	Attorney General LISA MADIGAN State of			Form AG990-IL Revised 3/05
PMT #	Charitable Trust Bureau, 100 West Rand			Revised 3/03
-	11th Floor, Chicago, Illinois 60601		13698	06
AMT				II items attached:
	Report for the Fiscal Period:		Copy of	IRS Return
	Beginning 01/01/2015		Audited	Financial Statements
NIT	Beginning01/01/2015	the Illinois		Form IFC
	& Ending 12/31/2015			Annual Report Filing Fee
Endora	al ID# 36-4369806 MO DAY YR	Bureau Fund	\$100.00	Late Report Filing Fee
	ntributions to the organization tax deductible? Yes No	Date Organization was	s created	1: 01/01/2000
		Year-end		
	LEGAL CONTROL TO THE GOLDON GOOD	amounts		
	NAME PARTNERS FOR THE COMMON GOOD	A) ASSETS	A) \$	28,980,235
ADE	MAIL DRESS 1444 EYE STREET, NW	B) LIABILITIES	B) \$	20,192,948
CITY,	STATE WASHINGTON DC		0.000	8,787,287
ZIP	CODE 20005	C) NET ASSETS	C) \$	0,707,207
1. \$	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE		AMOUNT
			7	
[D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS		D) \$	1,433,610
E	E) GOVERNMENT GRANTS & MEMBERSHIP DUES	0 %	E)\$	0
	F) OTHER REVENUES	2 %	F) \$	33,594
	G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100%	G) \$	1,467,204
II. S	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:			
1	H) OPERATING CHARITABLE PROGRAM EXPENSE	65%	H) \$	1,185,231
	I) EDUCATION PROGRAM SERVICE EXPENSE	%	1)\$	
	J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	65%	J) \$	1,185,231
J	1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$			
۱	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	%	K) \$	
	L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	65%	L) \$	1,185,231
1	M) MANAGEMENT AND GENERAL EXPENSE	25%	M) \$	474,867
1	N) FUNDRAISING EXPENSE	10%	N) \$	177,292
(O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100%	O) \$	1,837,390
(SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES: (Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.) PROFESSIONAL FUNDRAISERS:		T	
-	P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100%	P)\$	
	Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$	
,	R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$	
<u> </u>	PROFESSIONAL FUNDRAISING CONSULTANTS:			
	S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$	
IV.	COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE	YEAR:		
	T) NAME, TITLE: JEANNINE JACOKES CEO		T) \$	176,771
-	U) NAME, TITLE: LOUISE TUCK CHIEF L	ENDING OFFICE	U)\$	137,308
-		R OF FINANCE	V) \$	88,013
-	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPEND	ED) CODE CATEGORIES	List o	on back side of instructions CODE
v	V) DESCRIPTION: COMMUNITY DEVELOPMENT		W) #	112
3	X) DESCRIPTION:		X) #	
,	Y) DESCRIPTION:		Y)#	

P.	ARTNERS FOR THE COMMON GOOD 36-4369806 For	m AG990)-IL, P	age 2
IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		x
2.	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR			
	MISAPPROPRIATION OF FUNDS OR ANY FELONY?	2.		X
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSAIN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID	ACTION		
	ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		X
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?	4.		x
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?	5.		X
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.		х
7a	. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	7.		x
7b	. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$;(ii) THE AMOUN' ALLOCATED TO PROGRAM SERVICES \$; (iii) THE AMOUNT ALLOCATED TO MANAGEMEN AND GENERAL \$; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$			
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8.		x
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?			x
10.	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.		х
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS: CITYFIRST BANK OF DC - 1432 U STREET NW, WASHINGTON, DC 200			
	CARVER FEDERAL BANK - 75 WEST 125TH STREET, NEW YORK, NY 10	027		
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: JEANNINE JACOKES 202	2-689	-89	36
AL	L ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS			
AND FRU STA	DER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN BE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PETE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.	STATED OPLE O	ARE F THE	
BE SI	JEANNINE JACOKES PRESIDENT OF TRUSTEE (PRINT NAME) SIGNATURE OF TRUSTEE (PRINT NAME)	2	DAT	4/
1.) F	REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END. MARK REIGER	2	3/2	-2/
	FOR FEES DUE SEE INSTRUCTIONS. TREASURER OF TRUSTEE (PRINT NAME) SIGNATUR		DAT	E

INCOMPLETE ARE SUBJECT TO A

\$100.00 PENALTY.

Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2015 Open to Public Inspection

A	For th	ne 2015 c <u>al</u>	endar year, or tax year beginning	, and ending										
В	Check if	applicable: C	Name of organization			D Employ	er identification number							
	Address	change	PARTNERS FOR THE COMMON GOOD											
\Box	Name ch	20000	Doing business as				1369806							
\vdash			Number and street (or P.O. box if mail is not delivere	ed to street address)	Room/suite		ne number - 689 – 8936							
Ш	Initial ret		1444 EYE STREET, NW City or town, state or province, country, and ZIP or for	201	202	-003-0330								
	Final retu terminate		1 465 204											
	Amende	d return		DC 20005		G Gross re	ceipts\$ 1,467,204							
			Name and address of principal officer:		H(a) Is this	a group return for	subordinates? Yes X No							
	Applicati	ion pending	JEANNINE JACOKES											
			1444 EYE STREET NW,	SUITE 201		Il subordinates in								
			WASHINGTON	DC 20005	If	"No," attach a list	. (see instructions)							
1	Tax-exe	empt status:	X 501(c)(3) 501(c) () ◀((insert no.) 4947(a)(1) or 527										
	Website		W.PCGLOANFUND.ORG		H(c) Group	exemption numb	per D							
ĸ		organization:	X Corporation Trust Association	Other	L Year of formation	2000	M State of legal domicile: IL							
	art I	00000	nmary											
2000			cribe the organization's mission or most s	significant activities:										
	'		DING COMMUNITY DEVELOPME											
JCe		FROVI	JING COMMONITI DIVIDITI											
Activities & Governance		• • • • • • • • • • • • • • • • • • • •												
Ver				and its assertions as disposed of more th	on 25% of its not	accate								
တိ			box ▶ if the organization discontinue				9							
ం ర			voting members of the governing body (F				9							
ties	1		independent voting members of the gove				0							
₹			er of individuals employed in calendar ye				2							
Act	1		er of volunteers (estimate if necessary) .											
	7a	Total unrela	ated business revenue from Part VIII, col	lumn (C), line 12		2000 DE CONTROL DE CON	0							
	b	Net unrelat	ed business taxable income from Form 9	990-T, line 34			0							
						r Year 514,431	Current Year 310,068							
e	8	Contribution	ns and grants (Part VIII, line 1h)											
Revenue	9		ervice revenue (Part VIII, line 2g)			092,643								
è	10		income (Part VIII, column (A), lines 3, 4,			16,063								
Ľ	11		nue (Part VIII, column (A), lines 5, 6d, 8c			3,084								
	12	Total reven	ue – add lines 8 through 11 (must equal	Part VIII, column (A), line 12)	2,0	526,221	1,467,204							
	13	Grants and	similar amounts paid (Part IX, column (A			0								
	14	Benefits pa		. 0										
S	15	Salaries, ot	her compensation, employee benefits (P	Part IX, column (A), lines 5–10)			0							
xpenses	16a	Professiona	ther compensation, employee benefits (P al fundraising fees (Part IX, column (A), li aising expenses (Part IX, column (D), line	line 11e)			0							
bei	b	Total fundra	aising expenses (Part IX, column (D), line	le 25) ▶ 177,292										
Ĕ			nses (Part IX, column (A), lines 11a-11d		1,	375,436	1,837,390							
			nses. Add lines 13–17 (must equal Part I			375,436	1,837,390							
	2000		ess expenses. Subtract line 18 from line			750,785	-370,186							
50		11010110010	oc expenses, carried more men			f Current Year	End of Year							
Net Assets or	20	Total asset	s (Part X, line 16)		30,	596,872	28,980,235							
Ass	21		The second secon		1 77	439,399	20,192,948							
Net	22		or fund balances. Subtract line 21 from I			157,473	8,787,287							
	art II	000000	nature Block											
			rjury, I declare that I have examined this retur	rn, including accompanying schedules and s	tatements, and to t	he best of my k	nowledge and belief, it is							
tr	rue, cor	rect, and com	plete. Declaration of preparer (other than office	icer) is based on all information of which pre	parer has any know	rledge.								
_														
Qi,	gn	Sign	nature of officer			Date	9							
	_		JEANNINE JACOKES	CEO)									
пе	ere		e or print name and title	CE										
_		, ,,	reparer's name	Preparer's signature	Date	e Chec	k if PTIN							
Pai	id		1984 • Ministration of Antistrates			0,100	` □"							
		8	EHMAN, CPA	CLINT LEHMAN, CPA		/03/16 self-e	polyed P00840525 52-1373858							
	eparer	FIIIIS Haille				Firm's EIN	54-13/3056							
US	e Only	'	100 LAKEFOREST				201 040 0005							
		Firm's addre				Phone no.	301-948-9825							
Ma	y the II	RS discuss	this return with the preparer shown above	/e? (see instructions)			X Yes No							

