-1f: \$ 2,7	726,573			HER CHILD BUILDING	
Se		Total. Add lines 1a–1f		15,353,855			deservation substitut
-			Busn. Code				
Program Service Revenue	ο-	Ţ	Dusn. Code	279,237	279,237		
ě	2a	Other program service income		213/231	273/231		
ė	b				·····		
ž	C						Lanurus
Se	d			·			
Tar	е	, , , , , , , , , , , , , , , , , , ,					
ē		All other program service revenue		0=0 00=			
_		Total, Add lines 2a-2f		219,231	kombiskovini is		
	3	Investment income (including dividends, interes	st,	22 272			22 072
		and other similar amounts)		. 33,973			33,973
	4	Income from investment of tax-exempt bond pro	oceeds 🕨				
	5	Royalties	<u> ▶  </u>				
		(i) Real (ii) Pe	ersonal				
	6a	Gross Rents					
	b	Less: rental exps.					
	C	Rental inc. or (loss)		A SERVE CLOSUS.	elektrisisi (taksi)	udanianik Buahilaniah	ara di alian Principi
		Net rental income or (loss)	<b>▶</b> _			4	
	7a		Other				
		sales of assets other than inventory				ne extendel an	
	b	Less: cost or other					
		basis & sales exps.					
	G	Gain or (loss)					
		Net gain or (loss)					
		Gross income from fundraising events					
e l		(not including \$					
ě		of contributions reported on line 1c).		Entrated Excel Re	and or help for the		Like Granden
윤		See Part IV, line 18		higher the but he	A PARTICIONE		
Other Reven	h	Less: direct expenses b					
ŏ		Net income or (loss) from fundraising events			and the south south		
		Gross income from gaming activities.					
	эа	See Part IV, line 19 a					
	L	Less: direct expenses b					
		Net income or (loss) from gaming activities					
		· · ·					
	ıva	Gross sales of inventory, less					
	_	returns and allowances a		<b>United to the</b>	NUMBER OF STREET	an danah danah	Approach (appelle
		Less: cost of goods sold b	<b>•</b>			error er den er	
	C	Net income or (loss) from sales of inventory  Miscellaneous Revenue	Busn. Code				
	4.4		Dusii. Code	241,882			241,882
	_	Healy Heights Partner LLC		41,691	41,691		211,002
	b	Other income		41,091	41,001		
	C	All other property					
		All other revenue	<b></b>	283,573			
		Total Add lines 11a–11d		15,950,638	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	0	275,855
	12	Total revenue. See instructions.		10,000,000	320,320	<u> </u>	2,0,000

#### 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) but are not required to complete columns (B), (C), and (D).

	All other organizations must not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<u>7Б,</u> 1	Grants and other assistance to governments and				
1	organizations in the U.S. See Part IV, line 21	46,742	46,742		macaalaa aa
2	Grants and other assistance to individuals in	10,712			
<i>2</i> .	the U.S. See Part IV, line 22	6,280,938	6,280,938		
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the		,		
	U.S. See Part IV, lines 15 and 16				restant debili de la composition
4	Benefits paid to or for members				attanisti prijesto disperso i se
5	Compensation of current officers, directors,				
	trustees, and key employees	188,736	47,849	133,444	7,443
6	Compensation not included above, to disqualified	İ			
	persons (as defined under section 4958(f)(1)) and	•			
	persons described in section 4958(c)(3)(B)	***			
7	Other salaries and wages	3,693,888	3,222,266	438,571	33,051
8	Pension plan contributions (include section 401(k)				<b>.</b>
	and section 403(b) employer contributions)	149,340 1,085,514	137,974	10,478 101,846	888
9	Other employee benefits	1,085,514	978,746	101,846	4,922
0	Payroll taxes	423,294	376,615	43,424	3,255
1	Fees for services (non-employees):			ļ	
а	Management		Vinciani v		
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	150 050	100 050	07 600	10.00
g	Other	179,870	138,956	27,628	13,286
2	Advertising and promotion	001 060	117 510	07.060	C 405
3	Office expenses	221,862	117,512	97,863	6,487
4	Information technology				
15	Royalties	015 015	176 007	20 614	964
16	Occupancy	215,815	176,237 106,537	38,614 2,417	672
7	Travel	109,626	100,55/	Z,41/	0/2
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			-	
19	Conferences, conventions, and meetings	2,517	2,517		
20	Interest	Z, J11	Z, J1/		
21	Payments to affiliates	93,196	85,731	7,465	
22	Depreciation, depletion, and amortization	56,388	36,986	19,402	
3	Insurance	30,300	30, 300		
4	Other expenses. Itemize expenses not covered	describing a strong	NO PERSONAL PROPERTY.		
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of fine 25, column				
_	(A) amount, list line 24f expenses on Schedule 0.) Client assistance	1,419,726	1,419,726		
a	Repairs and maintenance	48,101	44,648	3,453	
b	Training	40,942	36,651	3,373	918
ç	Dues and other fees	16,897	12,766	4,006	125
d ^	Other	15,282	15,282	1,000	12.
e		14,352	8,412	5,940	· · · · · · · · · · · · · · · · · · ·
) E	All other expenses  Total functional expenses. Add lines 1 through 24f	14,303,026	13,293,091	937,924	72,011
6	Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column	11,000,020	10,230,031	30.,321	
AA	(B) joint costs from a combined educational campaign and fundraising solicitation				Form <b>990</b> (2010

Part )	Balance Sheet	(A)		(B)
		Beginning of year		End of year
1	Cash—non-interest bearing		1	
2	Savings and temporary cash investments	1,079,769	2	1,286,689
3	Pledges and grants receivable, net	807,275	3	1,081,629
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key	albready basicija i kilonicija		rena e la companya di salah di salah di salah di salah di salah di salah di salah di salah di salah di salah d
	employees, and highest compensated employees. Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section	problem pro entre de la composición de la composición de la composición de la composición de la composición de		
	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)		6	
7	Notes and loans receivable, net	1,489,464	7	1,341,677
7 8	Inventories for sale or use	92,198	8	119,479
9	Prepaid expenses and deferred charges	4,457	9	4,567
10a	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 2,931 Less: accumulated depreciation 997	, 337		
l b	Less: accumulated depreciation 10b 997	,093 1,017,150	10c	1,934,244
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11	1,438,336	12	2,848,041
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	164,083	15	164,083
16	Total assets. Add lines 1 through 15 (must equal line 34)	6,092,732	16	8,780,409
17	Accounts payable and accrued expenses	180,221	17	461,430
18	Grants payable		18	0.70 10
19	Deferred revenue	87,090	19	359,49
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key			AND PARTY OF THE
21 22	employees, highest compensated employees, and disqualified persons.			
i	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	52,554	23	50,030
24	Unsecured notes and loans payable to unrelated third parties		24	000 477
25	Other liabilities. Complete Part X of Schedule D	231,186	25	200,178
26	Total liabilities. Add lines 17 through 25	551,051	26	1,071,139
3	Organizations that follow SFAS 117, check here ▶ X and complete			
2	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	2,451,753 2,543,803	27	3,902,508
i   28	Temporarily restricted net assets	2,543,803	28	3,902,500 3,080,425 726,33
29		546,125	29	726,33
3	Organizations that do not follow SFAS 117, check here ▶ ☐ and			
5	complete lines 30 through 34.			
30			30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
2 32	Retained earnings, endowment, accumulated income, or other funds		32	
27 28 29 30 31 32 33 34	Total net assets or fund balances	5,541,681	33	7,709,270
₹   34	Total liabilities and net assets/fund balances	6,092,732	34	8,780,409

555						
orm	990 (2010) NeighborImpact	93-0884929			Paç	je <b>12</b>
Pa	rt XI Reconciliation of Net Assets Check if Schedule O contains a response to a	ny question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)		1	15,95		
2	Total expenses (must equal Part IX, column (A), line 25)		2	14,30		
3	Revenue less expenses. Subtract line 2 from line 1		3	1,64		
4	Net assets or fund balances at beginning of year (must equal Part X,			5 <b>,</b> 54		
5	Other changes in net assets or fund balances (explain in Schedule O)	)	5	51	19 <b>,</b> 9	<u>977</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 column (B))	(must equal Part X, line 33,	6	7,70	) 9,2	270
	Check if Schedule O contains a response to a	X Accrual Other	• • • • • • • • • • • •		Yes	No
1	Accounting method used to prepare the Form 990:					
2a	Were the organization's financial statements compiled or reviewed by	an independent accountant?	. ,	2a		X
b	Were the organization's financial statements audited by an independent	ent accountant?		2b	Χ	
	If "Yes" to line 2a or 2b, does the organization have a committee that	assumes responsibility for oversight		2c	Х	
	of the audit, review, or compilation of its financial statements and sel If the organization changed either its oversight process or selection p Schedule O.				21	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the fir issued on a separate basis, consolidated basis, or both:	ancial statements for the year were ed and separate basis				
	Separate basis X Consolidated basis Both consolidate	ou and acharate hasis				

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

Form **990** (2010)

3a

#### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

**Employer identification number** 

			Neighborimpa	act						0004				_
P	art I	Reaso	on for Public Charity	Status (All organizations	s must c	omplete	e this p	oart.) §	See in	struction	ons.			_
Γhe	orga			se it is: (For lines 1 through 11,										
1	$\Box$			sociation of churches described										
2				(A)(ii). (Attach Schedule E.)										
3				rice organization described in se	ction 170	b)(1)(A)(i	ii).							
4				ed in conjunction with a hospital				(1)(A)(ii	i). Ente	r the hos	pital's nam	e,		
•	1}	city, and state		•										
5				of a college or university owned	or operati	ed by a go	vernme	ntal unit	descrit	oed in				
			o)(1)(A)(iv). (Complete Par											
6				governmental unit described in s	section 17	0(b)(1)(A)	(v).							
7	X			substantial part of its support f				rom the	genera	l public				
•		-	section 170(b)(1)(A)(vi). (		_									
8				170(b)(1)(A)(vi). (Complete Par	t II.)									
9	$\sqcap$			(1) more than 33 1/3% of its sup		contributio	ons, mei	nbershi	p fees,	and gros	is			
•	ш			mpt functions—subject to certai										
				and unrelated business taxable i										
				30, 1975. See section 509(a)(2										
10				exclusively to test for public sa										
11	$\vdash$			exclusively for the benefit of, to				to carry	out the	•				
•	ш			rted organizations described in s										
				the type of supporting organiza										
		a Type		c Type III-Function			d		e III–Ot	her				
۵				rganization is not controlled dire			ne or m	ore disq	ualified	persons	;			
Ŭ	لــــا	other than for	indation managers and oth	ner than one or more publicly su	pported or	ganizatior	ıs descr	ibed in s	ection	509(a)(1	)			
		or section 50												
f				termination from the IRS that it i	s a Type I	Type II, o	ог Туре	III suppe	orting					
•			check this box											
g		Since August	17, 2006, has the organiz	ation accepted any gift or contri	bution fron	n any of th	ne							
3		following per												
				controls, either alone or together	r with pers	ons descr	ibed in (	ii) and				Ye	s No	
				e supported organization?							11g(	)		
			member of a person desc								11g(	i)		
				described in (i) or (ii) above?							11g(	ii)		
h		` '		the supported organization(s).										
		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did	ou notify	(vi)	s the	(vii) A	mount	of	
•		ganization	. ,	(described on lines 1-9	1	isted in your		nization in of your	organizat	ion in col. zed in the	SII	pport		
				above or IRC section (see instructions))	governing	document?		port?		S.?				
				(occ management)	Yes	No	Yes	No	Yes	No				
(A)														
(7									ļ					
(B)							1	ļ						
`												-		_
(C)														
( )														_
(D)		·												
· /														_
(E)		1,7854			1	1								
														_
Tot	al													

Section A. Public Support

93-0884929

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.)

Laien	dar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,962,612	10,358,198	12,406,615	15,045,772	15,353,855	62,127,052
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	·					
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	8,962,612	10,358,198	12,406,615	15,045,772	15,353,855	62,127,052
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			and despitations		roughten dies	62,127,052
	tion B. Total Support	222-47-1-22-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1					
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	8,962,612	10,358,198	12,406,615	15,045,772	15,353,855	62,127,052
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	61,688	63,556	35,709	24,885	275,855	461,693
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	429,318	96,841	137,200	177,947		841,306
11	Total support. Add lines 7 through 10	Meli Sud Mistrib					63,430,051
12	Gross receipts from related activities, etc.					12	320,928
13	First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax yea	r as a section 501	(c)(3)	
	organization, check this box and stop her				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<b>_</b>
Sec	tion C. Computation of Public S						
14	Public support percentage for 2010 (line 6	i, column (f) divided	l by line 11, colum	n (f))			97.95 <b>%</b>
15	Public support percentage from 2009 Sch						97.88 <b>%</b>
16a	33 1/3% support test—2010. If the organ				3 1/3% or more, c	heck this	<b>⊾</b> (₹7)
	box and stop here. The organization qual	•					▶ 🏻
b	33 1/3% support test—2009. If the organ						. □
	check this box and stop here. The organi					445	🟲 🗀
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization mee						
	Part IV how the organization meets the "fa						▶ □
	organization 10%-facts-and-circumstances test—200	O If the organization	did not chack a	hay an line 13 16	a 16b or 17a and	d line	💆 🗀
b	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization m						
							▶ □
18	supported organization  Private foundation. If the organization die	i not check a box o	n line 13 16a 16l	b. 17a. or 17b. che	ck this box and se		<b>,</b> LJ
10	instructions	· ·					<b>&gt;</b>
							· · · · · · · · · · · · · · · · · · ·

Schedule A (Form 990 or 990-EZ) 2010 NeighborImpact 93-0884929 Pag

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.)

