



FIFTH NATIONAL COMMUNITY DEVELOPMENT CENSUS

1030 15th Street, NW, Suite 325, Washington, D.C. 20005

Tel: 202-289-9020

http://www.ncced.org

Fax: 202-289-7051

Please complete the information below and be sure to include this page when you return the survey.

OFFICE USE ONLY

ID: _____

ORGANIZATION: _____

ADDRESS LINE 1: _____

ADDRESS LINE 2: _____

CITY: _____ STATE: _____ ZIP CODE: _____-

PHONE: (____) _____-_____ FAX: (____) _____-

EMAIL: _____

URL: _____

Please provide the name and phone numbers of the person completing this questionnaire.

PLEASE PRINT CLEARLY

Organization's Employer Identification Number: ____-____-_____

Name: _____

Title: _____

Telephone Number: (____) _____

FAX Number: (____) _____

E-mail: _____

Access to the Internet? ₁ Yes ₂ No

Executive Director (if different from person completing this questionnaire)

Name: _____

Title: _____

Telephone Number: (____) _____

FAX Number: (____) _____

If you're NOT a member of NCCED, would you like to receive NCCED membership material? ₁ Yes ₂ No

GENERAL INSTRUCTIONS

The Fifth National Community Development Census asks you to share information on the accomplishments of your organization, its activities, and sources of support. There are a lot of questions because community-based organizations do a lot of things, but it will be **easier to complete than it may first seem**. This is because you only have to answer questions that apply to the activities that your group carries out. Our tests of this survey show that it should take you about **30 minutes to complete**. If you are a community-based development organization according to the definition below, and you have **developed or financed at least one project since your founding**, please complete this questionnaire.

DEFINITIONS

Community-based Development Organizations (CBDOs) are private, nonprofit, community-based organizations that **develop and/or finance** housing, commercial, industrial or community facilities, or business enterprises. CBDOs can include Community Development Corporations (CDC), NeighborWorks/Neighborhood Housing Services (NHS) organizations, Habitat for Humanity, Community Action Agencies/Programs (CAA/CAP), and Community Housing Development Organizations (CHDO). Community Development Financial Institution (CDFI), Youth Build, and Local Development Corporation (LDC) nonprofits are considered CBDOs **IF** they have a community-based board and are undertaking development or are financing development for low-income areas/people.

Develop means a direct and active role in construction or rehabilitation of facilities, or investments in business enterprises. If you only do planning, technical assistance (except for businesses), or advocacy, you are not a developer according to our definition.

Finance means loan origination, equity investment, and/or monetary assistance to homebuyers or to business owners on business development projects.

Production Data include information on your organization's accomplishments. These data are requested in Part 2 of the survey, which is divided into (A) **Housing Development**, (B) **Commercial and Other Facilities Development**, (C) **Business Development**, and (D) **Community Lending**. Please try NOT to simply estimate answers in these sections; the accuracy of this information is very important.

Time Periods Covered include **cumulative** (data from your organization's founding through December 2004) and for a **recent period** (running from January 2001 through December 2004). Please only include data on units or facilities placed in service or loans actually closed, not those that are in process, even if they are near to being completed.

Urban and Rural counts of production are requested at several points in the questionnaire. For our purposes, a location is rural if it is in a non-metropolitan area with no city having a population of more than 50,000.

SURVEY ELIGIBILITY

1. Is your organization a Community-based Development Organization (CBDO) according to the definition provided above?

₁ Yes

₂ No→

IF NO, PLEASE PLACE THE FIRST TWO PAGES OF THE SURVEY INTO THE ENVELOPE PROVIDED, AND MAIL IT BACK TO US.

PART 1: GENERAL INFORMATION

This Part asks for information on characteristics of your organization and staff. **Except where noted, please do not report subsidiary organizations.**