Pa	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: DUR MISSION IS TO ADVANCE ECONOMIC JUSTICE AND OPPORTUNITY BY PAR	TNERTNG
TAT	VITH ORGANIZATIONS WHO PROVIDE ACCESS TO CAPITAL FOR LOW INCOME P	EOPLE AND
	POMMINITEES	
_	, OIMIONI I I II II I	
2	Did the organization undertake any significant program services during the year which were not listed on the	
-	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,110,257 including grants of \$) (Revenue \$	1,140,465)
	PARTNERS FOR THE COMMON GOOD PROVIDES AN EFFECTIVE AND FISCALLY P	
M	MECHANISM THROUGH WHICH INSTITUTIONAL INVESTORS CAN SUPPORT COMMU	NITY
D	DEVELOPMENT NATIONWIDE AND ABROAD.	
	(Code:) (Expenses \$ 74,974 including grants of \$) (Revenue \$)
		COMMUNITY
C	CAPNEXUS - AN ONLINE TOOL FOR CDFIS, INVESTORS, AND OTHERS IN THE	COMMUNITY
C	CAPNEXUS - AN ONLINE TOOL FOR CDFIS, INVESTORS, AND OTHERS IN THE DEVELOPMENT FINANCE FIELD TO CONNECT MISSION FOCUSED CAPITAL WITH	COMMUNITY
C D	CAPNEXUS - AN ONLINE TOOL FOR CDFIS, INVESTORS, AND OTHERS IN THE	COMMUNITY
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,	In the constitution described in section E04/s/(2) or 4047/s/(4) /shb at the section 504/s/(2) 2 "		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	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, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	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	
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	44-		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X

Form 990 (2015) PARTNERS FOR THE COMMON GOOD
Part IV Checklist of Required Schedules (continued)

20000000			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			7,5
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			37
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			37
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	37	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			37
	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,			v
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			x
	complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	_	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	24	x	
.=	or IV, and Part V, line 1	34	Λ	x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	25h		
00	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		x
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		x
20	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31	 	42
38		38	x	
	19? Note. All Form 990 filers are required to complete Schedule O.	1 00		

Pa	Statements Regarding Other IRS Filings and Tax Compliance										
	Check if Schedule O contains a response or note to any line in this Part V			\sqcup							
	1 1	[0000000000	Yes	No							
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 9										
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0										
С	Did the organization comply with backup withholding rules for reportable payments to vendors and										
	reportable gaming (gambling) winnings to prize winners?	1c	X								
2a											
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0										
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?										
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority										
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial										
	account)?	4a	**********	X							
b	If "Yes," enter the name of the foreign country: ▶										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts										
	(FBAR).	_		37							
5a		100000		X							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X							
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			x							
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a									
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ch.									
_	gifts were not tax deductible?	6b									
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods										
а		7a		X							
h	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b									
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was										
·	required to file Form 8282?	7c		X							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d										
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	000000000	X							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g									
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the										
	sponsoring organization have excess business holdings at any time during the year?	8									
9	Sponsoring organizations maintaining donor advised funds.										
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12										
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities										
11	Section 501(c)(12) organizations. Enter:										
а	Gross income from members or shareholders										
b	Gross income from other sources (Do not net amounts due or paid to other sources										
	against amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a									
а	Is the organization licensed to issue qualified health plans in more than one state?	13d									
L	Note. See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans										
_	122										
c l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b									

Part VI

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

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

Section A. Governing Body and Management

<u> </u>	tion A. Governing Body and Wanagement									
	Enter the number of voting members of the governing body at the end of the tax year 1a 9		Yes	No						
1a	Enter the manufact of voting manufact of the governing body at the one of the tax year.	-								
	If there are material differences in voting rights among members of the governing body, or									
	if the governing body delegated broad authority to an executive committee or similar									
	committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b 9									
ь	Enter the number of young members modes at time 14, above, who are made made in	-								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2	***********	X						
•	any other officer, director, trustee, or key employee?	2		22						
3	ne organization delegate control over management duties customarily performed by or under the direct									
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X						
6	Did the organization have members or stockholders?	О								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			v						
	one or more members of the governing body?	7a		_X_						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	_,		v						
_	stockholders, or persons other than the governing body?	7b	*********	_X_						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	•	~~~	**********						
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			v						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ide.)	V	N.						
40	Dild.	40-	Yes	No X						
10a	Did the organization have local chapters, branches, or affiliates?	10a								
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406								
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	IIa	<u> </u>							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	42-	X							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	x							
40	describe in Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	14	X							
14	Did the organization have a written document retention and destruction policy?	14								
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?	450		X						
a	The organization's CEO, Executive Director, or top management official	15a 15b		X						
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130								
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement									
16a		16a	***********	X						
h	with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	10a		<u> </u>						
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the									
	organization's exempt status with respect to such arrangements?	16b	**********	*********						
500	tion C. Disclosure	100								
	List the state of the which are set of this Feet COO.									
17 18	List the states with which a copy of this Form 990 is required to be filed IL Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website Word under these available. Check all that apply. Other (explain in Schedule O)									
10	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and									
19	financial statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records:									
20 T.D	RITA MIMMS 1444 EYE STREET NW, SUITE 201									
	#10 - 0.00 1 - 0.00	2-68	9 - 8	936						

36-4369806

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	offi	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			s both a r/trustee	n e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) KEVIN MCQUEEN										
BOARD CHAIR	2.00	x		x				0	0	0
(2) MARK REIGER										
	2.00	3,		37				_		0
TREASURER (3) SR MARGUERITE O	0.00	Х		X				0	0	0
(3) SR MARGUERITE O	2.00									
SECRETARY	0.00	x		x				0	0	0
(4) SR KATHERINE FEI										
	2.00									
DIRECTOR	0.00	X						0	0	0
(5) JOHN HAMILTON										
DIRECTOR	2.00	x						o	0	0
(6) ROBERT MCGILL										
	2.00									
DIRECTOR	0.00	X						0	0	0
(7) MEGAN TEARE										
	2.00	32							0	0
DIRECTOR (8) KAREN KOLLIAS	0.00	Х				\vdash	-	0	U	0
(6) KAKEN KULLIAS	2.00									
DIRECTOR	0.00	х						0	0	0
(9) JIE WANG						\top				
	2.00									
DIRECTOR	0.00	X						0	0	0
(10) JEANNINE JACOKES	The second court sport of									
	40.00			.,					176 771	10 000
CEO (11) LOUISE TUCK	0.00			X			\dashv	0	176,771	18,900
(II) HOULDE TOCK	40.00									
CHIEF LENDING OFFICE	0.00					x		0	137,308	0
DAA										Form 990 (2015)

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	ind Highest Compensated	Employees (continued)	
(A) Name and title		(B) Average hours per week (list any hours for	bo of	x, unle ficer a	Position of check more than one nless person is both at				(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	, , , , , , , , , , , , , , , , , , , ,	organization and related organizations
1b c	Sub-total							▶▶		314,079	18,900
0.00	Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from	cluding but not l	imite	ed to					re) who received more than	314,079 \$100,000 of	18,900
3	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line organization and related organization	ormer officer, dir complete Schere e 1a, is the sum	ecto dule of re	r, or J for	suc able	h ind	dividu pens	ial satio	on and other compensation	from the	yes No
5	individual Did any person listed on line 1 for services rendered to the or	a receive or acc	rue	 com	ens	 atior	fror	 n an	ny unrelated organization or	· individual	
	ion B. Independent Contracto									W	
1	Complete this table for your five compensation from the organi	zation. Report c	omp	ensa	tion	for t	he ca	alend	dar year ending with or with	in the organization's tax ye	ear.
	Name and	(A) business address							Descrip	(B) tion of services	(C) Compensation
2	Total number of independent or received more than \$100,000								se listed above) who	0	

		Check if Schedule O contains a respor	nse or note to any line	in this Part VIII		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a				
Contributions, Giffs, Grants and Other Similar Amounts		Membership dues 1b				
Am Am		Fundraising events 1c				
ar		Related organizations 1d				
n,		Government grants (contributions) 1e				
rs		All other contributions, gifts, grants,				
t pa		and similar amounts not included above 1f 310,	068			
0	g	Noncash contributions included in lines 1a-1f: \$ 35,	568			
3 E	h	Total. Add lines 1a-1f	▶ 310,068			
Program Service Revenue		Busn. C	Code			
ver	2a	FEES 525	990 1,123,542	1,123,542		
8	b					
<u> </u>	С					
Ser	d					
all	е					
. g	f	All other program service revenue				
مة ا	g	Total. Add lines 2a–2f	▶ 1,123,542			ı
	3	Investment income (including dividends, interest,				200720
		and other similar amounts)	16,671			16,671
	4	Income from investment of tax-exempt bond proceeds	s >			
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	b	Less: rental exps.				
	С	Rental inc. or (loss)				
		Net rental income or (loss)	>			
	/a	Gross amount from sales of assets (i) Securities (ii) Other				
		other than inventory				
	b	Less: cost or other				
		basis & sales exps.				
		Gain or (loss)				
	d	Net gain or (loss)	>			
e l	8a	Gross income from fundraising events				
en		(not including \$				
Ş		of contributions reported on line 1c).				
e		See Part IV, line 18				
Other Revenue		Less: direct expenses b				
		Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
		Less: direct expenses b				
		Net income or (loss) from gaming activities				
1	0a	Gross sales of inventory, less				
		returns and allowances a				
		Less: cost of goods sold b				
-	С	Net income or (loss) from sales of inventory	P			
-	_	Miscellaneous Revenue Busn. C		16 000		
1	_	OTHER REVENUE	16,923	16,923		
	b					
	C	All other revenue				
		All other revenue	▶ 16,923			
	e	Total. Add lines 11a–11d Total revenue. See instructions.	1,467,204		0	16,671

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Program service (A) Total expenses Do not include amounts reported on lines 6b, Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees): 453,576 265,300 136,929 855,805 a Management 50,932 12,826 63,758 b Legal 19,250 19,250 Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column 62,842 28,121 28,316 119,279 (A) amount, list line 11g expenses on Schedule O.) 2,800 2,800 Advertising and promotion 12 2,949 44,546 6,886 34,711 Office expenses 13 Information technology 14 Royalties 15 67,074 67,074 16 Occupancy 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 49,580 16,971 23,511 9,098 Conferences, conventions, and meetings 19 441,213 441,213 20 Payments to affiliates 21 16,345 43,883 27,538 Depreciation, depletion, and amortization 22 23 Insurance Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) LOAN LOSS EXPENSE 76,275 76,275 28,460 25,977 2,483 DUES AND SUBSCRIPTIONS 11,289 11,289 LOAN DISTRIBUTION FEE 6,300 6,300 STAFF DEVELOPMENT 7,878 5,432 2,446 e All other expenses 177,292 1,837,390 474,867 1,185,231 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) .