	If the organization fails to	quality under	the tests lister	a below, pleas	se complete ra	ait ii.)	
	tion A. Public Support				T		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	mea					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5					<u></u>	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support			<b>-</b>	1	<del></del>	T
Cale	ndar year (or fiscal year beginning in) 🕨 👚	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her						<b>&gt;</b> 🗆
Sec	tion C. Computation of Public S	upport Percer	ntage				
15	Public support percentage for 2010 (line 8			nn (f))		15	%_
16	Public support percentage from 2009 Sch						%
	ction D. Computation of Investme						
17	Investment income percentage for 2010 (			3, column (f))		17	%
18	Investment income percentage from 2009					1	%
19a		nization did not cl	heck the box on lin	e 14, and line 15	is more than 33 1/3	3%, and line	
, 54	17 is not more than 33 1/3%, check this b	oox and stop here	. The organization	qualifies as a pub	olicly supported org	anization	▶ [
b	33 1/3% support tests—2009. If the orga	nization did not cl	heck a box on line	14 or line 19a, ап	d line 16 is more th	nan 33 1/3%, and	
J	line 18 is not more than 33 1/3%, check t	his box and stoo	here. The organiza	tion qualifies as a	publicly supported	d organization	▶ [
20	Private foundation. If the organization di						<u> </u>

Schedule A (F	orm 990 or 990-EZ) 2010 Neighbor Impact	93-0884929	Page 4
Part IV	<b>Supplemental Information.</b> Complete this part to provide the explanations Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any instructions).	required by Part II, line 10; additional information. (See	···
Part I	I, Line 10 - Other Income Detail		
Other	Revenue \$ 841,306		
	······································	,	
* * * * * * * * * * * * * * * * * * * *			, . ,
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	······································		

#### SCHEDULE C (Form 990 or 990-EZ)

### Political Campaign and Lobbying Activities

ction 501(c) and section 527 ch to Form 990 or Form 990-EZ. Open to

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

**2010**Open to Public Inspection

OMB No. 1545-0047

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

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

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

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

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

• \$	Section 501(c)(4), (5), or (6) organizations: Complete Part III.				
Nar	ne of organization NeighborImpact			Employer identification 93-08849.	
Dai	Complete if the organization is exem	pt under section 501(c)	or is a section		
1 2 3	Provide a description of the organization's direct and indirect Political expenditures  Volunteer hours	ct political campaign activities i	n Part IV.	<b>&gt;</b> \$	
Pai	rt I-B Complete if the organization is exem	pt under section 501(c)	(3).		
1	Enter the amount of any excise tax incurred by the organiza			▶\$	
2	Enter the amount of any excise tax incurred by organization				
3	If the organization incurred a section 4955 tax, did it file For	rm 4720 for this year?			
	Was a correction made?				Yes No
9746 6 6 76	If "Yes," describe in Part IV.	_1 d	eveent peet	on E04/a\/2\	
	Complete if the organization is exem			on 50 HC/(5).	
1	Enter the amount directly expended by the filing organization			<b>▶</b> \$	
2	activities  Enter the amount of the filing organization's funds contribut	ted to other organizations for s	ection		
3	527 exempt function activities  Total exempt function expenditures. Add lines 1 and 2. Ent	er here and on Form 1120-PO			
3	line 17b			▶ \$	
4	Did the filing organization file Form 1120-POL for this year	?			Yes No
5	Enter the names, addresses and employer identification nu	ımber (EIN) of all section 527 p	olitical organization	ons to which the filing	
Ť	organization made payments. For each organization listed,	enter the amount paid from th	e filing organizatio	n's funds. Also enter	
	the amount of political contributions received that were pro-	mptly and directly delivered to	a separate politica	al organization, such	
	as a separate segregated fund or a political action committed	ee (PAC). If additional space is	s 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)			<i>11</i> =17 · .		
(5)					
(6)					

Schedule C (Form 990 or 990-EZ) 2010		23 00042	
Part II-A Complete if the org section 501(h)).	anization is exempt under section 501(c)(3)	and filed Form 5768 (ele	ction under
	ization belongs to an affiliated group.		U.S. A. Martine Communication of the Communication
B Check ► if the filing organ	ization checked box A and "limited control" pr	rovisions apply.	
Limits on	Lobbying Expenditures	(a) Filing organization's totals	(b) Affiliated group totals
	es" means amounts paid or incurred.)		
· - · · · · · · · · · · · · · · · · · ·	ce public opinion (grass roots lobbying)	1 0 200	
	ce a legislative body (direct lobbying)	1 0 000	
c Total lobbying expenditures (add line)	s 1a and 1b)	2,326	· · ·
d Other exempt purpose expenditures		14,300,700	
e Total exempt purpose expenditures (a	add lines 1c and 1d)		
	ne amount from the following table in both		
columns.		865,151	
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.		belan dalam dalam period
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 (ente	25% of line 1f)	216,288	
	or less, enter -0-	. 0	
i Subtract line 1f from line 1c. If zero o		. [ 0	
j If there is an amount other than zero	on either line 1h or line 1i, did the organization file Form 4	720	<u> </u>
reporting section 4911 tax for this year	ar?		Yes No

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

Lo	bbying Expenditur	es During 4-Yea	Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2007	(ь) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	680,871	775 <b>,</b> 760	900,523	865,151	3,222,305
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>					4,833,458
c Total lobbying expenditures	13	212	365	2,326	2,916
d Grassroots nontaxable amount	170,218	193,940	225,131	216,288	805,577
e Grassroots ceiling amount (150% of line 2d, column (e))					1,208,366
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

q	3	_	n	Я	Я	4	9	2	C
			v	u	$\cup$	_	_	_	_

Page 3

Par	Complete if the organization is exempt under section 501(c)(3) and has NOT	filed	Forn	า 5768			
	(election under section 501(h)).	(2	1)		(b)		
		Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
•	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of:		E L				0.10.1
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c	Media advertisements?						
d	Mailings to members, legislators, or the public?						
e	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						<u>.</u>
q	Direct contact with legislators, their staffs, government officials, or a legislative body?			ļ			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
	Other activities? If "Yes," describe in Part IV						
i	Total. Add lines 1c through 1i				44112917711	11,100,000,000,000	an againm
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>					
2: 1 m2 m m / 2 X m m	Complete if the organization is exempt under section 501(c)(4), section 501(	:)(5),	or s	ection			
***************************************	501(c)(6).					<del> </del>	
				ſ		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			<u></u>	3		
Pa	*Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, "Yes."	ine 3	ors is a	nswere	d		
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political						
	expenses for which the section 527(f) tax was paid).			Ì			
а	Current year		2a	<u> </u>			
	Carryover from last year		2b	ļ			
	Total		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3_				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
	and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)		5				
Pa	rf IV Supplemental Information						
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B	line 1	i. Also	١,			
	plete this part for any additional information.						
	,						
			· · ·				
			,				

D-1	000 or 000 E7\ 2	om Neighb	orTmpact			93-0884929	Page <b>4</b>
Schedule C (Fo	rm 990 or 990-EZ) 2 Supplementa	Information (	(continued)				
mili el Casa	Oupplementa						
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public

Inspection

Employer identification number Name of the organization 93-0884929 NeighborImpact Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year \_\_\_\_\_ Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ ...... Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? In Part XIV, 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2010 Neighborin				93-08849				<u>ge Z</u>
Pa	rt III Organizations Maintaining	Collections of Art, H	listorical Trea	sures, (	or Other Simi	lar Ass	ets (continu	red)	
3									
а	Public exhibition	d Loan or	exchange prograr	ns					
b	Scholarly research	<b>=</b>							
C	Preservation for future generations				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
4	Provide a description of the organization's coll	ections and explain how th	ey further the orga	anization's	s exempt purpose	in Part			
-	XIV.	•							
5	During the year, did the organization solicit or	receive donations of art, hi	storical treasures,	or other	similar				
	assets to be sold to raise funds rather than to	be maintained as part of th	ne organization's c	ollection?	•		Ye	s 🔲	No
Pя	art IV Escrow and Custodial Arra	ngements. Complete	e if the organiz	ation a	nswered "Yes	" to Fo	rm 990, Par	t IV,	
	line 9, or reported an amour	nt on Form 990, Part	X, line 21.						
1a	Is the organization an agent, trustee, custodia			her asset	s not				
	included on Form 990, Part X?						Ye	5	No
h	If "Yes," explain the arrangement in Part XIV a	and complete the following	table:						
-							Amount		
С	Beginning balance	,,,.,				1c			
	Additions during the year					1d			
u						1e			
···	Distributions during the year					1f			<del></del>
f	Ending balance  Did the organization include an amount on Fol						Ye	$\Box$	— No
		III 950, Fail A, IIII6 2 1 ?					I te	5 📋	NO
	If "Yes," explain the arrangement in Part XIV.  Endowment Funds. Completing the c	oto if organization an	cwered "Vec"	to Form	000 Part IV	line 10	n		
- 78	art V Endowment Funds, Comple	(a) Current year	(b) Prior year				s back (e) Four	vears t	nack
	B. T. S. C. Salatana	(a) Current year	(b) i noi your	(0)	o your buok (u)			Hellin	
	Beginning of year balance								
	Contributions		<del></del>						
C	Net investment earnings, gains, and								
	losses								
	Grants or scholarships			<u> </u>					
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses					HICH HAVE		18 BUSE	
g									nen-e
2	Provide the estimated percentage of the year	end balance held as:							
	Board designated or quasi-endowment	%							
b	Permanent endowment ▶ %								
c	Term endowment ▶ %								
3a	Are there endowment funds not in the posses	sion of the organization tha	at are held and adr	ministered	d for the		r		
	organization by:							Yes	No
	(i) unrelated organizations					<i>.</i>	3a(i)	$\longrightarrow$	
	(ii) related organizations	4,14,4,4,4,4							
b	If "Yes" to 3a(ii), are the related organizations	listed as required on Sche	dule R?		,		3b		
4	Describe in Part XIV the intended uses of the	organization's endowment	funds.		<del></del>				
Pa	art VI Land, Buildings, and Equip	oment. See Form 99	0, Part X, line	10.	<b></b>				
	Description of investment	(a) Cost or other basis	(b) Cost or othe	r basis	(c) Accumula		(d) Book	value	
		(investment)	(other)		depreciatio	ו			
1a	Land			,357				54,3	
	Buildings		1,303	3,116	289	,218	1,01	13,8	398
	Leasehold improvements								
	Equipment		973	3,864	707	,875	26	55 <b>,</b> 9	989
	Other								
	al. Add lines 1a through 1e. (Column (d) must ed		ımn (B), line 10(c)	.) <u>.                                   </u>		🕨	1,93	34,2	244
					· <del></del>				

	(Form 990) 2010 Nelgnborimpact	D 13/ E 40		
Part VII	Investments—Other Securities. See Form 990	, Paπ X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of v	
	(including name of security)		Cost or end-of-year	market value
(1) Financi	al derivatives	,		
(2) Closely	held equity interests			
(3) Other	Certificates of deposit/T-bill	1,549,086	Market	
(A) I	nvestment in Healy Heights Partner	1,298,955	Cost	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B) line 12.)	2,848,041		
Part VII	Investments—Program Related. See Form 99			
	(a) Description of investment type	(b) Book value	(c) Method of v	
			Cost or end-of-year	market value
(1)				AVEN THE REST.
(2)				
(3)				L. L. Sales
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, col. (B) line 13.)			
Total. (Col	Other Assets. See Form 990, Part X, col. (B) line 13.)  Other Assets. See Form 990, Part X, line 15.  (a) Description			(b) Book value
Total. (Col	Other Assets. See Form 990, Part X, line 15.			(b) Book value
Total. (Colo Part IX	Other Assets. See Form 990, Part X, line 15.			(b) Book value
Total. (Colo Part IX	Other Assets. See Form 990, Part X, line 15.			(b) Book value
Total. (Coli Part IX (1) (2)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15.  (a) Description			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 2			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)	5. (b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 2:  (a) Description of liability  iral income taxes	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede (2) Esc	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede (2) Esc (3) Acc	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 2:  (a) Description of liability  iral income taxes	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede (2) Esc (3) Acc (4)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede (2) Esc (3) Acc (4) (5)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede (2) Esc (3) Acc (4) (5) (6)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Col  Part X  1. (1) Fede (2) Esc (3) Acc (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X  1. (1) Fede (2) Esc (3) Acc (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X 1. (1) Fede (2) Esc (3) Acc (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col Part X  1. (1) Fede (2) Esc (3) Acc (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X, line 15.  (a) Description  umn (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities. See Form 990, Part X, line 29  (a) Description of liability  real income taxes  crow liability	(b) Amount		(b) Book value