2. In what year did you . . .

- a. Incorporate? _____
- b. Complete your first development project? _____

3. CBDOs have been described in various ways. How do you describe your own organization?
(CHECK ALL THAT APPLY)

- | | |
|---|--|
| <input type="checkbox"/> ₁ Community Development Corporation
<input type="checkbox"/> ₂ Community Action Agency
<input type="checkbox"/> ₃ Nonprofit housing development organization
<input type="checkbox"/> ₄ Rural community assistance program
<input type="checkbox"/> ₅ Habitat for Humanity
<input type="checkbox"/> ₆ Self-help housing organization
<input type="checkbox"/> ₇ Local development corporation | <input type="checkbox"/> ₈ Community Housing Development Organization
<input type="checkbox"/> ₉ Neighborhood Housing Services/NeighborWorks
<input type="checkbox"/> ₁₀ Farm labor housing organization
<input type="checkbox"/> ₁₁ Community Development Financial Institution
<input type="checkbox"/> ₁₂ Supportive housing provider
<input type="checkbox"/> ₁₃ Faith-based organization
<input type="checkbox"/> ₁₄ Other (specify) _____ |
|---|--|

IF YOU ARE THE SUBSIDIARY OF ANOTHER ORGANIZATION, please check here and supply the name of your “parent” organization: _____

4. Is your service area urban, rural, or mixed? (A service area is “rural” if it is in a non-metropolitan area with no city having a population of more than 50,000.)

- ₁ Urban
- ₂ Rural
- ₃ Mixed (service area includes both urban and rural)

5. How many people did your organization have on staff as of December 31, 2004? (Please **include subsidiaries in your response to this question.**)

STAFF TYPE	Number as of December 31, 2004
a. Full-time staff	
b. Part-time staff	
c. Volunteer staff	

6. Please supply the numbers of board and full- and part-time staff of your organization as of December 31, 2004 that fell into the following racial/ethnic categories. **Count each person only once. Do not include volunteer staff.**

	Board (1)	Staff (2)
a. African American		
b. White (non-Hispanic)		
c. Hispanic/Latino		
d. Asian Pacific American		
e. American Indian and Alaska Native		
f. Other (specify) _____		
g. TOTAL		

7. In what year was the **current** executive director hired? _____

8. Please tell us about your executive director with respect to . . .

a. **Race/ethnicity:** (CHECK ONLY ONE RESPONSE)

- ₁ African American
- ₂ White (non-Hispanic)
- ₃ Hispanic/Latino
- ₄ Asian Pacific American
- ₅ American Indian and Alaska Native
- ₆ Other (specify) _____

b. **Gender:**

- ₁ Male
- ₂ Female

c. **Age:**

- ₁ Younger than 30 years old
- ₂ Between 30 and 39
- ₃ Between 40 and 49
- ₄ Between 50 and 59
- ₅ 60 years or older

9. Please indicate the approximate annual salary—not including benefits—that will be paid to the executive director in 2004. (**NOTE: This item will be kept confidential.**)

- ₁ Less than \$25,000
- ₂ \$25,000 – \$39,999
- ₃ \$40,000 – \$59,999
- ₄ \$60,000 – \$74,999
- ₅ \$75,000 – \$90,000
- ₆ More than \$90,000

10. What fringe benefits does your organization provide to executive and program staff? (CHECK ALL THAT APPLY)

- ₁ Health insurance
- ₂ Disability insurance
- ₃ Paid vacation
- ₄ Training or tuition assistance
- ₅ Life insurance
- ₆ Employer-funded pension
- ₇ Sick leave
- ₈ “Flex-time”
- ₉ Other (specify) _____

PART 2: PROGRAM ACTIVITIES

Please complete as many sections in this Part as apply to **you and your subsidiary organizations, if any**. For mixed-use projects—e.g., a housing development that includes some commercial space—please record the information appropriate to each use in the corresponding section. If your project converted a facility from one use to another—e.g., industrial to housing—please record information about the end-use.

Several questions in this Part ask for activities to be classified according to their urban or rural location. **A location is “rural” if it is in a non-metropolitan area with no city having a population of more than 50,000.**

Section A: Housing Development

Housing development means direct and active involvement in construction, rehabilitation, or acquisition. If you only do home repairs, planning, technical assistance, or advocacy, you are not a housing developer according to our definition. An average cost of \$10,000 per unit is the amount we use to distinguish housing rehabilitation from home repair.