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X. (B) End of year Beginning of year 7,319,881 8,780,427 Cash—non-interest bearing 3,942,290 2 2,623,912 Savings and temporary cash investments 2 334,590 Pledges and grants receivable, net 99,205 36,935 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 17,177,606 18,827,287 Notes and loans receivable, net Inventories for sale or use 23,328 13,154 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 277,195 other basis. Complete Part VI of Schedule D _______10a b Less: accumulated depreciation 10b 89,296 187,899 86,498 Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 12 197,384 13 13 Investments—program-related. See Part IV, line 11 14 14 Intangible assets 17,814 7,500 Other assets. See Part IV, line 11 15 15 28,980,235 Total assets. Add lines 1 through 15 (must equal line 34) 30,596,872 16 16 237,051 337,327 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 21,009,335 19,663,652 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 193,013 191,969 21,439,399 20,192,948 26 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 6,660,717 8,787,287 27 Unrestricted net assets 2,496,756 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances _____

Total liabilities and net assets/fund balances

Form 990 (2015)

8,787,287

28,980,235

9,157,473

30,596,872

Schedule O.

If the organization changed either its oversight process or selection process during the tax year, explain in

the Single Audit Act and OMB Circular A-133?

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

Form 990 (2015)

X

SCHEDULE A (Form 990 or 990-EZ) **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

gov/form990. Inspection
Employer identification number

		PARTNERS FOR	THE COMMON GOO	D		36-436	9806	
P	art I Reas	on for Public Charity	Status (All organizations	must co	omplete	this part.) See instruction	ns.	
The	organization is not	a private foundation becaus	e it is: (For lines 1 through 11, o	check only	y one box	.)		
1	A church, co	nvention of churches, or ass	ociation of churches described	in sectio i	170(b)(1)(A)(i).		
2	A school des	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 9	990-EZ).)			
3	A hospital or	a cooperative hospital servi	ce organization described in sec	ction 170	(b)(1)(A)(iii).		
4	A medical re	search organization operated	d in conjunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,	
	city, and stat	te:						
5	An organizat	ion operated for the benefit of	of a college or university owned	or operat	ed by a go	overnmental unit described in		
	section 170	(b)(1)(A)(iv). (Complete Part	II.)					
6	A federal, sta	ate, or local government or g	overnmental unit described in s	ection 17	'0(b)(1)(A)(v).		
7	An organizat	ion that normally receives a	substantial part of its support fro	om a gove	ernmental	unit or from the general public		
	described in	section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8	A community	trust described in section 1	170(b)(1)(A)(vi). (Complete Part	t II.)				
9	X An organizat	ion that normally receives: (1) more than 33 1/3% of its supp	port from	contribution	ons, membership fees, and gro	oss	
	receipts from	activities related to its exen	npt functions—subject to certair	exceptio	ns, and (2	2) no more than 33 1/3% of its		
	support from	gross investment income ar	nd unrelated business taxable ir	ncome (le	ss section	511 tax) from businesses		
	acquired by t	the organization after June 3	0, 1975. See section 509(a)(2)	. (Comple	te Part III	.)		
10	An organizat	ion organized and operated	exclusively to test for public safe	ety. See s	ection 50	09(a)(4).		
11	An organizat	ion organized and operated	exclusively for the benefit of, to	perform the	he functio	ns of, or to carry out the purpo	ses of	
			ions described in section 509(a				Check	
	the box in lin	es 11a through 11d that des	cribes the type of supporting org	ganization	and com	plete lines 11e, 11f, and 11g.		
a			ed, supervised, or controlled by					
		, , , ,	o regularly appoint or elect a ma	ajority of t	the directo	ors or trustees of the supportin	9	
		You must complete Part I'						
b			vised or controlled in connection					
		1 TO	organization vested in the same	e persons	that cont	rol or manage the supported		
		(s). You must complete Par						
С			orting organization operated in					
			tions). You must complete Par					
d			supporting organization operate					
			ganization generally must satisfy					
_			t complete Part IV, Sections A					
е			d a written determination from t			ype i, Type ii, Type iii		
f		r of supported organizations	nctionally integrated supporting	organizat	1011.		Ī	
g		wing information about the su	upported organization(s).				ι	
	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount	of
•	organization	(,	(described on lines 1–9		ur governing	support (see	other support	
			above (see instructions))	docu	ment?	instructions)	instructions	s)
				Yes	No			
(A)								
B)								
C)								
D)								
E)								
r _{ot} ,	ı.							

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				3		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			ā			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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.						
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructions)				12	2
13	First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax ye	ar as a section 501	(c)(3)	
	organization, check this box and stop her	e					
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2015 (line 6	, column (f) divided	d by line 11, colum	n (f))		14	
15	Public support percentage from 2014 Scho	edule A, Part II, line	e 14			1	5 %
16a	33 1/3% support test—2015. If the organ	ization did not che	ck the box on line	13, and line 14 is	33 1/3% or more, o	check this	
	box and stop here . The organization quali						▶ ∐
b	33 1/3% support test—2014. If the organ						. —
	check this box and stop here . The organiz						▶ ⊔
17a	10%-facts-and-circumstances test—201						
10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in							
	Part VI how the organization meets the "fa organization						▶ □
b	10%-facts-and-circumstances test—201	4. If the organization	on did not check a	box on line 13, 16	6a, 16b, or 17a, an	d line	
	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization me			•	1.5		. —
	supported organization						▶ ∐
18.	Private foundation. If the organization did	d not check a box of	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee	
	instructions						▶ ∐

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	535,998	1,623,776	1,178,536	1,514,431	310,068	5,162,809
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	809,788	1,013,913	1,171,981	1,092,643	1,123,542	5,211,867
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	1,345,786	2,637,689	2,350,517	2,607,074	1,433,610	10,374,676
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						10,374,676
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	1,345,786	2,637,689	2,350,517	2,607,074	1,433,610	10,374,676
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	105,058	32,531	26,632	16,063	16,671	196,955
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	105,058	32,531	26,632	16,063	16,671	196,955
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				3,084	16,923	20,007
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,450,844	2,670,220	2,377,149	2,626,221	1,467,204	10,591,638
14	First five years. If the Form 990 is for the organization, check this box and stop her					(c)(3)	•
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2015 (line 8			n (f))		15	97.95%
16	Public support percentage from 2014 Sch						97.73%
_	tion D. Computation of Investme						
17	Investment income percentage for 2015 (I	ine 10c, column (f)	divided by line 13,	column (f))		17	2 %
18	Investment income percentage from 2014	Schedule A, Part II	I, line 17			18	2 %
19a	33 1/3% support tests—2015. If the orga 17 is not more than 33 1/3%, check this be	nization did not che	ck the box on line	14, and line 15 is	more than 33 1/3%	%, and line	▶ X
b	33 1/3% support tests—2014. If the orga						
	line 18 is not more than 33 1/3%, check th						▶ □
20	Private foundation. If the organization did						

Schedule A (Form 990 or 990-EZ) 2015 PARTNERS FOR THE COMMON GOOD

Part IV

Supporting Organizations

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

Section A. All Supporting Organizations

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

- 1	Yes	No
1	************************	**********

2		

3a		
Ja	*************	
3b		
30		
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4a		
**********	************	***************************************
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4c		
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7 8 9a 9b		
7 8 9a		
7 8 9a 9b		
7 8 9a 9b 9c		
7 8 9a 9b 9c		
7 8 9a 9b 9c		

	t W Supporting Organizations (continued)			
************			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
-	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	>>>>>>>>	>00000000000000000000000000000000000000
Sect	ion C. Type II Supporting Organizations			
0000	on or type it experimed enganizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	***************	***********
Sect	ion D. All Type III Supporting Organizations			
0000	on Bry in Type in eappering enganizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	***************************************	202002000000000000000000000000000000000
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	***************************************	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		*************
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization satisfied the restricted restricted in 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization is the parent of each of its supported organizations. Somplete line organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)	ions)		
·	The organization supported a governmental entity. Describe in Fair vision you supported a government entity (see instruction			
2 /	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
u	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
b	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
		2b		
•	activities but for the organization's involvement.	20		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3a		
L	trustees of each of the supported organizations? Provide details in Part VI .	od .		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or to supported organizations: If Tes, describe in Fait vi the fole played by the organization in this regard.	LOD		