2. FIN 48 (ASC 740) Footnote. In Part XIV, 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).

200,178

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

36			
hedule D (Form 990) 2010 NeighborImpact	93-0	)884929	Page <b>4</b>
Part XI Reconciliation of Change in Net Assets from Fo	rm 990 to Audited Financia	al Statements	
Total revenue (Form 990, Part VIII, column (A), line 12)		■ _ I	
Total expenses (Form 990, Part IX, column (A), line 25)		I _ I	
Excess or (deficit) for the year. Subtract line 2 from line 1		1 . 1	
Net unrealized gains (losses) on investments		k I	
Donated services and use of facilities			···
Investment expenses			***
Prior period adjustments			
Other (Describe in Part XIV.)			
Total adjustments (net). Add lines 4 through 8			
Excess or (deficit) for the year per audited financial statements. Combine	lines 3 and 9	10	
Part XII Reconciliation of Revenue per Audited Financia	al Statements With Revenu	e per Return	
Total revenue, gains, and other support per audited financial statements			
Amounts included on line 1 but not on Form 990, Part VIII, line 12:	, ,		
a Net unrealized gains on investments	2a		
b Donated services and use of facilities			
c Recoveries of prior year grants			
d Other (Describe in Part XIV.)			
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		1 2 1	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		is til til	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV.)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 12.)	5	
Part XIII Reconciliation of Expenses per Audited Finance			
1 Total expenses and losses per audited financial statements			····
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
a Donated services and use of facilities	1 1		
b Prior year adjustments			
c Other losses			
d Other (Describe in Part XIV.)			
e Add lines 2a through 2d			u
3 Subtract line 2e from line 1			
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	4.0		
a Investment expenses not included on Form 990, Part VIII, line 7b	1		
b Other (Describe in Part XIV.)		40	
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,	me 16.)	J	
Part XIV Supplemental Information omplete this part to provide the descriptions required for Part II, lines 3, 5, ar	nd 9: Part III lines 1a and 4: Part IV	lines 1b and 2b:	
art V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part	XIII lines 2d and 4b. Also complete	this part to provide	
art v, line 4, Part X, line 2, Part XI, line 6, Part XII, lines 20 and 40, and 1 art by additional information.	yan, mos za ana isi i ass somplete	and part to pressed	
ny additional information.			
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Schedule D (F	orm 990) 2010	NeighborIm	pact		<u>.</u>	93-0884929	Page 5
Part XIV	Supplemen	NeighborIm Ital Information (	continued)	***************************************			
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SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

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

2010

OMB No. 1545-0047

▶ Attach to Form 990.

Open to Public Inspection

ame of the organization					Employer i	Employer identification number	)er	
	Acciptant				00-06	C7C+0		
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?	the amount of the grance?	ants or ass	istance, the grantees'	eligibility for the grants	or assistance, and	Q	X Yes	<b>&amp;</b>
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Fart II Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II	onitoring the use of governments and recipient that rec	d Organi d Organi ceived m	in the United States.  zations in the Un ore than \$5,000.	Organizations in the United States.  Organizations in the United States. Complete if the organization answered "Yes" to sived more than \$5,000. Check this box if no one recipient received more than \$5,00	plete if the org no one recipie	janization answint received m	vered "Yes" to ore than \$5,000. Pa	=4
can be duplicated if additional space is needed  (a) Name and address of organization (b) EIN	se is needed (b) EIN	(c) IRC	(d) Amount of cash	(e) Amount of non-cash	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant	
		if applicable	grant	assistance	offier)	non-cash assistance	טו מפופונים זה	
<pre>1) Central Oregon Veterans Outreach 117 NW Lafayette Ave. 3end</pre>	. 76-0782755	501C3	6,242				Shelter - Utili	Utilities
2) Saving Grace 1425 NW Kingston Ave Send		50103	12,861				Shelter - Telep	Telephone
andma's House 00 NE Rumgay	94-3162069	50103	7,409				Shelter - Utili	Utilities
	93-1323419	50103	20,230				Shelter - Util	Utilities
(9)								
7)								
(8)								:
(6)						:		
2 Enter total number of section 501(c)(3) and government organizations	nt organizations							
l ä	s for Form 990.						Schedule I (Form 990) (2010)	90) (2010)

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

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Schedule I (Form 990) (2010) Neighbor Impact Part III Grants and Other Assistance to Individuals in the Un	o Individuals in the U	9. Inited States. Comp	93-0884929 nplete if the organizati	93-0884929 ited States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	Page 2 m 990, Part IV, line 22.
Part III can be duplicated if additional space is needed  (a) Type of grant or assistance recipients	Itional space is neede (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 Emerg. Serv - LIEAP/OEA	7853	2,418,268			
2 Food programs	343451	-	2,745,329	Cost	Food
<pre>3 Weatherization</pre>	142	1,081,149			
4 ES / OPK	302	18,172			
5 CCR / ES	76	18,020			
9					
P					
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	mplete this part to pro	vide the information	required in Part I, Ii	ne 2, and any other additi	onal information.
Part I, Line 2 - Procedures for Monitoring the Use of	s for Monitori	ng the Use o	f Grant Funds		
Operations Director:					
- Review budget status reports: identify	orts: identify		unusual budget line items; review	ns; review	
percent budget remaining for each line item; run general ledger reports	or each line	tem; run gen	eral ledger 1	reports	
when further follow up is needed.	needed.				
- Meet monthly with staff to assist with	to assist with	budget monitoring.	toring.		
- Follow up with fiscal staff to make changes as	aff to make ch	nanges as ide	identified from monthly	monthly	
meetings.					
- Monitor payroll distributions and activity reports monthly.	tions and act	Lvity reports	monthly.		
- Monitors report system to ensure that staff receive monthly reports.	o ensure that	staff receiv	e monthly re	oorts.	
DAA					Schedule I (Form 990) (2010)

Schedule I (Form 990) (2010)

9

60036

Schedule I (Form 990) (2010)

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2010

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 93-0884929 NeighborImpact

_ ra	rt I Types of Property	T	I	(0)		
		(a)	(b)	(c) Noncash contribution	(d)	rmining
		1	Number of contributions or	amounts reported on	Method of dete noncash contributi	_
		applicable	items contributed	Form 990, Part VIII, line 1g	noncesii contribut	on amounts
1	Art—Works of art					
2	Art—Historical treasures					
3	Art—Fractional interests				***************************************	
4	Books and publications		g Peding pedang Bresidens			
5	Clothing and household	1				
	goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities—Publicly traded					
10	Securities—Closely held stock					
11	Securities—Partnership, LLC,					
	or trust interests					
12	Securities-Miscellaneous					
13	Qualified conservation					
	contribution—Historic					
	structures		*****			
14	Qualified conservation			,		
	contribution—Other					
15	Real estate—Residential				**************************************	
16	Real estate—Commercial					
17	Real estate—Other					
18	Collectibles					
19	Food inventory	X	2	2,715,877		
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ►(	) X	1	10,696		
26	Other ►(					
27	Other ▶(					
28	Other ►(					
29	Number of Forms 8283 received by	the organ	ization during the tax yea	er for contributions for		
	which the organization completed F	orm 8283,	, Part IV, Donee Acknow	edgement	29	
	•					Yes No
30a	During the year, did the organizatio					
	it must hold for at least three years	from the d	late of the initial contribut	ion, and which is not requir	ed to be	
	used for exempt purposes for the e	ntire holdir	ng period?			30a X
b	If "Yes," describe the arrangement	in Part II.			•	Die badee
31	Does the organization have a gift a	cceptance	policy that requires the r	eview of any non-standard		
	contributions?				,	31 X
32a	Does the organization hire or use the	nird parties	or related organizations	to solicit, process, or sell n	oncash	
_						32a X
b	If "Yes," describe in Part II.					
33	If the organization did not report an	amount in	column (c) for a type of	property for which column (	(a) is checked,	
	describe in Part II.		.,	· · · · · · · · · · · · · · · · · · ·		esta de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela composición de la composición dela
						odulo M (Form 990) (2010)

Schedule M (Form 990) (2010) NeighborImpact	93-0884929 Page <b>2</b>
Part II Supplemental Information. Complete this part to and 33. Also complete this part for any additional	provide the information required by Part I, lines 30b, 32b,
Part I, Line 32b - Third Party Used to	Process Noncash Contributions
Motorized vehicles will be accepted pr	covided they are being handled and
disposed of by an independent processi	ing center and NeighborImpact is held
harmless from any liability associated	d with the vehicle donation.
	<u></u>
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	······································
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## SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

# 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.

2010 Open to Public Inspection

OMB No. 1545-0047

NeighborImpact

Employer identification number 93-0884929

Form 990 - Organization's Mission or Most Significant Activities
NeighborImpact is dedicated to empowering individuals and families to
succeed and become engaged citizens in the community.
NeighborImpact's mission is achieved through the services of its
three largest departments; Early Care and Education, Emergency
Services, and the Housing Center. NeighborImpact takes a team
approach in providing comprehensive services that build on the strengths of
the client in order to increase assets in the following areas:
Personal (job skills and education/school readiness)
Financial (earnings, income, savings)
Social (formal and informal support networks)
Family (family functioning and stability)
NeighborImpact is dedicated to assisting people through times of need by
providing them with the necessary skills to realize their hopes and dreams
for the future. Our strategy in building
assets is accomplished through communication, collaboration and
coordination of services across program areas and in partnership with
customers and community.
Early Care & Education
Child Care Resources Accomplishments
# of parent referrals - 648
# of enhanced referrals - 342
# of training classes provided - 160
# of attendees - 1505
# of hours of Early Care and Education training - 428

# of E2C2 case management enrollments - 106

Schedule O (Form 990 or 990-EZ) (2010)  Name of the organization  NeighborImpact	Page 2 Employer identification number 93-0884929
Energy Education	
# of Transitional Housing Program and Head Start Clien	nts receiving Energy
Education - 70	
Family Shelter Accomplishments	· · · · · · · · · · · · · · · · · · ·
<pre># of individuals/households served - 61Ind/22HH</pre>	
% of households that moved into permanent/transitiona	l housing 15/19 = 79%
Food Program Accomplishments	
# of lbs of food received through OFB and local source	es - 2,456,747
# of Emergency Food Boxes distributed by local member	agencies - 40,195
# of individuals served through emergency food banks	- 129,768
# of people served by supplemental food box and brown	bag programs - 59,032
# of emergency and supplemental meals served - 154,67	1
Rental Assistance Accomplishments	
# of households who maintained their housing. (Rental	Assistance - 182 HH +
31 New HTBA HH	
# of households who entered HPRP - 24	
Transitional Housing Accomplishments	
% of participants that obtain permanent housing - 37/	84 = 44%
% of participants who enter the program with no emplo	yment that obtain at
least part-time employment within one year of program	entry $-5/21 = 24\%$
% of families who are in the program at least one yea	r that complete 2 of 3
goals areas - 26/27= 96%	
Housing Center	
Home Ownership Accomplishments	
# of individuals receiving pre-purchase counseling -6	6
# of facilitated home sales - 79	
# of individuals attending Home Buyer Education class	es - 189

Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-Ez) (2010)  Name of the organization  NeighborImpact	Employer identification number 93-0884929
# Foreclosure Prevention Counseling - 178	
# Foreclosure Prevention Workshop - 247	
# New Individual Development Account participants (match	ed savings) - 25
# New Individual Development Account graduates - 6	
# Financial Fitness Participants - 122	
# Financial Fitness series graduates - 24	
# of Down Payment Assistance Loans - 1	
# of Credit Counseling - 6	
# of Reverse Mortgage Counseling - 44	
# of Reverse Mortgage Obtained - 11	
Home Rehabilitation Accomplishments	
# of rehabilitation jobs completed - 16	
Weatherization Accomplishments	
# of weatherization jobs completed - 142	
Form 990, Part I, Line 6	
Head Start- Classroom assistance, governance participati	on, facilities &
playground maintenance, food service assistance, office	support, advisory
committee participation, staff training, child health an	nd developmental
screening assistance, interpretation and translation and	delivering food to
centers.	
CCR- Office support, grant writing support, delivery of	literacy kits to
child care providers.	
Food Program- Driver assistance picking up and distribu	
food, sorting and repackaging food drive donations, mair	ntaining educational