11. Have you ever developed housing?

- ₁ Yes → **IF YES, PLEASE ANSWER THE REMAINDER OF THIS SECTION, AS APPROPRIATE.**
₂ No → **IF NO, PLEASE SKIP TO SECTION B, QUESTION 20.**

12. Please check ALL of your recent (January 2001 through December 2004) housing development activities.

- | | |
|---|--|
| <input type="checkbox"/> ₁ Acquisition of existing housing | <input type="checkbox"/> ₅ Self-help/sweat equity |
| <input type="checkbox"/> ₂ New construction | <input type="checkbox"/> ₆ Housing preservation (of “expiring use” units) |
| <input type="checkbox"/> ₃ Rehabilitation (\$10,000 per unit or more) | <input type="checkbox"/> ₇ Construction management |
| <input type="checkbox"/> ₄ Home repair, weatherization (under \$10,000 per unit) | <input type="checkbox"/> ₈ No recent relevant activity |

13. From your organization’s founding through December 2004, have any of the units you developed been built for, or set aside for, persons with the following special needs? (CHECK ALL THAT APPLY)

	<u>Urban</u>	<u>Rural</u>
	(1)	(2)
a. Mentally/physically disabled	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
b. Elderly	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
c. Substance abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
d. HIV/AIDS	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
e. Formerly homeless	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
f. Returning prisoners	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
g. Other (specify) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁
h. Have NOT developed units for persons with special needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₁

14. From your organization's founding through December 2004, which types of temporary housing for the homeless—if any—have you developed? (CHECK ALL THAT APPLY)

- ₁ Emergency shelter
- ₂ Transitional housing
- ₃ Have NOT developed temporary housing for the homeless

15. Please record the number of housing units your organization has developed **in URBAN areas** from its founding through December 2004 (columns 1 through 4), and between January 2001 and December 2004 (column 5). Please include only completed and occupied units, and DO NOT include units financed for third parties. (Financed units should be recorded separately in the Section D—Community Lending.)

Housing Units in URBAN Areas	Housing Acquisition Only (1)		New Construction (2)		Rehabilitation (cost >\$10,000 per unit) (3)		Total Completed (from founding thru 12/2004) (4)	Total Recently Developed (1/2001 thru 12/2004) (5)
a. Rental		+		+		=		
b. Owner	N/A	+		+		=		
c. TOTAL		+		+		=		

16. Please record the number of housing units your organization has developed **in RURAL areas** from its founding through December 2004 (columns 1 through 4), and between January 2001 and December 2004 (column 5). Again, please include only completed and occupied units, and DO NOT include units financed for third parties. (Financed units should be recorded separately in the Section D—Community Lending.)

Housing Units in RURAL Areas	Housing Acquisition Only (1)		New Construction (2)		Rehabilitation (cost >\$10,000 per unit) (3)		Total Completed (from founding thru 12/2004) (4)	Total Recently Developed (1/2001 thru 12/2004) (5)
a. Rental		+		+		=		
b. Owner	N/A	+		+		=		
c. TOTAL		+		+		=		

17. As of December 2004, how many housing units did your organization . . .

HOUSING UNITS AS OF DECEMBER 2004	Urban (1)	Rural (2)
a. Control (owner, general partner, etc.) AND manage?		
b. Control, but NOT manage?		

18. As of December 2004, did you provide resident services for low-income families living in any of the permanent housing units you controlled?

- ₁ Yes → **IF YES, ANSWER QUESTION 18.a, AND 18.b, BELOW.**
- ₂ No → **IF NO, SKIP TO QUESTION 19.**
- ₃ Don't know → **IF DON'T KNOW, SKIP TO QUESTION 19.**
- ₄ Not applicable/Didn't control any units → **IF NOT APPLICABLE, SKIP TO QUESTION 19.**

a. As of December 2004, in how many developments did you provide resident services?
 _____ Developments

b. As of December 2004, for how many units did you provide resident services?
 _____ Units

19. Please indicate the number of home repair units, homebuyers, or units/beds for the homeless that your organization has repaired, assisted, or developed from its founding through December 2004.

FROM FOUNDING THRU DECEMBER 2004	Urban (1)	Rural (2)
a. Home repair units (cost less than \$10,000 per unit)	_____ Units	_____ Units
b. Homebuyers assisted through down-payment assistance or other home purchase program (including any buyers assisted with loans)	_____ Homebuyers	_____ Homebuyers
c. Transitional housing units for the homeless	_____ Units	_____ Units
d. Permanent housing units for the homeless	_____ Units	_____ Units
e. Emergency shelter beds	_____ Beds	_____ Beds

Section B: Commercial/Industrial/Retail/Community Facilities Development

Commercial/industrial/retail/community facilities development means direct and active involvement in construction, rehabilitation or acquisition. **Community facilities** are general or special-purpose facilities for the provision of community services, including health, recreation, child care, job training, youth and family services, or other programs.