	_	_	_	_	_	_
4	3	6	O	Q	n	6

Schedu	ile A (Form 990 or 990-EZ) 2015 PARINERS FOR THE COMMON GOO		30-4303	Page 6
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov	. 20, 1	970. See instructions. All	
	other Type III non-functionally integrated supporting organizations must complete Section	ns A th	rough E.	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
coll	ection of gross income or for management, conservation, or			
ma	ntenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
inst	ructions for short tax year or assets held for part of year):			
	a Average monthly value of securities	1a		
	b Average monthly cash balances	1b		
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see	instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
em	ergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integrated	Туре	III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Page 7

Par	Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)						
Secti	Section D - Distributions								
1	Amounts paid to supported organizations to accomplish exempt purpos								
2	Amounts paid to perform activity that directly furthers exempt purposes								
	organizations, in excess of income from activity								
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations							
4	Amounts paid to acquire exempt-use assets								
5	Qualified set-aside amounts (prior IRS approval required)								
6	Other distributions (describe in Part VI). See instructions.								
7	Total annual distributions. Add lines 1 through 6.								
8	Distributions to attentive supported organizations to which the organizations	tion is responsive							
	(provide details in Part VI). See instructions.								
9	Distributable amount for 2015 from Section C, line 6								
10	Line 8 amount divided by Line 9 amount								
		(i)	(ii)	(iii)					
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable					
			Pre-2015	Amount for 2015					
1_	Distributable amount for 2015 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2015								
	(reasonable cause required-see instructions)								
3	Excess distributions carryover, if any, to 2015:								
a									
b									
c									
	From 2013								
	From 2014								
	Total of lines 3a through e								
	Applied to underdistributions of prior years								
<u>h</u>	Applied to 2015 distributable amount								
i	Carryover from 2010 not applied (see instructions)								
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.								
4	Distributions for 2015 from Section								
	D, line 7: \$								
	Applied to underdistributions of prior years								
	Applied to 2015 distributable amount								
488.5	Remainder. Subtract lines 4a and 4b from 4.								
5	Remaining underdistributions for years prior to 2015, if								
	any. Subtract lines 3g and 4a from line 2 (if amount								
	greater than zero, see instructions).								
6	Remaining underdistributions for 2015. Subtract lines 3h								
	and 4b from line 1 (if amount greater than zero, see								
	instructions).								
7	Excess distributions carryover to 2016. Add lines 3j								
	and 4c.								
8	Breakdown of line 7:								
a									
b	Evenes from 2012								
	Excess from 2013								
	Excess from 2014								
<u>e</u>	Excess from 2015			Form 990 or 990-E7) 2015					

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (F	III, line 12; Pa B, lines 1 and 3a and 3b; P	al Informatio art IV, Section d 2; Part IV, Se art V, line 1; P	n. Provide the A, lines 1, 2, 3 ection C, line 1	explana b, 3c, 4 ; Part IV B, line 1	tions requir b, 4c, 5a, 6 ′, Section D e; Part V, S	red by Pa 5, 9a, 9b, 0, lines 2 Section D	9c, 11a, 11 and 3; Part), lines 5, 6,	36-4369806; Part II, line 17a ob, and 11c; Part IV, IV, Section E, line and 8; and Part V, ructions.)	, Section s 1c, 2a, 2b,
PART I	II, LINE	12 - OTH	ER INCOME	DET?	AIL				
					\$	20,0	07		
*									
,									

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047 Open to Public

Employer identification number

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

Inspection

P	ARTNERS FOR THE COMMON GOOD		36-4369806
Pa	irt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or A	Accounts.
000000000	Complete if the organization answered "Yes" on F	Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised	
•	funds are the organization's property, subject to the organization's excl		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in		
U	only for charitable purposes and not for the benefit of the donor or donor		
	conferring impermissible private benefit?		Yes No
** • • • • • • • • • • • • • • • • • •	ut II Conservation Easements.		
	Complete if the organization answered "Yes" on F	Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the organization (check		
1	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically impo	ortant land area
		Preservation of a certified historic	
	Protection of natural habitat Preservation of open space	Freservation of a certified historic	Structure
•		nuction contribution in the form of a conce	nution
2	Complete lines 2a through 2d if the organization held a qualified conservation on the last day of the tax year.	rvation contribution in the form of a conse	Held at the End of the Tax Year

a	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure incl		2c
d		06, and not on a	
			2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organization	tion during the
	tax year ▶		
4	Number of states where property subject to conservation easement is I		
5	Does the organization have a written policy regarding the periodic moni		
	violations, and enforcement of the conservation easements it holds? \dots		
6	Staff and volunteer hours devoted to monitoring, inspecting, handling o	f violations, and enforcing conservation e	asements during the year
			
7	Amount of expenses incurred in monitoring, inspecting, handling of viol	ations, and enforcing conservation easen	nents during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above satisfy t		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easeme		
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that d	escribes the
*********	organization's accounting for conservation easements.		2
Pa	organizations Maintaining Collections of Art,		Similar Assets.
	Complete if the organization answered "Yes" on F		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	Particular and Table	
	works of art, historical treasures, or other similar assets held for public		erance of
	public service, provide, in Part XIII, the text of the footnote to its financia		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of
	public service, provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or		vide the
	following amounts required to be reported under SFAS 116 (ASC 958)		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		🕨 \$

Sche	dule D (Form 990) 2015 PARINERS	FOR THE CO	DIMION GOOD		20-42036	,00		raye Z
Pa	rt III Organizations Maintainir	ng Collections of	Art, Historical	Treasures,	or Other Sim	ilar Ass	ets (continue	d)
3	Using the organization's acquisition, acces collection items (check all that apply):	sion, and other record	s, check any of the f	ollowing that a	are a significant us	e of its		
а	Public exhibition	d	Loan or exchange pr	rograms				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's	collections and explai	n how they further the	e organization	's exempt purpose	in Part		
	XIII.			3				
5	During the year, did the organization solicit	or receive donations	of art, historical treas	ures, or other	similar			
·	assets to be sold to raise funds rather than						Yes	No
Pa	rt IV Escrow and Custodial A	rrangements.						
	Complete if the organization	on answered "Yes	" on Form 990, P	art IV, line	9, or reported	an amou	int on Form	
	990, Part X, line 21.							
1a	Is the organization an agent, trustee, custo	dian or other intermed	liary for contributions	or other asse	ets not			_
	included on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	llowing table:					
		-					Amount	
С	Beginning balance					1c		
d	Additions during the year							
	Distributions during the year							
f								
	Ending balance	Form 000 Bort V line		otodial assau	nt liability?		Yes	No
								HINO
	If "Yes," explain the arrangement in Part XI to Endowment Funds.	II. Check here if the e	xplanation has been	provided on P	'art XIII			
···Pa	***************************************	on analysis of "Vac	" an Farm 000 D	last IV lina	10			
_	Complete if the organization							
		(a) Current year	(b) Prior year	(c) Two ye	ars back (d) If	ree years ba	ck (e) Four ye	ars back
	Beginning of year balance			81				
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
	End of year balance							
າ	Provide the estimated percentage of the cu	rrent vear end haland	e (line 1g. column (a)) held as:				
a	•		e (iiiie 1g, coldiiiii (a)) Hold as.				
	Permanent endowment	%						
	Permanent endowment ▶ % Temporarily restricted endowment ▶	0/						
C								
_	The percentages on lines 2a, 2b, and 2c sh	•						
3a	Are there endowment funds not in the poss	session of the organiza	ation that are held an	d administere	d for the		<u></u>	Τ
	organization by:							es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organi	izations listed as requ	ired on Schedule R?				3b	
	Describe in Part XIII the intended uses of the		owment funds.					
Pa	rt VI Land, Buildings, and Equ							
	Complete if the organization	on answered "Yes	" on Form 990, P	art IV, line	11a. See Form	990, Pa	art X, line 10.	
	Description of property	(a) Cost or other	pasis (b) Cost o	r other basis	(c) Accumulate	ed	(d) Book valu	ie
<u></u>		(investment)	(0	ther)	depreciation			<u> </u>
1a	Land							
b	Buildings							
c	Leasehold improvements							
	Equipment			277,195	187	,899	89	,296
				- , , , _ , _ ,	137	, 555		, 2 5 0
	Other		t X column (R) line	10c)	l	•	Ω Ω	,296
· Juai	iiioo ia anougii io. (Oolaliiii (a) Illusi	. oquai i oiiii aao, i ai	., ocidini (D), iiile					, 20

Part VII	Investments—Other Securities.	E 000 D 10/15	Adla Oca Farra 000 Part V line 40
	Complete if the organization answered "Yes" or		de Maria Carrello de Maria de
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial	derivatives		
	eld equity interests		
(3) Other			
(C)			
(D)			
(E)			
(C)			
/ 山 \			
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes" or	n Form 990 Part IV line	11c See Form 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(a) Description of investment	(b) Book value	Cost or end-of-year market value
(4)			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.
80 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	(I) I I I COO D I V I (D) II I I I		
***************************************	n (b) must equal Form 990, Part X, col. (B) line 15.)		P
Part X	Other Liabilities.	5 000 D (N / II	44 446 0 E 000 D 1V
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes		
(2) ACCRU	JED INTEREST PAYABLE	191,969	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
		-	
(9)	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶	191,969	
i otai. (Columi	II (b) IIIust equal Foliii 990, Faft ∧, COL (b) IIIie ∠5.) ▶	1 121,202	