Schedule O (Form 990 or 990-EZ) (2010)  Name of the organization  NeighborImpact	Employer identification number 93-0884929
garden in Bend and Redmond, warehouse support with partr loading, working at large food drives and fund raising e educational gardens in Redmond and Bend.	
Shelter- Landscaping duties including weeding, pruning, bark dust, yard debris haul-away, sweeping parking area	
HOC- Teaching classes. The volunteers help set up the resigning in all participants, making sure they have an infully completed. Hand out brochures and materials. He during the class when needed, then helps clean up the	ntake and that it is elps the counselor
Community Relations- Special Events and serving on comm	ittees.
Board- Serving on the board and committees.	
WX- Office assistance.  CCR- Office assistance.	
HR- Office assistance.	
Form 990, Part III, Line 4d - All Other Achievements Other programs	
Form 990, Part VI, Line 11b - Organization's Process to	

Page 2 Schedule O (Form 990 or 990-EZ) (2010) Employer identification number Name of the organization 93-0884929 NeighborImpact before it is filed. The Board may charge a committee of the board to conduct a more thorough review of the 990. The committee will report to the board in a timely fashion the results of its review of the 990. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy On an annual basis, a list of insiders who engage in or are reasonably likely to engage in transactions that constitute conflicts of interest with the Organization is developed. A designated employee will be responsible for maintaining this list and for obtaining annual disclosures from officers, directors and key employees. Form 990, Part VI, Line 15a - Compensation Process for Top Official Every two years (at a minimum), the Human Resource Manager collects wage comparable data from a variety of sources including: local employers both public and non-profit, other Oregon employers with like positions, associations such as the Oregon Head Start Association, Association of Oregon Community Development Organizations and other Oregon community action, community development and Head Start programs. This data is converted into a wage matrix which is line with wage goals approved by management and the Board. The matrix is used as a basis for compensation adjustments. The Board annually reviews the compensation of the Executive Director to ensure compensation received does not exceed an amount equal to the rate payable for level II of the Executive Schedule under section 5313 of title 5, United State Code. Adjustments to compensation must be approved by the

Board.

Name of the organization

NeighborImpact

Employer identification number 93-0884929

Form 990, Part VI, Line 15b - Compensation Process for Officers
Every two years (at a minimum), the Human Resource Manager collects wage
comparable data from a variety of sources including: local employers both
public and non-profit, other Oregon employers with like positions,
associations such as the Oregon Head Start Association, Association of
Oregon Community Development Organizations and other Oregon community
action, community development and Head Start programs.
This data is converted into a wage matrix which is line with wage goals
approved by management and the Board. The matrix is used as a basis for
compensation adjustments.
The Board annually reviews the compensation of the Head Start Director,
Fiscal Director and Human Resource Manager to ensure that compensation
received does not exceed an amount equal to the rate payable for level II
of the Executive Schedule under section 5313 of title 5, United States
Code.
· · · · · · · · · · · · · · · · · · ·
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
The Organization's governing documents and conflict of interest policy are
made available to the public upon request. The annual audited financial
statements are made available for review on the Oranization's website.
······································

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships  Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.	nizations and Unrelated Partnerships	Unrelated F to Form 990, Part	artnerships W, line 33, 34, 35, 3	i6, or 37.	<del>*</del>	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	▶ Attach to	Form 990.	► See separate instructions.	tructions.		3-3-4-1-3-5-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	Open to Public Inspection
Name of the organization	Neighbortmoact			į		Employer it	Employer identification number 93-0884929
Part I Identifi	d Entities (Complete if the	organization answered "Yes" to Form 990, Part IV, line 33.)	wered "Yes" to	Form 990, Par	t IV, line 33.)		
	(a) Name, address, and EIN 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) Healy Height	Heights Partner LLC	. Afford hsg			247,167	1,298,955	N/A
(2)							
(3)							
(4)							
(5)							
Part II Identifi	identification of Related Tax–Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	Complete if the c	organization ans	swered "Yes" to	Form 990, Pa	rt IV, line 34 bed	sause it had
Z	(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) Community Action 2303 SW 1st St. Redmond	y Action Found. of Cent. OR 1st St. OR 97756 OR 97756	A.H.Rental	OR	509a3	11b	N/A	×
(2)							
(3)							
(4)							
(5)				Ī			
For Paperwork Reduction	For Paperwork Reduction Act Notice, see the Instructions for Form 990.  DAA					Sche	Schedule R (Form 990) 2010

<b>Partill</b> Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because if had one or more related organizations treated as a partnership during the tax year.)	ons Taxable a organizations	as a F treat	<b>Partnership</b> (C	complete if the serving serving the servin	ie organization a the tax year.)	inswered "Yes"	to Forn	יי ששט, Part IV, II	ine 34	
	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispro- portionate alloc.?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(k) Percentage ownership
(1)Deschutes Family Housing LP	AH Rental	OR II	Healy Heigh	Excluded	19,069	2,839,236	×		×	99.00
							· · · · <u>-</u>	-		
	ions Taxable	as a (	Corporation o	r Trust (Con	nplete if the orga	Inization answer	ed "Ye	"Yes" to Form 990,	Part IV	,,
ame	(b) Primary activity	<u></u>	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) (ty Share of total income orp.)	псоте	(g) Share of end-of-year assets	Реп	(h) Percentage ownership
										- :
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
DAA		1						Schedule	e R (Forn	Schedule R (Form 990) 2010

93-0884929

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Schedule R (Form 990) 2010 Neighbor Impact
Part V Transactions With Related Orga

Page 3

BR 18 FF Liver Gut Young 18 FF Liver Gut Yo				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	٩
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?	one or more related organizations listed i	in Parts II–IV?		
a Receipt of (i) interest (ii) annuities (iii) rovalties or (iv) rent from a controlled entity			12	×
Gift grant or capital contribution to other organization(s)			12	×
Only Branch or somital contribution from other prescription(s)			16	×
			×	
d Loans or loan guarantees to or for other organization(s)			1	;
e Loans or loan quarantees by other organization(s)			-Je	×
			The state of the s	×
L Safe Of assets to other organization(s)				×
g Purchase of assets from other organization(s)				; ;
			44	\ ا
i Lease of facilities equipment or other assets to other organization(s)			11	×
			4 X	
Lease of facilities, equipment, of other assets from other organization(s)				×
<ul> <li>R Performance of services or membership or fundraising solicitations for other organization(s)</li> </ul>	п(s)			:   <b>&gt;</b>
I Performance of services or membership or fundraising solicitations by other organization(s)	n(s)			<
m Sharing of facilities, equipment, mailing lists, or other assets			-Jm	×
				×
II disting of paid employees				
				;
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>			10	×
Reimbursement naid hy other organization for expenses				×
				×
<ul> <li>other transfer of cash or property to other organization(s)</li> </ul>			<u> </u>	
r Other transfer of cash or property from other organization(s)			16	<
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this	ust complete this line, including covered r	line, including covered relationships and transaction thresholds	esholds.	
1	(q)	(3)	(p)	
Name of other organization	Transaction	Amount involved	Method of determining	
ביינים בי	type (a-r)		amount involved	
(1) Community Action Found. of Cent. OR	ָס	164,083		
(2) Community Action Found. of Cent. OR		9,452		
(3)				
(4)				
(2)				
į				
(9)			000) (100 House (100) 2040	2040
			A (oce in o i) A solice of the sac of	2

93-0884929

Schedule R (Form 990) 2010 Neighbor Impact

60036

Part VI

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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

Schedule R (Form 990) 2010 å managing partner? General or Ξ Yes amount in box 20 of Schedule K-1 Code V—UBI (Form 1065) (f)
Disproportionate
altocations? Ŷ Yes (e) Share of end-of-year assets (d) Are all partners section 501(c)(3) organizations? Yes No or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (c) Legal domicite (state or foreign country) (b) Primary activity Name, address, and EIN of entity (11) 9  $\varepsilon$ 3 ල 3 9 8 8 6)

Supplemental Information Part VII Complete this part to provide additional information for responses to questions on Schedule R (see instructions). Schedule R - Group Exemption Relationships Both Community Action Foundation of Central Oregon, Inc. and NeighborImpact are organizations exempt from income tax as described in Section 501 (c) (3) of the Internal Revenue Code. NeighborImpact is a typical exempt organization because it is publicly supported, and is therefore not a private foundation because it is an organization described in Section 509 (a) (2) of the Code. CAFCO, on the other hand, was formed solely to support NeighborImpact in furtherance of its charitable activities. CAFCO, therefore, is not a private foundation because it is an organization described in Section 509 (a) (3). As set forth in CAFCO's articles of incorporation, as amended, CAFCO was formed solely to support NeighborImpact. CAFCO's directors are appointed by NeighborImpact's board of directors. Article IV of CAFCO's restated articles of incorporation initially provided that upon dissolution or final liquidation of CAFCO, its assets would be distributed to NeighborImpact or to a closely related nonprofit organization if NeighborImpact were no longer in existence. This article was subsequently amended, however, to substitute IRS standard dissolution language, at the request of the IRS. Schedule R - Additional Information The primary activity of Community Action Foundation of Central Oregon is the rental of affordable housing.

Totals

		Na4 I	Leans Bassing	ablo		
Forms 990 / 990-PF	Othe	er Notes and	Loans Receiva			2010
330 / 000 1 1	For calendar year 2010, or	tax year beginning	07/01/10 ,	and ending 0	6/30/11	
lame					Employer id	lentification Number
NeighborImpac	•+				93-088	34929
					,	
Form 990, Par	t X, Line 7 - 1	<u>Additional</u>	Information	1		
		•		Relationship to	disqualified pers	son
n) Notes recei	Name of borrower			rteiadolionip to	disquained porc	
2)						
3)				<u> </u>		
(4)			1			
(5)						
(6) (7)						
(8)						
(9)			· <b>!</b>	<u> </u>		
(10)						
Original amount		Maturity				Interest
borrowed	Date of loan	date	Re	payment terms		rate
(1)						
(2)		<u> </u>			100-1-11	
(3)						
(5)						
(6)						
(7)					***************************************	
(8) (9)						
(10)						
Sar	curity provided by borrower			Purpos	se of loan	
(1)	curry provided by borrower					
(2)						
(3)		, <del>, .</del>		····		
<u>(4)</u>						
(5) (6)						
(7)				<del>.</del>		
(8)				wr		
(9)						
(10)					Augusta es	
			Balance due at	Balance d		Fair market value
	ation furnished by lender		beginning of year 1,489,464	end of y	ear 1,677	(990-PF only)
<u>(1)</u>			1,409,404	1,04	1,0//	
(2)						
(4)						· · · · · · · · · · · · · · · · · · ·
(5)						
(6)						
(7)						
(8) (9)						
(10)			1 490 464	1 3/1	1 677	

1,341,677

1,489,464

(10)

Totals

Forms	Mortg	gages and Otl	ner Notes Paya	ble	1	2010
990 / 990-PF	For calendar year 2010, or	tax year beginning	07/01/10 ,a	nd ending (	06/30/11	
Name	, , , , , , , , , , , , , , , , , , , ,				Employer Ider	ntification Number
NeighborImpac	<b>*</b> +				93-0884	929
Form 990, Par	rt X, Line 23 -	Additional	<u>Information</u>	n		
	Name of lender			Relationship to	disqualified persor	ı
(1) Home Federa						
(2)						*******
(3)					-	
(4)						
(5)						
(6) (7)						
(8)	· · · · · · · · · · · · · · · · · · ·	10 Mary				
(9)			1			
(10)						
						Interest
Original amount borrowed	t Date of loan	Maturity date	Re	epayment term	IS	rate
(1)	Date of real.		Monthly r	ayments	of \$550	6.750
(2)						
(3)			·			
(4)				- 444-44	tomu.	
(5)	<u> </u>				····	
(6)						
(7) (8)						
(9)						
(10)						
		djedjeli sjela dilikudi	Actor dispositive state.			<u>raja elecistras per el pe</u>
_	- 6 - 1111			Durno	se of loan	
	Security provided by borrower	11.00		ruipo	se of loan	
(1) Trust Deed (2)					May	
(3)						
(4)						
(5)					1 AND 10	
(6)						4.000
(7)		<u> </u>				
(8) (9)						
(10)						
			Balance o	due at		lance due at
	deration furnished by lender		beginning	of year 2 <b>,</b> 554		50,036
(1)				<u> </u>		30,030
(2)					****	441.7
(3)						
(5)						
(6)						
(7)						
(8)						····
(9)						