20. Have you ever developed commercial, industrial, retail, or community facilities?

- ₁ Yes → **IF YES, PLEASE ANSWER THE REMAINDER OF THIS SECTION, AS APPROPRIATE.**
- ₂ No → **IF NO, PLEASE SKIP TO SECTION C, QUESTION 24.**

21. Please check ALL of your recent (January 2001 through December 2004) commercial, industrial, retail, business incubator, and community facility activities.

- | | |
|--|--|
| <input type="checkbox"/> ₁ Develop facilities | <input type="checkbox"/> ₆ Administer commercial revitalization/retail façade program |
| <input type="checkbox"/> ₂ Manage construction | <input type="checkbox"/> ₇ Engage in business and commercial area marketing/promotion |
| <input type="checkbox"/> ₃ Operate commercial, industrial, or retail facilities | <input type="checkbox"/> ₈ Other (specify) _____ |
| <input type="checkbox"/> ₄ Operate a business incubator | <input type="checkbox"/> ₉ No recent relevant activity |
| <input type="checkbox"/> ₅ Operate a community facility | |

22. Please check ALL community facilities that your organization developed from its founding through December 2004.

- | | <u>Urban</u> | <u>Rural</u> |
|--|---------------------------------------|---------------------------------------|
| | (1) | (2) |
| a. Child-care center(s) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| b. Charter school(s) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| c. Health-care center(s) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| d. Arts/cultural center(s) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| e. Community/recreation center(s) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| f. Senior center(s) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| g. Other (specify) _____ | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |
| h. Have NOT developed community facilities | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₁ |

23. Please enter the total square footage of facilities developed by your organization from its founding through December 2004 (columns 1 and 3) and between January 2001 and December 2004 (columns 2 and 4). Please include only completed square feet, and DO NOT include square feet financed for third parties. (These financed square feet should be recorded separately in Section D—Community Lending.)

SQUARE FOOTAGE OF FACILITIES DEVELOPED	URBAN		RURAL	
	From Founding thru December 2004 (1)	Recently Developed (January 2001 thru December 2004) (2)	From Founding thru December 2004 (3)	Recently Developed (January 2001 thru December 2004) (4)
a. Office	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.
b. Retail	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.
c. Industrial	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.
d. Business incubators	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.
e. Community	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.
f. TOTAL	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.	_____ sq. ft.

Section C: Business Enterprise Development

Business enterprise development is ownership or management of, technical assistance provision to, or other direct involvement in the creation, retention, expansion, or operation of a business. Loans to private businesses should be recorded in Section D—Community Lending—below.

24. Have you ever been involved in business enterprise development?

- ₁ Yes → **IF YES, PLEASE ANSWER THE REMAINDER OF THIS SECTION, AS APPROPRIATE.**
- ₂ No → **IF NO, PLEASE SKIP TO SECTION D, QUESTION 28.**

25. Please check ALL recent (January 2001 through December 2004) activities of your organization’s business enterprise development program.

- ₁ Develop businesses
- ₂ Own
- ₃ Make equity investment in
- ₄ Operate
- ₅ Provide technical assistance to
- ₆ Organize/involvement in merchants/manufacturers association
- ₇ Provide entrepreneurial training
- ₈ No recent relevant activity

26. Of the businesses you have assisted from the founding of your organization through December 2004 (columns 1 and 3), and between January 2001 and December 2004 (columns 2 and 4), how many did you . . .

NUMBER OF BUSINESSES ASSISTED	URBAN		RURAL	
	From Founding thru December 2004 (1)	Recent Activity (January 2001 thru December 2004) (2)	From Founding thru December 2004 (3)	Recent Activity (January 2001 thru December 2004) (4)
a. Own?				
b. Invest in, but not own?				
c. Provide technical assistance to?				

27. Please indicate the dollar amount of your equity investments, both since the founding of your organization (columns 1 and 3), and recently (columns 2 and 4). (Do not include facilities loans listed in Section D—Community Lending.)