Schedule D (Fo	orm 990) 2015	PARTNERS	FOR THI	E COMMON	GOOD	36-4369806	Page 5
Part XIII	Supplemen	PARTNERS tal Information	(continued	l)			
•							
	,						

SCHEDULE J (Form 990) **Compensation Information**

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

PARTNERS FOR THE COMMON GOOD

Employer identification number 36-4369806

	Questions Regarding Compensation		Yes	No
10	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form		162	NO
ıa	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment		*******	
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	**********	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
	7 Application of Salar of Sala			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
7	organization or a related organization:			
а		4a		X
b		4b		X
c		4c		X
C	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	-,0		
	if these to any of lines 4a-c, list the persons and provide the applicable amounts for each item in that in.			
	Only position F04/s\/2\\ F04/s\/4\\ and F04/s\/20\\ arranimations must complete lines F. 0			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	100000000000000000000000000000000000000		
5	E			
-	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:	_		v
а	compensation contingent on the revenues of: The organization?	<u>5a</u>		X
а	compensation contingent on the revenues of: The organization? Any related organization?	5a 5b		X
а	compensation contingent on the revenues of: The organization?	1 2/2/20		
а	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III.	1 2/2/20		
а	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	1 2/2/20		
a b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:	1 2/2/20		Х
a b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization?	5b 6a		X
a b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization?	5b		Х
a b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:	5b 6a		X
a b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization?	5b 6a		X
a b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	5b 6a		X X X
а b 6 а b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	5b 6a		X
а b 6 а b	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III.	5b 6a 6b		X X X
a b 6 a b 7	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III	5b 6a 6b		X X X
a b 6 a b 7	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	5b 6a 6b		X X X
a b 6 a b 7	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	5b 6a 6b		X X X
a b 6 a b 7	compensation contingent on the revenues of: The organization? Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe	5b 6a 6b		X X X

Part II

Page 2

PARTNERS FOR THE COMMON GOOD Schedule J (Form 990) 2015

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed 36-4369806

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

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

	(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B) reported
(A) Name and Title	(I) base compensation	(II) Bonus & incentive compensation	(III) Otner reportable compensation	compensation	Oelielis	(a)-(i)(a)	as deferred on prior Form 990
JEANNINE JACOKES		0	0	0	0	0	0
1 CEO	(ii) 176,771		0	18,900	0	195,671	0
2	(u)						
	(II) (t)						
4	(ii)						
	(ti)						
	(tt)						
7	(tt)						
80	(ii)						
6	(i) (ii)						
	(ii)						
	(ii)						
12	(ii)						
13	(II)						
14	(I)						
15	(II)						
16	(II)						

Schedule J (Form 990) 2015

PARTNERS FOR THE COMMON GOOD Supplemental Information Schedule J (Form 990) 2015 Part III

36-4369806

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

- OTHER ADDITIONAL INFORMATION PART III

for any additional information.

- CHRISTIAN BROTHERS INVESTMENT UNRELATED ORGANIZATION COMPENSATION SERVICES PROVIDED WAGE AND BENEFIT COMPENSATION IN THE AMOUNT OF \$195,671

AND \$137,308 TO JEANNINE JACOKES, CHIEF EXECUTIVE OFFICER AND LOUISE TUCK,

CHIEF LENDING AND CREDIT OFFICER, RESPECTIVELY, FOR THE SERVICES PROVIDED

THE PARTNERS FOR COMMON GOOD THOSE POSITIONS FOR N ACTING WHILE

Schedule J (Form 990) 2015

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.

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

OMB No. 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

PARTNERS FOR THE COMMON GOOD

Employer identification number

Park I Types of Property			FOR	THE COMMON	GOOD	36-	4369806
Crisical Pumber of controlutions or service reported on service controlutions or service reported on Perm 900 Pert VIII. live 1g	Pa	art I Types of Property					
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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,			amount in	column (c) for a type	of property for which column /	a) is chacked	
describe in Part II.	55		annount III	column (c) for a type	or property for willon column (a) is differed,	

Schedule M (Form 9	990) (2015)	PARTI	NERS I	FOR I	CHE	COMMO	ON G	OOD		36	-4369	806		Page	2
Part II	the organ	nental In nization is	formations reporting	on. Pro ng in Pa	vide th art I, c	ne infori olumn (matior (b), the	n requir e numb	er of co	Part I, lin Intribution	es 30b, ons, the	32b, and	33, and of items	whether received,	
	or a com	bination	of both.	Also co	mplet	e this p	art for	any ac	lditional	informa	ation.				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2015

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization

Employer identification number

	PARTNERS FOR THE COMMON GOOD	36-4369806
	FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO F	REVIEW FORM 990
•	THE DIRECTOR OF FINANCE WORKS WITH THE ACCOUNTING FIRM TO	× 200 0
•	ONCE IT IS COMPLETED BY THE ACCOUNTING FIRM, IT IS RETURN	NED TO THE DIRECTOR
•	OF FINANCE AND THE CHIEF EXECUTIVE OFFICER FOR REVIEW. THE	IE RETURN IS THEN
•	SUBMITTED BY MANAGEMENT TO THE AUDIT/FINANCE SUB-COMMITTE	
•	DIRECTORS FOR APPROVAL. ONCE ALL REVIEW HAS BEEN COMPLETE	
•	EXECUTIVE OFFICER SIGNS THE RETURN AND SUBMITS TO THE IRS	3.
	FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS PO	DLICY
•	THE POLICY IS MAINTAINED VIA THE GENERAL BEHAVIOR OF EMPI	LOYEES, AND THE
	ONGOING RELATIONSHIP BETWEEN THE CEO AND STAFF. OPEN COMM	MUNICATION IS
	ENCOURAGED. A SPECIFIC DISCUSSION WOULD OCCUR IN THE EVEN	T OF A SITUATION
	REQUIRING POLICY ENFORCEMENT.	
	FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSU	JRE EXPLANATION
	AVAILABLE UPON REQUEST FOR BENEFIT OF INVESTORS.	

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule R (Form 990) 2015 Section 512(b)(13) controlled entity? (f) Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. 36-4369806 (f) Direct controlling entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income (d) Exempt Code section (c) Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (b) Primary activity (b) Primary activity PARTNERS FOR THE COMMON GOOD For Paperwork Reduction Act Notice, see the Instructions for Form 990. $_{\mbox{\scriptsize DAA}}$ (a) (abme, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization Parti Part Ξ (2) (2) (3) 4 Ξ (5)(3) 4 (2)

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Schedule R (Form 990) 2015 PARTINERS FOR THE COMMON GOOD

Page 2

36-4369806

Schedule R (Form 990) 2015 (i) Section 512(b)(13) controlled entity? % Percentage × ownership 3 Yes managing Yes No partner? 9 Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Percentage ownership Ξ amount in box 20 of Schedule K-1 Code V—UBI (Form 1065) end-of-year assets Share of (h) Dispro-portionate Yes No (g) alloc.? (g) Share of end-ofyear assets Share of total income (f) Share of total (C corp, S corp, Type of entity income or trust) U (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d)
Direct controlling N/A (d)
Direct controlling foreign country) Legal domicile (state or Z (state or (c) Legal domicile foreign country) Primary activity PAYROLL Primary activity NY 10017 Name, address, and EIN of related organization Name, address, and EIN of related organization (1) CHRISTIAN BROTHERS 777 THIRD AVENUE 36-3149302 NEW YORK PartIII Part IV DAA 4 Ξ (7 3 8 3 4

PARTNERS FOR THE COMMON GOOD

Schedule R (Form 990) 2015

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

36-4369806

× Yes

× × MMM

× × ×

×

× × × ×

× × Method of determining amount involved 1 1p 19 19 7 9 19 1_b 1e 19 무 18 m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Reimbursement paid by related organization(s) for expenses Lease of facilities, equipment, or other assets to related organization(s) ਉ d Loans or loan guarantees to or for related organization(s) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. 855,805 12,500 Amount involved 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? type (a-s) Д Z I Performance of services or membership or fundraising solicitations for related organization(s) a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity CHRISTIAN BROTHERS INVESTMENT SERV CHRISTIAN BROTHERS INVESTMENT SERV Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. k Lease of facilities, equipment, or other assets from related organization(s) c Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property from related organization(s) Reimbursement paid to related organization(s) for expenses Name of related organization r Other transfer of cash or property to related organization(s) b Gift, grant, or capital contribution to related organization(s) Sharing of paid employees with related organization(s) e Loans or loan guarantees by related organization(s) Exchange of assets with related organization(s) Purchase of assets from related organization(s) Sale of assets to related organization(s) Dividends from related organization(s) 0 0 (2) Ξ $\overline{2}$ 3 3

9

Schedule R (Form 990) 2015

Part VI

Page 4

36-4369806

Schedule R (Form 990) 2015 PARTNERS FOR THE COMMON GOOD

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

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

	The second of th				Sign	Displopol noriate		General or	_
	(s)		section 501(c)(3) organizations?	total income	end-of-year assets	allocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ownership
	8	~	Yes No	T.		Yes No	_	Yes	_S
(1)									
(z)									
(3)									
(4)									
(5)									-
(9)									
					-				
(7)									
			2						
(8)									
(6)									
(10)									
(11)									

Schedule R (F	orm 990) 2015	PARTNERS	FOR	\mathtt{THE}	COMMON GO	OD	36-4369806 Page	: 5
Part VII	Suppleme	ntal Information	1					
*************	Provide add	ditional information	on for r	eenon	ses to allestion	s on Schedule R	(see instructions).	
	r Tovide add	altional information	011 101 1	Сэроп	ses to question	3 OH Ochcadic IX	(See mendenone).	
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FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

Years Ended December 31, 2015 and 2014



PARTNERS FOR THE COMMON GOOD Financial Statements

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INDEPENDENT AUDITORS' REPORT

Board of Directors Partners for the Common Good Washington, DC

Report on the Financial Statements

We have audited the accompanying financial statements of Partners for the Common Good (a nonprofit organization), which comprise the statement of financial position as of December 31, 2015, and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

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

PARTNERS FOR THE COMMON GOOD Independent Auditors' report Page 2

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Partners for the Common Good as of December 31, 2015, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Prior Period Financial Statements

The financial statements of Partners for the Common Good as of December 31, 2014, were audited by other auditors whose report dated April 22, 2015, expressed an unmodified opinion on those statements.