50,036

52,554

Form

**CT-12** 

For Oregon Charities

# Charitable Activities Section Oregon Department of Justice 1515 SW 5th Avenue, Suite 410 Portland, OR 97201-5451 E-Mail: charitable.activities@doj.state.or.us Web site: http://www.doj.state.or.us VOICE (971) 673TTY (800) 735FAX (971) 673-

VOICE (971) 673-1880 TTY (800) 735-2900 FAX (971) 673-1882

For Accounting Periods Beginning in:

2010

Se	ection I.	General Informati	on					
1.				Cross Throu (See instruction	gh Incorrect Items ons for change of name	and Correct Here or accounting period	re: .)	
	13460			Registration #:				
1	Neighbo	rImpact		Organization N	ame:			
2	2303 SW	I 1st St		Address:				
Ţ	Redmond	l, OR 97756		City, State, Zip	:			
į	541-548	3-2380		Phone:		Fax:	Amended Report?	
•	7/1/10	6	/30/11	Email: Period Beginni	ng:	Period Ending:		
2.		fied public accountant audit yo ying notes, schedules, or othe				ncial statements,	X Yes No	
3.	Oregon?	anization a party to a contract i			machine or telephone t	und-raising in	Yes X No	
4.	Has the or government action in a	te the name of the fund-raising rganization or any of its officer nt agency, such as a state atto any court regarding charitable s n of each such agreement or a	s, directors, trustee orney general, or se solicitation, adminis	s, or key employees ever sigr cretary of state, or local distr tration, management, or fidu	ict attorney, or been a p	arty to legal	Yes X No	
5.	During this reporting period, did the organization amend its articles of incorporation, bylaws, or trust documents, OR did the organization receive a determination letter from the Internal Revenue Service indicating a new or amended tax-exempt status? If yes, attach a copy of the amended document or letter.  Is the organization ceasing operations and is this the final report? (If yes, see instructions on how to close your registration.)  Yes X No							
6.	Is the orga	anization ceasing operations ar	nd is this the final re	eport? (If yes, see instruction	ns on how to close your	registration.)	Yes X No	
7.	Provide co	ontact information for the person	on responsible for re	etaining the organization's rec	cords.			
		Name	Position	Phone		Address & Email Ad		
	Sharon	n Miller	Exec. Dir.	541-548-2380	2303 SW 1st sharonm@neig	•	i	
8.	List of Off	icers, Directors, Trustees and e compensation. Attach addition e "See !RS Form" may be ente	nal sheets if neces	sary. If an attached IRS for	m includes substantially	the same compensat		
		(A) Name,	mailing address, da and email addr	rytime phone number ress		(B) Title & average weekly hours devoted to position	(C) Compensation (enter \$0 if position unpaid)	
	Name: Address: Phone: Email:	See IRS Form 990						
	Name: Address: Phone: Email:							
	Name: Address: Phone; Email;							

Sec	tion	II. Fee Calculation				
errodelis basi yas	ica, case se Si					
	(Fram Lin	Revenue ne 12 (current year) on Form 990; Line 9 on Form 990-EZ; Part i, Line 12a on 1041-A; or see page 3 of the instructions if no federal tax return was prepare is \$0.)	Form 990-PF; Line 9 on Form 1041	9. 15,703,471		
10.	Reven	ue Fee			10.	200
		0 - \$99,999 \$45 00 - \$249,999 \$75 00 - \$499,999 \$100 00 - \$749,999 \$135 00 - \$999,999 \$170				200
	(From L	ssets or Fund Balances at End of the Reporting Period Line 22 (end of year) on Form 990, Line 21 on Form 990-EZ, or Part III, on Form 990-PF, or see page 4 to calculate.)	11. 7,709,270			•
	(General). Line	ixed Assets Used to Conduct Charitable Activities ally, from Part X, Line 10c on Form 990, Line 23B on Form 990-EZ or Part 14b on Form 990-PF; or see page 4 to calculate. See instructions if ration owns income-producing assets.)	1,934,244			
13.	Amou (Line 1	Int Subject to Net Assets or Fund Balances Fee		5,775,026		
14.	Net A: (Line 1:	ssets or Fund Balances Fee	\$1,000. Round cents to the nearest who	le dollar.)	14.	578
Ĩ	(If yes,	ou filling this report late? Yes X No	ow late the report is. See Instruction 15 fo	or additional information or contact	15.	
16.		Amount Due			16.	778
	excep but ha	h a copy of the organization's federal tax return and all otion that Form 990 & 990EZ filers do not need to attact ad Total Revenue of \$25,000 or more, or Net Assets of red to complete certain IRS Forms for Oregon purpose or Oregon Purposes Only." If your organization files IR	th a copy of their Schedule B. r Fund Balances of \$50,000 or es only. If the attached return w S Form 990-N (e-Postcard) ples	Also, if the organization d more, see the instructions as not filed with the IRS, the ase attach a copy or confirm	id not f as the hen ma nation	ile with the IRS, organization is ark any such return of its filing.
Plea	se	Under penalties of perjury, I declare that I have examined thi to the best of my knowledge and belief, it is true, correct, and	s return, including all accompanying complete.	forms, schedules, and attach	ments, a	and
Sign		⇒ PUBLIC COPY				
Her		Signature of officer	Date	Title	<u></u>	
	агеr's			541-68	37-2	320
Use	Only	Preparer's signature	Date 422 W 11+b Avo	Phone Eugene, OR 9	7/101	
		Jones & Roth, P.C.	432 W. 11th Ave	. Buyette, OR 3	, <del>, , , , ,</del>	

#### **NEIGHBORIMPACT**

# CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

For the Year Ended June 30, 2011 (With Comparative Totals for the Year Ended June 30, 2010)



#### NEIGHBORIMPACT CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION For the Year Ended June 30, 2011 (With Comparative Totals for the Year Ended June 30, 2010)

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#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors Neighborlmpact Redmond, Oregon

We have audited the accompanying consolidated statement of financial position of NeighborImpact (a nonprofit organization) as of June 30, 2011, and the related consolidated statements of activities and cash flows for the year then ended. These consolidated financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audit. The prior year summarized comparative information has been derived from the Organization's June 30, 2010, financial statements and, in our report dated November 15, 2010, we expressed an unqualified opinion on those financial statements.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the consolidated financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Neighborimpact as of June 30, 2011, and the changes in its net assets and cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with Government Auditing Standards, we have also issued our report dated November 30, 2011 on our consideration of Neighborlmpact's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards and should be considered in assessing the results of our audit.

fax (541) 382-3587

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The schedule of expenditures of federal awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and is not a required part of the consolidated financial statements. The accompanying consolidating schedule of financial position and consolidating schedule of revenue and expenses are presented for the purposes of additional analysis and are not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Jones + Roth, P.C.

Jones & Roth, P.C. Bend, Oregon November 30, 2011

				·	•		
	CONSOLID	ATED FII	NANCIAL STA	ATEMENTS			
					٠		
	•						
·							
·		•					
						•	

#### NEIGHBORIMPACT CONSOLIDATED STATEMENT OF FINANCIAL POSITION June 30, 2011

(With Comparative Totals for June 30, 2010)

·			
	_	2011	 2010
Assets			
Current assets			
Cash and cash equivalents	\$	1,768,731	\$ 1,293,663
Short-term investments		1,249,086	1,438,336
Accounts receivable		9,005	-
Grants receivable		1,081,629	807,275
Prepaid expenses and other current assets		4,567	4,457
Food inventory		119,479	 92,198
Total current assets		4,232,497	 3,635,929
Other assets			
Long-term investments		408,404	630,399
Restricted notes receivable		414,871	259,915
Other notes receivable, net of deferred portion		936,606	 1,234,549
Total other assets		1,759,881	 2,124,863
Property and equipment, net of accumulated depreciation		4,748,687	 1,299,980
Intangible assets, net of accumulated amortization		30,233	 
Total assets	\$	10,771,298	\$ 7,060,772

		2011	 2010
Liabilities and Net Assets			
Current liabilities		·	
Accounts payable	\$	219,640	\$ 180,221
Accrued expenses		253,700	227,759
Deferred grant revenue		359,495	87,090
Escrow liability		200,178	3,427
Security deposits		34,308	-
Current portion of long-term debt		39,809	 2,609
Total current liabilities		1,107,130	501,106
Long-term debt, net of current portion	_	1,508,792	 49,945
Total liabilities	_	2,615,922	 551,051
Net assets			
Unrestricted		4,257,331	3,318,684
Temporarily restricted		3,171,708	2,644,912
Permanently restricted		726,337	 546,125
Total net assets		8,155,376	 6,509,721
Total liabilities and net assets	\$	10,771,298	\$ 7,060,772

# NEIGHBORIMPACT CONSOLIDATED STATEMENT OF ACTIVITIES

For the Year Ended June 30, 2011 (With Comparative Totals for the Year Ended June 30, 2010)

	Unrestricted Funds	Temporarily Restricted Funds	Permanently Restricted Funds
Support and revenue	_		405.404
Federal grants	\$ -	\$ 7,490,470	\$ 195,494
State and local grants	-	5,152,702	<u>.</u>
Contributions	380,581	2,486,202	-
Program revenue	-	279,237	-
Rental income	18,346	-	•
Other revenue	21,876	29,536	-
Interest income	6,392	30,253	-
Net assets released from program restrictions	14,956,886	(14,941,604)	(15,282)
Total support and revenue	15,384,081	526,796	180,212
Expenses			
Program services:			
Health and welfare	13,397,501	-	-
Support services:			
Management and general	917,577	-	-
Community relations	58,345	546	-
Fundraising	72,011		<u> </u>
Total expenses	14,445,434		pa.
Change in net assets	938,647	526,796	180,212
Net assets, beginning of year	3,318,684	2,644,912	546,125
Net assets, end of year	\$ 4,257,331	\$ 3,171,708	\$ 726,337

	Totals					
	2011		2010			
\$	7,685,964 5,152,702 2,866,783 279,237 18,346 51,412 36,645	\$	7,835,231 4,438,504 2,769,040 251,001 - 177,947 29,141			
	16,091,089		15,500,864			
	13,397,501		14,090,990			
	917,577		880,447			
	58,345		23,891			
	72,011		98,985			
	14,445,434		15,094,313			
	1,645,655		406,551			
	6,509,721		6,103,170			
<u>\$</u>	8,155,376	\$	6,509,721			

# NEIGHBORIMPACT CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES For the Year Ended June 30, 2011

(With Comparative Totals for the Year Ended June 30, 2010)

	Support Services						Program Services	
		nagement		ommunity				Health
	and	d General	1	Relations	Fu	ndraising_	aı	nd Welfare
Salaries and wages	\$	541,792	\$	12,168	\$	39,492	\$	3,263,653
Payroll taxes and benefits		172,925		2,893		10,067		1,499,778
Printing		2,908		_		3,468		18,217
Office expenses		64,091		42,956		3,019		99,295
Interest		2,194		<u> </u>		~		2,517
Insurance		20,225		- -		_		36,986
Professional fees		21,264		-		-		13,924
Contract services		9,335		-		13,286		125,032
Repairs and maintenance		9,778		· _		-		44,648
Client assistance		-		-		₩		7,851,833
Transportation and lodging		2,417		_		672		106,537
Rent		-		-		784		101,041
Janitorial		5,940		_		_		8,412
Utilities and telephone		31,662		328		180		75,196
Training		3,373		_		918		36,651
Dues and fees		4,006		-		125		12,766
Other		1,561	_			M		15,282
Total expenses before depreciation		893,471		58,345		72,011		13,311,768
Depreciation		24,106						85,733
Total expenses	\$	917,577	\$	58,345	\$	72,011	\$	13,397,501

_	Tot	als	
<del></del>	2011		2010
\$	3,857,105	\$	3,945,967
	1,685,663		1,768,900
	24,593		26,285
	209,361		315,443
	4,711		2,402
	57,211		60,560
	35,188		30,266
	147,653		259,960
	54,426		54,495
	7,851,833		8,128,886
	109,626		115,259
	101,825		82,210
	14,352		15,809
	107,366		101,966
	40,942		65,250
	16,897		20,997
	16,843		2,083
	14,335,595		14,996,738
	109,839		97,575
\$	14,445,434	\$	15,094,313

The accompanying notes are an integral part of these consolidated statements.

#### NEIGHBORIMPACT CONSOLIDATED STATEMENT OF CASH FLOWS

#### For the Year Ended June 30, 2011

(With Comparative Totals for the Year Ended June 30, 2010)

		2011		2010
Cash flows from operating activities				
Change in net assets	\$	1,645,655	\$	406,551
Adjustments to reconcile change in net assets to net cash provided				
by operating activities:				
Donated land and building		(957,286)		
Depreciation expense		109,839		97,575
Increase in food inventory		(27,281)		(44,864)
(Increase) decrease in:				
Accounts receivable		(9,005)		_
Grants receivable		(274,354)		347,799
Prepaid expenses		(110)		(619)
Increase (decrease) in:				
Accounts payable		39,419		(46,454)
Accrued expenses		25,941		(8,983)
Deferred grant revenue		272,405		(89,991)
Escrow liability		196,751		(28,780)
Security deposits		34,308		
Net cash provided by operating activities		1,056,282		632,234
Cash flows from investing activities		·	-	
Net purchases of investments		(110,750)		(16,780)
Collections of notes receivable		4,555		32,964
Issuance of notes receivable		(362,961)		(30,000)
Purchase of property and equipment		(109,540)		(211,457)
Net cash used by investing activities		(578,696)		(225,273)
Cash flows from financing activities				
Principal payments on notes payable		(2,518)	_	(2,412)
Net increase in cash and cash equivalents		475,068		404,549
Cash and cash equivalents, beginning of year		1,293,663		889,114
Cash and cash equivalents, end of year	<u>\$</u>	1,768,731	\$	1,293,663

The accompanying notes are an integral part of these consolidated statements.

#### 1. Summary of Significant Accounting Policies

#### Organization

From 1985 to date, NeighborImpact has been recognized by the Oregon Housing and Community Services Department (OHCSD) as a community action agency to serve Crook, Deschutes, and Jefferson Counties. It is organized as a 501(c)(3) charitable corporation. A 15-member volunteer Board is responsible for setting policy and direction for NeighborImpact. Its service area encompasses all of Crook, Deschutes, and Jefferson Counties in a region known as Central Oregon. NeighborImpact maintains over 17 offices and classroom sites in the communities of La Pine, Bend, Redmond, Sisters, Prineville, and Madras.

NeighborImpact is dedicated to empowering individuals and families to succeed and become engaged citizens in the community. NeighborImpact's mission is delivered through the services provided by its three largest department areas: Emergency Services and Food, Early Care and Education, and Housing Center. NeighborImpact takes a team approach in providing comprehensive services that build on the strengths of the customer in order to increase assets in the following areas:

- Personal (job skills and education/school readiness)
- Financial (earnings, income, savings)
- Social (formal and informal support networks)
- Family (family functioning and stability)

NeighborImpact believes that assets help people through times of need and to realize their hopes and dreams for the future. NeighborImpact's strategy in building assets is accomplished through communication, collaboration, and coordination of services across program areas and in partnership with customers and community.

NeighborImpact provides the following services to assist low and moderate income residents of Central Oregon:

#### **Emergency Services and Food Programs**

- Emergency Services provides emergency rental assistance, energy shut-off prevention as well as information and referral to individuals and families.
- Energy Services helps eligible families and individuals pay a portion of their heating costs during the winter months, participate in energy education, and/or receive energy case management.
- Family Shelter provides short-term shelter to homeless families with children. The
  program is located in Bend and can provide housing for up to five families at a time for
  up to three months.
- Food Bank collects and distributes food to network of 40 local agencies in Crook, Deschutes, and Jefferson Counties. These groups are independent non-profits and/or churches that include Emergency Food Box Sites, Congregate Meal Sites, Brown Bag Programs. Shelters, Child Care Providers, and senior programs.
- Rent Services provides rent assistance, information, and referral and case management to eligible individuals and families through a variety of rent programs.
   Services are based on need, eligibility, and available funding.
- Transitional Housing helps homeless families with their immediate housing crisis and longer term self-sufficiency through rental subsidies, case management support, and training assistance.

#### 1. Summary of Significant Accounting Policies, continued

#### Organization, continued

#### Early Care and Education Programs

- Child Care Resources serves parents, providers, and employers with information and referral services.
- Head Start Program promoting school readiness and self-sufficiency through early childhood education, parent involvement, family support, health services, social services, and nutritious meals for primarily low-income families, children with disabilities, or other special needs.

#### **Housing Center Programs**

- Home Ownership offers a variety of programs including foreclosure prevention classes and counseling, first time homeownership classes and counseling, down payment assistance loans, reverse mortgage counseling, financial literacy classes and counseling, home owner rehabilitation loans, and a matched saving program (IDA).
- ► Home Rehabilitation provides low interest home repair loans to clients that are below 80 percent of the area median.
- Weatherization Weatherization is a year-round program that makes improvements to homes to reduce energy loss for clients at or below 60 percent of the state area median income. Some improvements may include insulation, heating systems, and air sealing. There is a home evaluation process to determine what items will be considered. A client may rent or own their home.

#### **Consolidation Policy**

The accompanying consolidated financial statements include the accounts of NeighborImpact, Community Action Foundation of Central Oregon (CAFCO), and Healy Heights Partner, LLC (HHP) (collectively referred to hereafter as the Organization). The accounts of HHP are only included as of, and for the year ended, June 30, 2011.

NeighborImpact has control over appointments to the Board of CAFCO, so consolidation is required under generally accepted accounting principles. Once appointed, NeighborImpact does not have the ability to remove Board members of CAFCO and does not control the activity of CAFCO. Interorganization transactions and balances have been eliminated in consolidation.

Effective June 15, 2011, NeighborImpact, through its wholly owned subsidiary HHP, became the 99 percent owner and limited partner of Deschutes Family Housing Limited Partnership (DFHLP). CAFCO is the 1 percent owner and general partner of DFHLP. As a result, consolidation is required under generally accepted accounting principles. Inter-organization transactions and balances have been eliminated in consolidation. DFHLP is an Oregon limited partnership formed November 15, 1993, to construct, own, and operate a 70-unit affordable housing project, in conformity with the provisions of Section 42 of the Internal Revenue Code (IRC). The partnership will terminate not later than December 31, 2034.

#### **Basis of Accounting**

The accompanying consolidated financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

#### 1. Summary of Significant Accounting Policies, continued

#### **Income Taxes**

NeighborImpact and CAFCO are not-for-profit corporations which have been granted tax-exempt status under Internal Revenue Code (IRC) Section 501(c)(3). In addition, they have been determined by the Internal Revenue Service (IRS) not to be private foundations within the meaning of Section 509(a) of the code. DFHLP is not a taxpaying entity for federal or state tax purposes as the partners report partnership income on their respective tax returns. Accordingly, these consolidated statements do not reflect a provision for income taxes.

#### Support and Revenue

Grants and other contributions of cash and other assets are reported as temporarily restricted support if they are received with grantor or donor stipulations that limit the use of the donated assets. When a donor restriction expires (that is, when a stipulated time restriction ends or the purpose of the restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the consolidated statement of activities as net assets released from restrictions. Contributions of donated noncash assets are recorded at their fair value in the period received. Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, and would typically need to be purchased if not provided by the donation, are recorded at their fair value in the period received.

#### **Estimates**

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### Cash and Cash Equivalents

Cash equivalents are stated at cost which approximates market value. For purposes of the consolidated statement of cash flows, the Organization considers all cash investments with maturities of three months or less to be cash equivalents.

#### **Grants Receivable**

Management believes that grants receivable will be fully collectible. Therefore, no allowance was recorded.

#### **Functional Allocation of Expenses**

The costs of providing various programs and other activities have been summarized on a functional basis in the consolidated statement of activities. Accordingly, certain costs have been allocated among programs and supporting services benefited.

#### 1. Summary of Significant Accounting Policies, continued

#### Inventory

Inventory consists primarily of food and food supplies used in the Organization's client service programs and is stated at the lower of cost, determined by the first-in, first-out method, or market. Amounts held at year end are considered to be temporarily restricted in accordance with grantor requirements.

#### **Compensated Absences**

Compensated absences are recorded as a liability and an expense when earned rather than when paid. When vacation is taken, amounts disbursed for vacation pay are charged against the liability. Compensated absences are valued at current pay rates.

#### **Allocation of Supporting Service Expenditures**

The Organization allocates indirect expenses of administrative overhead and other allocable costs to supporting service departments based on various direct costs and other information. The Organization's management reviews and updates these allocations on an annual basis.

#### **Property and Equipment**

Property and equipment acquired by the Organization are considered to be owned by the Organization. However, federal and state funding sources may maintain an interest in the property purchased with grant funding as well as the right to determine the use of any proceeds from the sale of such assets. Paving and landscaping and furnishings and equipment owned by DFHLP are depreciated using the declining balance method over estimated useful lives of the assets. All other fixed assets are depreciated using the straight-line method over estimated useful lives of the assets. The Organization capitalizes all property and equipment with a purchase price of greater than \$5,000 and a useful life of greater than one year.

#### **Prior Year Summarized Information**

The consolidated financial statements and notes to consolidated financial statements contain certain prior year summarized comparative information in total. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended June 30, 2010, from which the summarized information was derived.

#### **Net Assets**

Net assets of the Organization consist of the following:

*Unrestricted* – These net assets are available for the general obligations of the Organization.

Temporarily restricted net assets – These net assets are restricted by grantors or donors for specific program purposes.

Permanently restricted net assets – These net assets are restricted indefinitely by grantors or donors. Income earned on permanently restricted funds is, if not specifically required to be added to permanently restricted net assets, transferred to temporarily restricted or unrestricted classification.

#### 2. Cash and Cash Equivalents

At June 30, cash and cash equivalents consisted of the following:

	2011	2010
Checking and savings accounts	<u>\$ 1,768,731</u>	<u>\$ 1,293,663</u>

#### 3. Investments

Investments consist of certificates of deposits and treasury bills with original maturity dates greater than 90 days, stated at fair value, in the amount of \$1,549,086 and \$1,438,336 as of June 30, 2011 and 2010, respectively. Principal amounts range from \$25,000 to \$200,000 with maturity dates that range from July 2011 through December 2012. Interest earned on these investments for the years ended June 30, 2011 and 2010, was \$8,650 and \$7,539, respectively.

#### 4. Notes Receivable

At June 30, notes receivable consisted of the following:

	2011	2010
Deschutes Family Housing Limited Partnership, principal due subject to certain restrictions (see Note 8), interest at 5.00%, secured by real estate, due August 2019.	\$ -	\$ 391,393
Deschutes Family Housing Limited Partnership, principal due subject to certain restrictions (see Note 8), interest at 5.01%, secured by real estate, due November 2031.	-	110,000
Housing Assistance Loans, principal due subject to certain restrictions, various interest rates, secured by real estate, various maturities.	3,070,682	2,913,752
Neighborhood Reinvestment Corporation Loans, various interest rates, secured by real estate.	414,871	259,915
Madras Family Housing Limited Partnership, bearing no interest, due on demand, unsecured.	9,800	5,000
Madras Family Housing Limited Partnership, principal due subject to certain restrictions (see Note 8), interest at 3.66%, secured by real estate, due September 2030.	195,494	·
Madras Family Housing Limited Partnership, principal due subject to certain restrictions (see Note 8), interest at 3.00%, secured by real estate, due August 2028.	<u>444,167</u> 4,135,014	<u>444,167</u> 4,124,227
Deferred portion	(2,783,537)	(2,629,763)
Notes receivable, net deferred portion	<u>\$ 1,351,477</u>	<u>\$ 1,494,464</u>

#### 4. Notes Receivable, continued

The Organization considers all notes receivable to be long-term since collection is contingent on future events and repayments in the near term cannot be reasonably estimated. Management estimates the net value of certain long-term notes receivable based on historical experience. The policy of the Organization is to include 100 percent of the face value of new housing assistance loans in the deferred portion above as payments are not received until the property is sold or otherwise transferred.

#### 5. Property and Equipment

As of June 30, the following is a summary of property and equipment:

			2011		2010
	Land Buildings Furniture and equipment Roads and landscaping Vehicles Accumulated depreciation	\$	1,014,325 6,248,849 428,902 215,793 619,652 8,527,521 (3,778,834)	\$	210,836 1,226,869 331,762 - 619,652 2,389,119 (1,089,139)
	Property and equipment, net of accumulated depreciation	\$	4,748,687	\$	1,299,980
6.	Long-term Debt				
	At June 30, long-term debt consisted of the following:				
			2011		2010
	Payable to Home Federal Bank from NeighborImpact, monthly payments of \$550 including interest at the Federal Home Loan Bank 3-year rate plus 2.75%, which was 6.75% as of June 30, 2011 and 2010. Secured by real estate, due 2023.	\$	50,036	\$	52,554
	Payable to Chase from DFHLP, monthly payments of \$7,417 including interest at 3.51%. Secured by real estate, due 2022.				
		·	1,498,565 1,548,601		52,554
	Current portion		(39,809)		(2,609)
	Long-term debt, net of current portion	<u>\$</u>	1,508,792	<u>\$</u>	<u> 49,945</u>

#### 6. Long-term Debt, continued

Maturities of long-term debt are as follows:

Year Ending  June 30,		
2012	\$	39,809
2013		41,324
2014	•	42,899
2015		44,537
2016		46,240
Thereafter		1,333,792
Total	<b>\$</b>	1,548,601

#### 7. Concentrations of Credit Risk

Financial instruments that potentially subject the Organization to a concentration of credit risk consist principally of cash and cash equivalents and notes receivable. The Organization maintains the majority of its cash balances at Federal Deposit Insurance Corporation (FDIC) insured institutions and invests in U.S. Government securities. At June 30, 2011 and 2010, \$-0- and \$913,678 in deposits exceeded FDIC insurance of \$250,000, respectively. The Organization actively monitors this risk and has entered into an overnight repurchase agreement with their financial institution. The overnight repurchase obligations of the financial institution are secured by collateral that includes government securities.