Deleon & Stang DeLeon & Stang, CPAs Gaithersburg, Maryland

April 27, 2016



PARTNERS FOR THE COMMON GOOD Statements of Financial Position December 31, 2015 and 2014

				2015						2014		
	Gen	eral Fund	L	oan Fund		Total	Gen	eral Fund]	Loan Fund		Total
ASSETS												
Current assets:												
Cash and cash equivalents	\$	351,583	\$	8,592,210	\$	8,943,793	\$	565,910	\$	9,849,361	\$	10,415,271
Cash - restricted		-		-		1-1		11,755		2,295,691		2,307,446
Certificates of deposit		-		1,000,000		1,000,000		-		-		=
Loans receivable, current portion		-		6,096,066		6,096,066		-		4,674,710		4,674,710
Less, loan loss reserve, current portion		-		(504,640)		(504,640)		-		(532,992)		(532,992)
Grants receivable		-		-		-		-		334,590		334,590
Accounts receivable		99,205		-		99,205		36,935		10,314		47,249
Prepaid expenses	_	13,154	_		_	13,154		23,328	_		_	23,328
Total current assets		463,942		15,183,636		15,647,578		637,928		16,631,674		17,269,602
Noncurrent assets:		00.206				80.206		07.400				96 409
Fixed assets, net		89,296		-		89,296		86,498		197,384		86,498 197,384
Real estate owned		-		13,726,563		13,726,563		-		13,812,096		13,812,096
Loans receivable, net of current portion		-						-		(776,208)		
Less, loan loss reserve, net of current portion		7.500		(490,702)		(490,702)		7.500		(770,208)		(776,208) 7,500
Deposits	-	7,500	_	-	-	7,500		7,500		12 222 272	8- <u></u>	
Total noncurrent assets	-	96,796	_	13,235,861	_	13,332,657	-	93,998	-	13,233,272	_	13,327,270
Total Assets	\$	560,738	\$ 2	28,419,497	\$	28,980,235	\$	731,926	\$	29,864,946	\$	30,596,872
Liabilities and Net Assets												
Current liabilities:												
Accrued expenses	\$	337,327	\$	-	\$	337,327	\$	237,051	\$	-	\$	237,051
Accrued interest payable		-		191,969		191,969		-		193,013		193,013
Community development notes payable, current portion		-		1,425,000		1,425,000		-		1,464,908		1,464,908
Term notes payable, current portion Total current liabilities	_	227 227		1,450,000	-	1,450,000 3,404,296	-	237,051	_	1,657,921	_	1,894,972
Total current Habilities		337,327		3,066,969		3,404,296		237,031		1,037,921		1,094,972
Long-term debt: Community development notes payable, net of current												
portion		_		6,765,500		6,765,500		_		7,245,499		7,245,499
Term notes payable, net of current portion		-		10,023,152		10,023,152		-		12,298,928		12,298,928
Total long-term debt				16,788,652		16,788,652			_	19,544,427	_	19,544,427
Total Liabilities		337,327	1	19,855,621		20,192,948		237,051		21,202,348		21,439,399
Net assets:												
Unrestricted		223,411		8,563,876		8,787,287		494,875		6,165,842		6,660,717
Temporarily restricted			_		_	-		-	_	2,496,756	_	2,496,756
Total net assets	_	223,411	_	8,563,876		8,787,287		494,875		8,662,598	_	9,157,473
Total Liabilities and Net Assets	\$	560,738	\$ 2	28,419,497	\$	28,980,235	\$	731,926	\$	29,864,946	\$	30,596,872

PARTNERS FOR THE COMMON GOOD Statements of Activities and Changes in Net Assets For the Years Ended December 31, 2015 and 2014

Revenue and support:	Unre	Unrestricted	Temporarily Restricted		2015 Total	Unrestricted	icted	Tem	Temporarily Restricted		2014 Total
Grants	\$	274,500	∻	€	274,500	\$	480,000	⇔	1,000,000	↔	1,480,000
Interest income: Loan portfolio Community develorment certificates	1	1,052,364	·	,	1,052,364	1,03	1,030,509		1		1,030,509
of deposit		299			299		180		1		180
Investments		16,372			16,372	1	15,883		•		15,883
Fees		71,178			71,178	9	62,134		1		62,134
Contributions		35,568			35,568	3	34,431		•		34,431
Other revenue		16,923			16,923		3,084		•		3,084
Net assets released from restrictions	2	2,496,756	(2,496,756)	(S)	1	15	154,801		(154,801)		•
Total revenue and support	8	3,963,960	(2,496,756)	(6	1,467,204	1,78	1,781,022		845,199		2,626,221
Expenses:											
Program services	1	1,185,231		ı	1,185,231	1,29	1,292,442				1,292,442
Supporting services:											
Management and general		474,867		ī	474,867	41	413,120		•		413,120
Resource development		177,292	ii		177,292	16	169,874		1		169,874
Total supporting services		652,159			652,159	58	582,994		1		582,994
Total expenses		1,837,390		-	1,837,390	1,87	1,875,436				1,875,436
Change in net assets	2	2,126,570	(2,496,756)	9)	(370,186)	6)	(94,414)		845,199		750,785
Net assets, beginning of year	9	6,660,717	2,496,756	/01	9,157,473	6,75	6,755,131		1,651,557		8,406,688
Net assets, end of year	∞	8,787,287	↔	∞	8,787,287	\$ 6,66	6,660,717	\$	2,496,756	↔	9,157,473

See Accompanying Notes to Financial Statements.

PARTNERS FOR THE COMMON GOOD Statement of Functional Expenses For the Year Ended December 31, 2015

				Supportin	ig se	rvices		
		Program	M	anagement]	Resource		
		Services	aı	ıd general	De	velopment	2	015 Total
Administrative costs allocated:								
Salaries	\$	351,297	\$	205,476	\$	106,052	\$	662,825
Fringe benefits		102,279		59,824		30,877		192,980
Rent		-		67,074		_		67,074
Office expenses		6,886		34,711		2,949		44,546
Dues and subscriptions		25,977		2,483		_		28,460
Professional fees	62,842			47,371		28,316		138,529
Legal fees		50,932		12,826		_		63,758
Meetings and travel		16,971		23,511		9,098		49,580
Computer repair and maintenance		630		2,446		-		3,076
Marketing and website		-		2,800		-		2,800
Interest		441,213		-		-		441,213
Loan loss expense		76,275		-		-		76,275
Loan distribution fees		11,289		-		_		11,289
Credit reporting service		4,802		-		-		4,802
Staff development		6,300		-		-		6,300
Depreciation		27,538		16,345				43,883
Total	\$	1,185,231	\$	474,867	\$	177,292	\$	1,837,390

PARTNERS FOR THE COMMON GOOD Statement of Functional Expenses For the Year Ended December 31, 2014

				Supportin	ıg ser	vices		
		Program	Ma	nagement	R	Resource		
		Services	an	d general	Dev	velopment	2	014 Total
Administrative costs allocated:								
Salaries	\$	300,952	\$	176,321	\$	97,063	\$	574,336
Fringe benefits		80,117		46,939		25,839		152,895
Rent		34,959		20,482		11,274		66,715
Office expenses		18,426		10,796		5,943		35,165
Dues and subscriptions		16,361		9,586		5,277		31,224
Professional fees		77,849		90,819		-		168,668
Legal fees		39,297		952		13,713		53,962
Meetings and travel		29,013		16,998		9,357		55,368
Computer repair and maintenance		4,367		2,559		1,408		8,334
Marketing and website		4,755				-		4,755
Interest		417,008		-		-		417,008
Loan loss expense		249,251		_		-		249,251
Loan commitment fees		5,000		-		-		5,000
Loan distribution fees		11,702		_		_		11,702
Credit reporting service		3,385		-		-		3,385
Staff development		~		751		_		751
Depreciation	_			36,917		-		36,917
	\$	1,292,442	\$	413,120	\$	169,874	\$	1,875,436