The Organization provides down payment and housing rehabilitation loans primarily to low and moderate income individuals. Notes receivable totaling \$4,134,442 are secured by property purchased or improved. These notes are a concentration of credit risk. Additionally, the Organization receives approximately 97 percent of its funding from grants, contracts and contributions. Management does not anticipate a reduction in funding.

#### 8. Related Party Transactions

NeighborImpact leases its Redmond administrative facilities from CAFCO. CAFCO is a supporting non-profit corporation formed exclusively to support the charitable purposes of NeighborImpact. Located in Redmond, Oregon, it is the general partner of the DFHLP, an Oregon limited partnership formed to own and operate the Bill Healy Family Center (Healy Heights Apartments) and the Madras Family Housing Limited Partnership, an Oregon limited partnership formed to own and operate the Madras Family Housing Center. NeighborImpact provides significant accounting and operations support to these partnerships. Notes receivable in the amount of \$649,461 are due from the Madras Family Housing Limited Partnership in connection with the construction and improvements of Madras Town Homes (see Note 4). Since collection of these notes receivable is contingent upon future available capital of the projects and other restrictions, the notes will be deferred until collection.

NeighborImpact is the single member of HHP which is the 99 percent owner and limited partner of DFHLP. As a result of the consolidation of DFHLP (see Note 1), inter-organization notes receivable from DFHLP to NeighborImpact have been eliminated in the consolidated financial statements as of June 30, 2011 (see Note 4).

#### 9. Permanently Restricted Funds

NeighborWorks America provided a \$195,494 capital grant during the year ended June 30, 2011, and \$885,000 from prior years totaling \$1,080,494 of funds for making loans and for capital projects. This amount is permanently restricted although proceeds on capital projects, or interest earned, over the corpus may be transferred to unrestricted net assets for furthering the Organization's mission. For the years ended June 30, 2011 and 2010 NeigborWorks allowed NeighborImpact to release funds totaling \$15,282 and \$165,375, respectively, from restrictions. Should the Organization become defunct, all remaining grant funds, interest earnings, capital project proceeds, and loan and capital project portfolios representing the use of these funds will revert to NeighborWorks America. The Organization invested the capital grant in U.S. Treasury bills in order to comply with grantor requirements. As of June 30, 2011 and 2010, the Organization held 22 and 14 loans totaling \$414,871 and \$259,915, respectively, in connection with this program. There were no loans as of June 30, 2011 or 2010 that were considered to be delinquent.

#### 10. Operating Lease Commitments

During the year ended June 30, 2011, the Organization entered into space lease agreements in Bend and Redmond. The leases expire in periods ranging from 3 to 14 months.

As of June 30, 2011, the Organization's aggregate annual lease commitments excluding operating costs under non-cancelable leases with terms of one year or more are payable as follows:

Year EndingJune 30,	
2012 2013	\$ 23,103 2,864
Total	\$ 25,96 <u>7</u>

#### 11. Retirement Plan

The Organization maintains a Simplified Employee Pension (SEP) plan for eligible employees. During the years ended June 30, 2011 and 2010, employer pension expense totaled \$153,250 and \$159,853, respectively.

#### 12. Contingency

The Organization receives grants from various federal, state, and local agencies that are subject to review and audit by these agencies. Such audits could result in a request for reimbursement by these agencies for expenditures disallowed under the terms and conditions of the appropriate Organization. In the opinion of the Organization's management, such disallowances are not anticipated and, if any, would not be significant.

#### 13. Fair Value Measurement

Generally accepted accounting principles define fair value, establish a framework for measuring fair value, and establish a fair value hierarchy that prioritizes the inputs to valuation techniques. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. A fair value measurement assumes that the transaction to sell the asset or transfer the liability occurs in the principal market for the asset or liability or, in the absence of a principal market, the most advantageous market. Valuation techniques that are consistent with the market, income or cost approach are used to measure fair value.

The fair value hierarchy prioritizes the inputs to valuation techniques used to measure fair value into three broad levels:

Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities the Organization has the ability to access.

Level 2 inputs are inputs (other than quoted prices included within Level 1) that are observable for the asset or liability, either directly or indirectly.

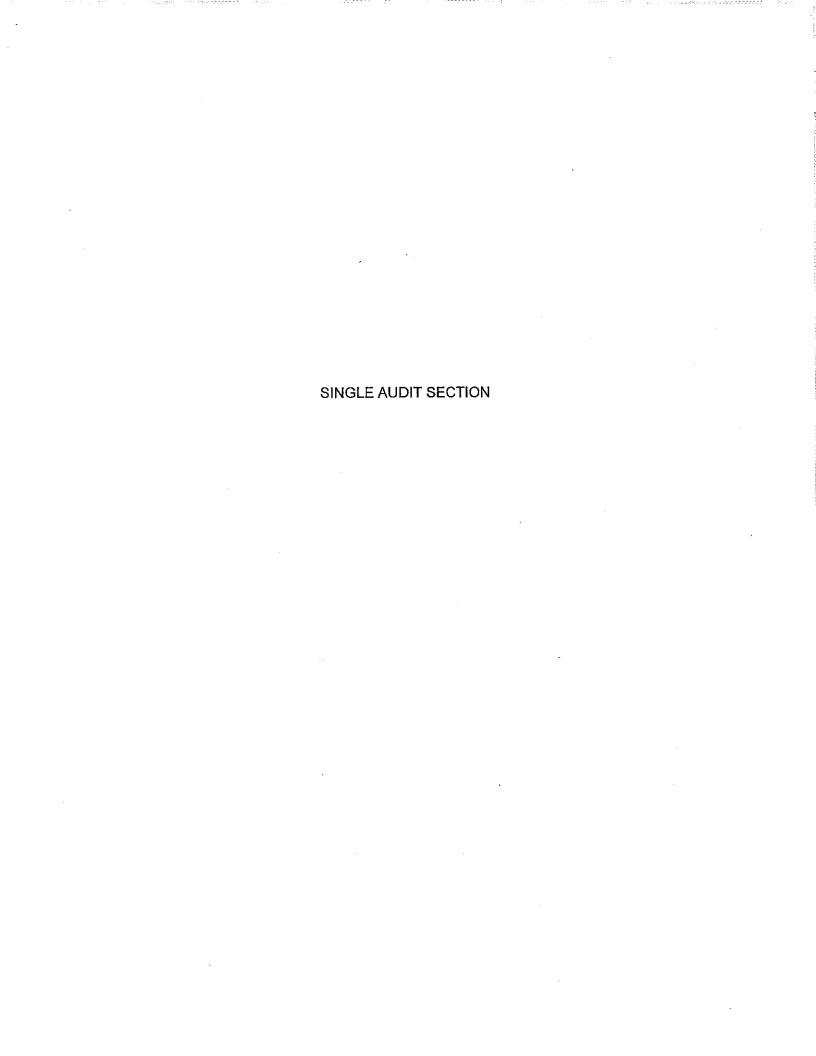
Level 3 inputs are unobservable inputs for the asset or liability and rely on management's own assumptions about the assumptions that market participants would use in pricing the asset or liability. The unobservable inputs should be developed based on the best information available in the circumstances and may include the Organization's own data.

The following table sets forth by level, within the fair value hierarchy, the Organization's assets at fair value as of June 30, 2011:

	Assets at Fair Value as of June 30, 2011					
	Level 1	Level 2	Level 3	Total		
Investments in certificates of deposit Investment in United States	\$ 1,349,086	\$ -	\$ -	\$ 1,349,086		
Treasury Bill	200,000	Int		200,000		
Total	<u>\$ 1,549,086</u>	<u>\$</u>	<u>\$</u>	<u>\$ 1,549,086</u>		
	Asse	ets at Fair Value	as of June 30, 2	2010		
	Level 1_	Level 2	Level 3	Total		
Short-term investments	<u>\$ 1,438,336</u>	\$	<u>\$</u>	<u>\$ 1,438,336</u>		

#### 14. Subsequent Events

Management evaluates events and transactions that occur after the consolidated statement of financial position date as potential subsequent events. Management has performed this evaluation through the date of the auditor's report.



#### NEIGHBORIMPACT SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS For the Year Ended June 30, 2011

Federal Grantor/Pass-through Grantor/Program Title	Federal CFDA Number	Expenditures
U.S. Department of Energy		
Passed through The Oregon Housing and Community Services:		
DOE WX	81.042	\$ 164,867
BPA Weatherization	81.042	113,188
ARRA DOE WX	ARRA 81.042	728,229
Total U.S. Department of Energy		1,006,284
U.S. Department of Treasury		
Passed through Neighborworks America:		
Neighborhood Reinvestment Program - expendable	21.000	165,610
Passed through Oregon Housing and Community Services:		
Hardest Hit Funds	21.XXX	142,643
Total U.S. Department of Treasury		308,253
U.S. Department of Health and Human Services		
Head Start	93.600	1,308,443
ARRA Head Start	ARRA 93.708	28,970
Passed through Oregon Housing and Community Services:		
Housing Stabilization Program (TANF)	93.558	23,496
Low-income Energy Assistance (LIEAP)	93.568	2,297,002
Community Service Block Grant	93.569	154,409
ARRA Community Services Block Grant	ARRA 93.710	71,531
Passed through Child Care Resources and Referral Network:		
Child Care Development Block Grant	93.575	199,232
Total U.S. Department of Health and Human Services	,	4,083,083
U.S. Department of Agriculture		
Passed through the Oregon Department of Education:		
Child and Adult Care Food Program	10.558	176,684
Passed through The Oregon Housing and Community Services:		
Passed through the Oregon Food Bank:		
Temporary Emergency Food Assistance Program Administrative Costs	10.568	26,023
Temporary Emergency Food Assistance Program Food Commodities	10.569	431,777
Total U.S. Department of Agriculture		634,484

	Federal CFDA	
Federal Grantor/Pass-through Grantor/Program Title	Number	Expenditures
U.S. Department of Homeland Security	•	
Passed through the Deschutes United Way:		
Emergency Food and Shelter Program	97.024	25,650
U.S. Department of Housing and Urban Development		
Supportive Housing Program	14.235	302,876
Housing Counseling	14.169	54,563
Passed through NeighborWorks America:		
Home Equity Conversion Mortgage	14.169	11,071
Passed through The Oregon Housing and Community Services:		
Emergency Shelter Grant Program	14.231	93,152
Home TBA	14.239	190,068
ARRA Homeless Prevention Program	ARRA 14.257	443,977
Community Development Block Grant	14.228	19,434
Passed through the City of Madras:		
Community Development Block Grant	14.228	215,414
Passed through the City of Bend:		
Community Development Block Grant	14.228	29,888
Total U.S. Department of Housing and Urban Development		1,360,443
Total federal expenditures		\$ 7,418,197

Note: The above schedule was prepared under the accrual basis of accounting. The value of federal loan funds was \$3,070,682 as of June 30, 2011.



#### REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors Neighborlmpact Redmond, Oregon

We have audited the consolidated financial statements of NeighborImpact (a nonprofit organization) as of and for the year ended June 30, 2011, and have issued our report thereon dated November 30, 2011. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States.

#### Internal Control Over Financial Reporting

In planning and performing our audit, we considered NeighborImpact's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of NeighborImpact's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of NeighborImpact's internal control over financial reporting.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of NeighborImpact's consolidated financial statements will not be prevented, or detected and corrected on a timely basis.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we considered to be material weaknesses, as defined above.

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#### Compliance and Other Matters

Jones & Roth, P.C.

As part of obtaining reasonable assurance about whether Neighborlmpact's consolidated financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of consolidated financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

This report is intended solely for the information and use of the Board of Directors, management, and others within the Organization, and federal awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties.

Jones & Roth, P.C.

Bend, Oregon November 30, 2011



# INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS THAT COULD HAVE A DIRECT AND MATERIAL EFFECT ON EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH OMB CIRCULAR A-133

To the Board of Directors NeighborImpact Redmond, Oregon

#### Compliance

We have audited Neighborlmpact's (a nonprofit organization) compliance with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Circular A-133 Compliance Supplement that are applicable to each of its major federal programs for the year ended June 30, 2011. Neighborlmpact's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs. Compliance with the requirements referred to above is the responsibility of Neighborlmpact's management. Our responsibility is to express an opinion on Neighborlmpact's compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States; and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program identified in the accompanying schedule of findings and questioned costs occurred. An audit includes examining, on a test basis, evidence about NeighborImpact's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination of NeighborImpact's compliance with those requirements.