Statements of Cash Flows

For the Years Ended December 31, 2015 and 2014

		2015		2014
Cash Flows From Operating Activities:				
Change in net assets	\$	(370,186)	\$	750,785
Adjustments to reconcile change in net assets				
to net cash provided by (used in) operating activities:				
Depreciation		43,883		36,917
Donated principal of outstanding notes payable		(200,000)		(85,000)
Allowance for loan loss		76,275		249,251
Change in operating assets and liabilities:				
Accounts receivable		(51,956)		(4,195)
Prepaid expenses		10,174		-
Grants receivable		334,590		(134,590)
Accrued expenses		100,276		124,388
Accrued interest payable	_	(1,044)	_	14,303
Net cash provided by (used in) operating activities		(57,988)		951,859
Cash Flows From Investing Activities:				
(Purchase of) Proceeds from community development certificates of deposit		(1,000,000)		750,000
Cash received from real-estate owned		197,384		169,513
Purchases of property and equipment		(46,683)		(53,702)
Loans receivable:				
New loans provided		(6,960,865)		(7,147,744)
Loan payments received		5,234,911		6,909,707
Net cash provided by (used in) investing activities	_	(2,575,253)		627,774
Cash Flows From Financing Activities:				
Proceeds from community development and term notes payable		135,000		4,250,000
Curtailments of community development and term notes payable		(1,280,683)		(1,870,072)
		73000 00 00 00 00 00 00	_	
Net cash provided by (used in) financing activities		(1,145,683)	-	2,379,928
Net increase (decrease) in cash and cash equivalents for the year		(3,778,924)		3,959,561
Cash and cash equivalents at, beginning of year	_	12,722,717	_	8,763,156
Cash and cash equivalents at, end of year	\$	8,943,793	\$	12,722,717

Notes to the Financial Statements December 31, 2015 and 2014

NOTE 1- ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES

Partners for the Common Good (PCG) was founded May 15, 2000 as an Illinois not-for-profit corporation. PCG is a community investment fund that applies the ethical principles of "the common good" to investment choices. PCG's mission is to promote economic justice and social change by providing access to capital and building healthy sustainable nonprofit corporations that advance economic opportunities for low-income people. PCG's business objectives are to:

- broaden interest and involvement in the community investment movement;
- provide opportunities for faith-based investors to share a portion of their financial resources with the economically poor by investing in intermediary agencies;
- model alternative approaches to the production of goods and services; and
- increase the overall capital base available for these kinds of projects.

Through financial intermediation to borrowers, PCG provides an effective and fiscally prudent mechanism through which institutional investors can support community development nationwide and abroad.

PCG has one subsidiary, PCG Community Investment Fund, LLC, which was established as a limited liability company on June 4, 2002 for the purpose of becoming a Community Development Entity. A Community Development Entity is a domestic corporation or partnership with the primary mission of serving or providing investment capital to low income communities or low income persons. As of December 31, 2015 and 2014 this subsidiary was inactive and had no assets.

Basis of Presentation

PCG presents its financial statements in accordance with the disclosure and display requirements of the Financial Accounting Standards Board (FASB) as set forth in Codification topics Accounting for Contributions Received and Contributions Made, and Financial Statements of Not-for-Profit Organizations. Accordingly, the net assets of PCG are reported in each of the following three classes: (a) unrestricted net assets, (b) temporarily restricted net assets, and (c) permanently restricted net assets.

Net assets of the two restricted classes are created only by donor-imposed restrictions on their use. All other net assets, including board designated or appropriated amounts, are legally unrestricted, and are reported as part of the unrestricted class.

Notes to Financial Statements (Continued) December 31, 2015 and 2014

NOTE 1- ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES (Continued)

Under these provisions, non-contingent contributions and the associated gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of PCG and changes therein are classified and reported as follows:

<u>Unrestricted net assets</u> - Net assets not subject to donor-imposed restrictions. PCG's governing Board may elect to designate such resources for specific purposes. This designation may be removed at the Board's discretion.

<u>Temporarily restricted net assets</u> - Net assets subject to donor-imposed stipulations that may or will be met by actions of PCG and/or passage of time.

<u>Permanently restricted net assets</u> - Net assets subject to donor-imposed stipulations that they be maintained permanently by PCG. There were no permanently restricted net assets as of December 31, 2015 and 2014.

Revenues are reported as increases in unrestricted net assets unless use of the related assets is limited by donor-imposed restrictions. Expenses are reported as decreases in unrestricted net assets. Gains and losses on investments and other liabilities are reported as increases or decreases in unrestricted net assets unless their use is restricted by explicit donor stipulation or by law. Expirations of temporary restrictions on net assets (i.e., the donor stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as reclassifications between applicable classes of net assets.

Revenue Recognition

Interest on loans is recognized over the term of the loan and is calculated using the simple-interest method on principal amounts outstanding.

Loan origination and commitment fees, as well as certain direct origination costs, are recognized at the inception of the loan receivable. These fees are written off when a loan is placed on nonaccrual status.

PCG recognizes grants and contributions as revenue when they are received or unconditionally pledged. Conditional promises to give are not recognized as revenue until the conditions on which they depend are substantially me.

Cash and Cash Equivalents

PCG considers cash on deposit at various banks and highly liquid investments with maturities of three months or less at the date of purchase to be cash and cash equivalents.

Notes to Financial Statements (Continued) December 31, 2015 and 2014

NOTE 1- ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES (Continued)

Certificates of Deposit

Certificates of deposit are recorded at fair value which approximates cost and accumulated interest.

Accounts Receivable

Receivables are carried at original invoice amounts less an estimate for doubtful receivables based on a periodic review of all outstanding amounts. Receivables are written off when deemed uncollectible. Recoveries of receivables previously written off are recorded when received. Management believes all amounts included in accounts receivable to be collectible. Accordingly, there is no provision for doubtful accounts as of December 31, 2015 and 2014.

Loans Receivable

Loans receivable are carried at unpaid principal balances, less an allowance for loan losses. The allowance for loan losses is increased by the loan loss expenses charged to the change in net assets and decreased by charge-offs (net of recoveries). Management's periodic evaluation of the adequacy of the allowance is based on PCG's past loan loss experience, specific impaired loans, adverse situations that may affect the borrower's ability to repay, estimated value of any underlying collateral, and current economic conditions. Past due status is determined based on contractual terms. Loans are considered impaired if full principal or interest payments are not anticipated in accordance with the contractual terms. PCG's practice is to charge off any loan or portion of a loan when the loan is determined by management to be uncollectible due to the borrower's failure to meet repayment terms, the borrower's deteriorating or deteriorated financial condition, the depreciation of the underlying collateral, or for other reasons. Loans are placed on nonaccrual status when management believes, after considering economic conditions, business conditions, and collection efforts that the loans are impaired or collection of interest is doubtful. Uncollected interest previously accrued is charged off or an allowance is established by a charge to interest income. Interest income on nonaccrual loans is recognized only to the extent cash payments are received.

Fair Value Measurements

PCG complies with the Statement of Financial Accounting Standards Codification topic Fair Value Measurements. This defines fair value and establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurement).

Notes to Financial Statements (Continued)

December 31, 2015 and 2014

NOTE 1 ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES (Continued)

The three levels of the fair value hierarchy under this topic are described below:

Basis of Fair Value Measurement

Level 1 Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities

Level 2 Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly

Level 3 Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable

Fixed Assets

Property and equipment is stated at cost, or if donated, at fair market value at date of receipt. PCG capitalizes purchases of equipment over \$1,000 with an estimated useful life of more than one year. Depreciation is calculated by the straight-line method over the estimated useful life of 3 to 7 years. Upon disposal of depreciable assets, the cost and related accumulated depreciation are eliminated from the accounts and the resultant gain or loss is credited or charged to income.

Tax Exempt Status

PCG is recognized as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and is exempt from federal and state income taxes on income related to its exempt purpose. In addition, PCG has been determined by the Internal Revenue Service to be a "qualifying charity" within the meaning of Section 509(a) of the Internal Revenue Code.

Accounting for Income Taxes

PCG complies with the provisions of Financial Accounting Standards Board Codification Topic Accounting for Uncertainty in Income Taxes. For the years ended December 31, 2015 and 2014, no unrecognized tax provision or benefit exists.

Tax returns are subject to examination by federal and state taxing authorities, generally for three years after filing. PCG's returns for the years ended 2012 through 2014 are open to such examination.

Notes to Financial Statements (Continued)

December 31, 2015 and 2014

NOTE 1 ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions. Those estimates and assumptions affect the reported amounts of the assets and liabilities, disclosure of contingent assets and liabilities, and the reported amounts of revenues and expenses. Actual results could differ from those estimates.

Functional Allocation of Expenses

The cost of PCG's programs and administration has been summarized on a functional basis in the Statements of Functional Expenses. Accordingly, certain costs have been allocated among the programs benefited.

NOTE 2 <u>CONCENTRATION OF CREDIT RISK</u>

Financial instruments that potentially subject PCG to credit risk include cash deposits with banks in excess of the insurance limitations of the Federal Deposit Insurance Corporation. Cash balances in excess of near term operating requirements are automatically invested in federal funds. Management does not consider this a significant concentration of credit risk.

NOTE 3 LOANS RECEIVABLE

Loans receivable at December 31, 2015 consisted of the following:

Maturity	 Principal	Interest Rate
2016	\$ 6,096,066	3.39% to 7.13%
2017	3,165,698	3.50% to 7.75%
2018	3,174,086	3.00% to 8.00%
2019	4,425,262	4.50% to 8.50%
2020	1,648,156	4.50% to 7.25%
2021 - 2024	 1,313,361	3.00% to 6.37%
	\$ 19,822,629	

As of December 31, 2015 and 2014, the loan loss reserve for these loans receivable was \$995,342 and \$1,309,200, respectively.

As of December 31, 2015, PCG had \$400,000 in loan commitments outstanding but not yet disbursed, and an additional \$1,964,000 in loan transactions that were closed, but not yet disbursed. As of March 31, 2016, PCG had disbursed \$1,323,125 of the loans that were closed by December 31, 2015. As of this date, PCG has also approved an additional \$1,917,500 in loans, committed \$1,600,000 in loans and closed \$600,000 in loans.