In our opinion, NeighborImpact complied, in all material respects, with the compliance requirements referred to above that are applicable to each of its major federal programs identified in the accompanying schedule of findings and questioned costs for the year ended June 30, 2011.

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#### Internal Control Over Compliance

The management of NeighborImpact is responsible for establishing and maintaining effective internal control over compliance with the compliance requirements referred to above. In planning and performing our audit, we considered NeighborImpact's internal control over compliance with requirements that could have a direct and material effect on a major federal program in order to determine our auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of NeighborImpact's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected on a timely basis.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be deficiencies, significant deficiencies, or material weaknesses in internal control over compliance. We did not identify any deficiencies in internal control over compliance that we considered to be material weaknesses, as defined above.

This report is intended solely for the information and use of the Board of Directors, management, and others within the Organization, and federal awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties.

Jones & Roth, P.C.

Jones & Roth, A.C.

Bend, Oregon

November 30, 2011

#### NEIGHBORIMPACT SCHEDULE OF FINDINGS AND QUESTIONED COSTS For the Year Ended June 30, 2011

#### **Summary of Auditor's Results**

The auditor's report expresses an unqualified opinion on the consolidated financial statements of the Organization for the year ended June 30, 2011.

No material weaknesses or significant deficiencies in internal control were disclosed during the audit of the consolidated financial statements of the Organization for the year ended June 30, 2011.

No instances of noncompliance material to the consolidated financial statements of the Organization, which would be required to be reported in accordance with *Government Auditing Standards*, were disclosed during the audit.

No material weaknesses or significant deficiencies were disclosed during the audit of the internal control over major federal award programs.

The auditor's report on compliance for the major federal award programs for the Organization expresses an unqualified opinion on all major federal programs.

There are no audit findings relative to the major federal award programs of the Organization that should be reported in this schedule.

The programs tested as major programs include:

Head Start Cluster: Head Start ARRA Head Start	93.600 93.708
Low Income Energy Assistance Program	93.568
Weatherization	81.042
Supportive Housing Program	14.235
Homeless Prevention Program	14.257
Emergency Food Assistance Program Cluster: Emergency Food Assistance Program Administrative Costs ARRA Emergency Food Assistance Program Emergency Food Assistance Program Food Commodities	10.568 10.568 10.569

The threshold for distinguishing between Type A and B programs was \$300,000.

The Organization qualified as a low-risk auditee.

#### Findings - Consolidated Financial Statement Audit

None.

#### NEIGHBORIMPACT SCHEDULE OF FINDINGS AND QUESTIONED COSTS, Continued For the Year Ended June 30, 2011

None.	
Prior Year Findings and Questioned Costs – Major Federal Award	Programs Audit
None.	

Findings and Questioned Costs - Major Federal Award Programs Audit

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# NEIGHBORIMPACT CONSOLIDATING SCHEDULE OF FINANCIAL POSITION

#### For the Year Ended June 30, 2011

(With Comparative Totals for the Year Ended June 30, 2010)

	. 2011							
			C	Community Action Foundation of	. :	Healy Heights		
	_Ne	ighborlmpact		Central Oregon		Partner, LLC		Total
Assets								
Current assets								
Cash and cash equivalents Short-term investments	\$	1,286,689 1,249,086	\$	214,102 -	\$	267,940 -	\$	1,768,731 1,249,086
Accounts receivable				9,005		-		9,005
Grants receivable		1,081,629		-		-		1,081,629
Prepaid expenses and other current assets Food inventory		4,567 119,479		-		- -		4,567 119,479
Total current assets		3,741,450	_	223,107		267,940		4,232,497
Other assets								
Long-term investments		300,000		108,404		-		408,404
Restricted notes receivable		414,871		_				414,871
Other notes receivable, net of deferred portion		926,806	_	9,800				936,606
Total other assets		1,641,677	_	118,204				1,759,881
Property and equipment, net of								
accumulated depreciation		1,934,245	_	273,379		2,541,063	<u> </u>	4,748,687
Intangible assets, net of								
accumulated amortization						30,233		30,233
Total assets	\$	7,317,372	\$	614,690	\$	2,839,236	\$	10,771,298
Liabilities and Net Assets								
Current liabilities						·		
Accounts payable	\$	207,730	\$	4,502	\$	7,408	\$	. 219,640
Accrued expenses		253,700		-		-		253,700
Deferred grant revenue		359,495		-		-		359,495
Escrow liability		200,178		-		34,308		200,178 34,308
Security deposits		2 701		<u>-</u>		37,018		39,809
Current portion of long-term debt		2,791	_	<u> </u>			h-1	
Total current liabilities		1,023,894		4,502		78,734		1,107,130
Long-term debt, net of current portion		47,245				1,461,547		1,508,792
Total liabilities		1,071,139	_	4,502		1,540,281		2,615,922
Net assets								
Unrestricted		2,439,471		518,905		1,298,955		4,257,331
Temporarily restricted		3,080,425		91,283		-		3,171,708
Permanently restricted		726,337	_		_	<b>&gt;</b>		726,337
Total net assets		6,246,233	_	610,188	_	1,298,955		8,155,376
Total liabilities and net assets	<u>\$</u>	7,317,372	<u>\$</u>	614,690	\$	2,839,236	\$	10,771,298

			2010			
			ommunity Action Foundation of	,		
_Ne	eighborlmpact_	(	Central Oregon	Total		
\$	1,079,769	\$	213,894	\$	1,293,663	
	1,438,336		-		1,438,336	
	807,275		-		807,275	
	4,457 92,198		-		4,457 92,198	
	3,422,035		213,894		3,635,929	
	_		630,399		630,399	
	259,915 1,229,549		5,000		259,915 1,234,549	
	1,489,464		635,399		2,124,863	
	1,017,150		282,830		1,299,980	
	<u> </u>					
			_			
\$	5,928,649	\$	1,132,123	\$	7,060,772	
\$	180,221	\$	-	\$	180,221 227,759	
	227,759 87,090		- -		87,090	
	3,427		-		3,427	
	_		-		-	
	2,609				2,609	
	501,106		-	٠	501,106	
	49,945		-		49,945	
	551,051				551,051	
	2,287,670		1,031,014		3,318,684	
	2,543,803		101,109		2,644,912	
	546,125	_	-	<b></b>	546,125	
	5,377,598		1,132,123		6,509,721	
<u>\$</u>	5,928,649	\$	1,132,123	\$	7,060,772	

#### NEIGHBORIMPACT

#### CONSOLIDATING SCHEDULE OF REVENUE AND EXPENSES

#### For the Year Ended June 30, 2011

(With Comparative Totals for the Year Ended June 30, 2010)

	Management	Community		Early Care	Emergency	Food Bank
	and General	Relations	Fundraising	and Education	Services	Services
Support and revenue						
Federal grants	\$ 20,000	\$ 2,944	\$ -	\$ 1,745,142	\$ 3,403,926	\$ 463,552
State and local grants	-	-	354,194	2 <u>,</u> 510,617	1,861,234	48,376
Contributions	=	42,956	226,644	67,878	1,235	2,280,903
Program revenue	63,210	-	. # *	4,591	31,200	132,425
Rental income	_	-	-	-	~	-
Other revenue	12,155	_	19,411	1,906	_ '	6,845
Interest income	3,720	<u></u>	1,332	50	962	52
Total support and revenue	99,085	45,900	601,581	4,330,184	5,298,557	2,932,153
Expenses						
Personal services:						
Salaries and wages	539,796	12,168	39,492	2,085,994	539,324	124,177
Payroll taxes and benefits	172,925	2,893	10,067	1,106,778	172,679	47,141
Total personal services	712,721	15,061	49,559	3,192,772	712,003	171,318
Materials and services:						
Printing	2,908	_	3,468	6,343	3,724	3,543
Office expense	51,999	42,956	3,019	31,034	20,194	6,420
Interest	_	, -	· -	2,517	· _	· -
Insurance	19,402	-	_	25,728	2,202	2,713
Professional fees	18,293	_	_	2,533	3,780	1,800
Contract services	9,335	_	13,286	49,580	17,759	5,890
Repairs and maintenance	3,453	_	,	31,215	6,924	5,575
Client assistance	0,700	_	_	400,098	3,305,807	2,792,675
Transportation and lodging	2,417	_	672	62,716	19,850	1,033
Rent	<u> ۲</u> ۱۳۱۲	_	784	40,010	25,828	-
Janitorial	5,940	_	704		3,499	1,320
	28,834	328	180	35,958	22,250	2,998
Utilities and telephone		320	918	31,451	669	150
Training and recruitment	3,373	-	125	8,475	1,163	130
Dues and other fees	4,006	-	120	0,413	1,100	•
Loss on investment	(020 204)	1,791	13,039	390,046	245,799	21,465
Administration	(838,384)		****			
Total materials and services	(688,424)	45,075	35,491	1,117,704	3,679,448	2,845,582
Total expenses	24,297	60,136	85,050	4,310,476	4,391,451	3,016,900
Change in net assets, before						
transfers and depreciation	74,788	(14,236)	516,531	19,708	907,106	(84,747)
Transfers (to) from other funds	(465,332)	14,236	(480,318)	9,500	62,103	114,870
Depreciation and amortization	(7,463)	-	· -	(58,189)	(2,722)	(17,103)
Change in net assets	(398,007)	_	36,213	(28,981)	966,487	13,020
Net assets, beginning of year	1,213,017	(6,151)	282,601	569,216	346,658	302,361
rect descis, beginning or year				· · · · · · · · · · · · · · · · · · ·		<del>, , , , , , , , , , , , , , , , , , , </del>
Net assets, end of year	<u>\$ 815,010</u>	\$ (6,151)	\$ 318,814	<u>\$ 540,235</u>	\$ 1,313,145	<u>\$ 315,381</u>

Community Action

ŀ	Home	Neighborhood		Action				
Ow	/nership	Reinvestment	Total	Foundation of	Healy Heights	s <u>Total</u>		
	Center	Fund Capital	Neighborlmpact	Central Oregon	Partner, LLC	2011	2010	
\$ 1	,854,906	\$ 195,494	\$ 7,685,964	\$ -	\$ -	\$ 7,685,964	\$ 7,835,231	
	378,281	· -	5,152,702	-	-	5,152,702	4,438,504	
	-	<del></del>	2,619,616	-	247,167	2,866,783	2,769,040	
	47,811	-	279,237	-	-	279,237	251,001	
	-	_	-	-	18,346	18,346	-	
	1,374	-	41,691	9,005	716	51,412	177,947	
	27,857		33,973	2,665	7	36,645	29,141	
2	,310,229	195,494	15,813,183	11,670	266,236	16,091,089	15,500,864	
	514,158	-	3,855,109	-	1,996	3,857,105	3,945,967	
	173,180	-	1,685,663		<del>-</del>	1,685,663	1,768,900	
	687,338		5,540,772		1,996	5,542,768	5,714,867	
	4,607	-	24,593	-	~	24,593	26,285	
	41,647	-	197,269	12,092		209,361	315,443	
	-	· _	2,517	-	2,194	4,711	2,402	
	6,343	_	56,388	-	823	57,211	60,560	
	5,811	w	32,217	1,330	1,641	35,188	30,266	
	51,803	-	147,653	_	-	147,653	259,960	
	934	-	48,101	206	6,119	54,426	54,495	
1	,353,253	-	7,851,833	-	-	7,851,833	8,128,886	
	22,938	_	109,626	-	-	109,626	115,259	
	35,203	•	101,825	-	-	101,825	82,210	
	3,593	-	14,352	-	-	14,352	15,809	
	13,990	_	104,538	-	2,828	107,366	101,966	
	4,381	_	40,942	-	-	40,942	65,250	
	3,128	•	16,897	-	-	16,897	20,997	
	•	15,282	15,282	· =	-	15,282	2,083	
	166,244	_			1,561	1,561		
1	<u>,713,875</u>	15,282	8,764,033	13,628	15,166	8,792,827	9,281,871	
2	2,401,2 <u>13</u>	15,282	14,304,805	13,628	17,162	14,335,595	14,996,738	
	(90,984)	180,212	1,508,378	(1,958)	249,074	1,755,494	504,126	
	198,394	-	(546,547)	(510,526)	1,057,073	-	-	
	(7,719)	***	(93,196)	(9,451)	(7,192)	(109,839)	(97,575)	
	99,691	180,212	868,635	(521,935)	1,298,955	1,645,655	406,551	
2	<u>2,123,771</u>	546,125	5,377,598	1,132,123	-	6,509,721	6,103,170	
<u>\$ 2</u>	2,223,462	\$ 726,337	\$ 6,246,233	\$ 610,188	<b>\$ 1,298,955</b>	\$ 8,155,376	\$ 6,509,721	