Notes to Financial Statements (Continued) December 31, 2015 and 2014

NOTE 3 LOANS RECEIVABLE (Continued)

As of December 31, 2015, PCG also had balance of \$1,274,229 pending disbursement form existing loans in the portfolio that are partially disbursed. These types of loans are characterized by revolving balances, construction draws, etc.

NOTE 4 REAL ESTATE OWNED

During 2011, PCG took ownership of one the properties associated with a non-performing loan. This transaction resulted in the property being reclassified from non-performing loans to real estate owned at the estimated net realizable value of \$418,123. The estimated value of this property was \$366,897 at December 31, 2013. During 2014, a sale of this property was initiated and resulted in PCG receiving \$169,513 during 2014, with the remaining proceeds of \$197,384 from the sale received in 2015.

NOTE 5 FIXED ASSETS

Fixed assets at December 31, 2015 and 2014 were recorded at cost, as shown below:

	 2015		2014
Computer equipment and software	\$ 270,758	\$	224,076
Furniture and equipment	 6,437	_	6,437
Total property and equipment	277,195		230,513
Less, accumulated depreciation	 (187,899)		(144,015)
Fixed assets, net	\$ 89,296	\$	86,498

Depreciation expense for the years ended December 31, 2015 and 2014 was \$43,883 and \$36,917, respectively.

NOTE 6 <u>CREDIT QUALITY</u>

Loan Origination/Risk Management

PCG has certain lending policies and procedures in place that are designed to ensure that the loan portfolio maintains an acceptable level of risk. Management reviews and updates these policies and procedures on a regular basis. The Loan Advisory Committee and the Board of Directors approve any changes to policies. A reporting system supplements the review process by providing management with frequent reports related to loan quality, concentrations of credit, loan delinquencies, and non-performing and potential problem loans. Diversification in the loan portfolio is a means of managing risk associated with fluctuations in economic conditions.

Notes to Financial Statements (Continued) December 31, 2015 and 2014

NOTE 6 <u>CREDIT QUALITY</u> (Continued)

PCG finances both direct loans and loans in participation with other Community Development Financial Institutions (CDFIs). For direct loans, PCG conducts an analysis of the potential borrowers' financial status and projections, loan structure, collateral and project mission. For participation loans, PCG conducts an analysis of both the borrower and the lending partner reviewing the capital structure, asset quality, management earnings and impact of the lending partner.

The following table represents an aging of loans by category as of December 31, 2015:

	-59 Days ast Due	0-89 Days Past Due	90+ Days	No	on-performing Non-accrual		Total Past Due		Current		Total Loans
Loan Type:											
International	\$ -	\$ -	\$ _	\$		\$	-	\$	2,073,371	\$	2,073,371
Housing	-	-	, -		264,633		264,633		5,582,200		5,846,833
Community Facility	130,000	-	7-1		639,270		769,270		7,811,507		8,580,777
Commercial Real Estate	=	-	-		-		-		2,840,302		2,840,302
Working Capital	-					_		_	481,346	_	481,346
Total	\$ 130,000	\$ -	\$ _	\$	903,903	\$	1,033,903	\$	18,788,726	\$	19,822,629

Within the non-performing non-accrual category PCG had four loans classified as a non-performing, totaling \$903,903 as of December 31, 2015.

Credit Quality Indicators

PCG assigns internal credit classifications at the inception of each loan. These ratings are reviewed by PCG management on a monthly basis. Criteria for determining risk ratings include the following:

- 1 Low Risk Fully amortizing or firm take-out source; strong cash flow (> 1.5) Debt Service Ratio (DSR) and collateral Loan to Value (LTV) (< 75%); very experienced borrower and lead lender, if applicable, known to PCG
- 2 Moderate Risk Balloon structure/refinance required; good cash flow (> 1.2) DSR and collateral LTV (75-90%); experienced borrower and lead lender, if applicable
- 3 Acceptable Risk Higher risk loan structure (bridge/construction); higher LTV (> 90%) and lower DSR (< 1.1); less experienced borrower and/or lead lender, if applicable
- 4 High Risk Source of take-out is speculative; unsecured or inadequate collateral; history of delinquency (>60 days past due (dpd) or 3 X 30 dpd within 12 months); reporting or compliance issues; uncooperative borrower and/or lead lender
- 5 -Default Delinquency (>90 dpd or 2 X 60 dpd within 12 months); loan is collateral dependent and collateral and guarantees, if any, are inadequate

Notes to Financial Statements December 31, 2015 and 2014

NOTE 6 <u>CREDIT QUALITY</u> (Continued)

The following table summarizes the loan portfolio by category of loan and the internally assigned credit quality ratings for those categories at December 31, 2015:

					\mathbb{C}	ommercia	I			
			\mathbb{C}	ommunity		Real		Working		
II	iternational	Housing		Facility		Estate		Capital	_	Total
1 - Moderate \$	\$	1,104,121	\$	1,627,401	\$	560,717	\$	62,828	\$	3,355,067
2 - Average	1,750,956	1,922,844		2,514,409		1,500,000		224,985		7,913,194
3 - Substantial	322,415	2,156,676		3,799,696		779,586				7,058,373
4 - High		398,559						193,533		592,092
5 - Workout/										
default		264,633		639,270			_			903,903
Totals \$	2,073,371 \$	5,846,833	\$	8,580,776	\$	2,840,303	\$	481,346	\$	19,822,629

Allowance for Loan Loss

The following table summarizes the allowance for loan losses as of and for the year ended December 31, 2015, by loan category and the amount by category, as evaluated by PCG's risk rating system:

Community Facility							
Commercial Working							
	<u>I</u>	lousing	R	eal Estate _	Capital	International	<u>Total</u>
Allowance for							
loan losses:							
Beginning balance	\$	213,114	\$	923,386 \$	91,579	\$ 81,121 \$	1,309,200
Charge-offs				(390,133)			
Recoveries							
Provisions for loan							
losses		135,619		(19,639)	(27,233)	(12,472)	(313,858)
Ending balance	\$	348,733	\$	513,614 \$	64,346	\$ 68,649 \$	995,342

The following is a summary of the activity in the allowance for loan losses at December 31, 2014:

Balance at beginning of year	\$ 1,060,038
Charge-offs, net of recoveries	
Provision for loan losses	249,162
Balance at end of year	\$ 1,309,200

Notes to Financial Statements December 31, 2015 and 2014

NOTE 6 <u>CREDIT QUALITY</u> (Continued)

The following is a summary of the current and non-current portions of the allowance for loan losses at December 31:

	2	015	2014
Current	\$	504,640	\$ 532,992
Non-current		490,702	 776,208
Totals	\$	995,342	\$ 1,309,200

The allowance for loan losses as a percentage of loans outstanding at December 31, 2015 and 2014 was 5.02% and 7.09%, respectively, of PCG's loan portfolio.

The allowance for loan losses is based on management's estimates using PCG's risk rating system, with decisions to upgrade or downgrade based on the following factors: (1) current payment status; (2) borrower performance; (3) transaction size and complexity; (4) covenant compliance; (5) collateral; and (6) expectation of repayment.

NOTE 7 NOTES PAYABLE

Notes payable consisted of the following at December 31, 2015:

	_	2015	 2014
Community Development Notes, maturing			
October 28, 2014 through June 9, 2024			
some subject to prior redemption,			
bearing stated interest at			
0% to 3.00%, payable annually	\$	8,190,500	\$ 8,710,407
Term Loans, maturing January 1, 2016			
through September 20, 2021, some			
subject to prior redemption, bearing			
stated interest at 1.00% to 4.00%, payable			
annually		11,473,152	12,298,928
Total Notes Pavable	\$	19,663,652	\$ 21,009,335

Future maturities of the notes payable are as follows as of December 31, 2015:

Years Ending	Dev	elopment					
December 31,		Notes		Term Loans		Totals	
2016	\$	1,425,000	\$	1,450,000	\$	2,875,000	
2017		2,998,000		2,200,000		5,198,000	
2018		1,197,500		689,352		1,886,852	
2019		1,550,000		3,624,800		5,174,800	
2020		845,000		500,000		1,345,000	
Thereafter		175,000		3,009,000	-	3,184,000	
Totals	\$	8,190,500	\$	11,473,152	\$	19,663,652	

Notes to Financial Statements December 31, 2015 and 2014

NOTE 8 <u>COMMITMENTS</u>

In December 2010, PCG signed a sub-lease agreement for office space commencing on January 1, 2011 and expiring on March 31, 2016. The base monthly rent under the lease is \$5,417 increasing at six percent per year on the lease anniversary date. Future minimum lease payments under the operating lease as of December 31, 2015, are as follows:

Year Ending	
December 31,	
2016	\$ 21,746
Total	\$ 21,746

Rent expense for the years ended December 31, 2015 and 2014 was \$67,074 and \$66,715, respectively.

NOTE 9 TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets (restricted for time or purpose indicated) at December 31, 2015 and 2014 are as follows:

	2015	2014
Restricted Grant from Community Development Financial Institutions Fund (financial assistance)	\$	\$ 2,453,806
Restricted Grant from Ford Foundation (period through December 31, 2014)		
Restricted Grant from Community		
Development Financial Institutions		40.050
Fund (technical assistance)		42,950
Totals	\$	\$ 2,496,756

NOTE 10 SUBSEQUENT EVENTS

PCG has evaluated subsequent events for potential required disclosure through April 27, 2016, which is the date financial statements were available to be issued.