CUMULATIVE EQUITY INVESTMENTS	URBAN		RURAL	
	From Founding thru December 2004 (1)	Recent Activity (January 2001 thru December 2004) (2)	From Founding thru December 2004 (3)	Recent Activity (January 2001 thru December 2004) (4)
Dollar amount	\$ _____	\$ _____	\$ _____	\$ _____

31. Please indicate the requested information about loans you have originated for the following purposes or to the following types of borrowers **in RURAL areas** from the founding of your organization through December 2004.

Loans in RURAL Areas for:	FROM FOUNDING THRU DECEMBER 2004		
	Number of Loans (1)	Amount Originated (2)	Number of Units/Facilities/ Square Footage (3)
a. Housing development	_____	\$ _____	_____ Units
b. Home purchase	_____	\$ _____	_____ Units
c. Public/ community facilities	_____	\$ _____	_____ Facilities
FOR-PROFIT BUSINESSES			
d. Office	_____	\$ _____	_____ sq. ft.
e. Retail	_____	\$ _____	_____ sq. ft.
f. Industrial	_____	\$ _____	_____ sq. ft.
g. Other (specify)	_____	\$ _____	_____ sq. ft.

32. Please indicate the cumulative number and dollar amount of loans **to micro-enterprises** from your organization's founding through December 2004. These figures may duplicate some information already reported in Questions 30 and 31.

LOANS TO MICRO-ENTERPRISES FROM FOUNDING THRU 12/2004	Urban (1)	Rural (2)
a. Number	_____	_____
b. Dollar amount	\$ _____	\$ _____

Section E: Other Community Development Activities and Outcomes

33. From its founding through December 2004, how many jobs were created in public/community facilities or for-profit businesses your organization owned or financed? **(Please exclude construction workers or staff of your organization.)**

FROM FOUNDING THRU DECEMBER 2004	Urban (1)	Rural (2)
Total jobs created		

34. Please check ALL **major** services—in addition to development—recently **offered** (January 2001 through December 2004) by your organization, including subsidiaries. **By “offered,” we mean that your organization has expended funds on staff or purchased goods and services to provide the service.**

- | | |
|--|---|
| <input type="checkbox"/> ₁ Federal-level advocacy | <input type="checkbox"/> ₁₆ Education and training |
| <input type="checkbox"/> ₂ State-level advocacy | <input type="checkbox"/> ₁₇ Transportation |
| <input type="checkbox"/> ₃ Local-level advocacy | <input type="checkbox"/> ₁₈ Child care |
| <input type="checkbox"/> ₄ Health care | <input type="checkbox"/> ₁₉ Help in establishing Individual Development Accounts |
| <input type="checkbox"/> ₅ Community organizing | <input type="checkbox"/> ₂₀ Job skills training |
| <input type="checkbox"/> ₆ Drug prevention/treatment | <input type="checkbox"/> ₂₁ Job readiness training |
| <input type="checkbox"/> ₇ CRA advocacy | <input type="checkbox"/> ₂₂ Job placement |
| <input type="checkbox"/> ₈ Community safety | <input type="checkbox"/> ₂₃ Job retention/advancement |
| <input type="checkbox"/> ₉ Tenant counseling | <input type="checkbox"/> ₂₄ Budget/credit counseling |
| <input type="checkbox"/> ₁₀ Youth programs | <input type="checkbox"/> ₂₅ Immigration services/ESL |
| <input type="checkbox"/> ₁₁ Homeowner counseling | <input type="checkbox"/> ₂₆ Prisoner re-entry programs |
| <input type="checkbox"/> ₁₂ Arts and culture | <input type="checkbox"/> ₂₇ Housing resident services coordination or referral |
| <input type="checkbox"/> ₁₃ Homeless services | <input type="checkbox"/> ₂₈ Other (specify) _____ |
| <input type="checkbox"/> ₁₄ Senior programs | <input type="checkbox"/> ₂₉ Have NOT offered major services recently |
| <input type="checkbox"/> ₁₅ Emergency food assistance | |

PART 3: FUNDING SOURCES

Section A: Sources of Funding for All Purposes

35. Please check ALL sources from which you received more than \$50,000 in any one year between January 2001 and December 2004.

a. HUD Programs

- ₁ Community Development Block Grants
- ₂ HOME
- ₃ HOPE VI
- ₄ Section 108 Loan Program
- ₅ Section 202/811 Elderly/Disabled Housing
- ₆ McKinney Act—Shelter and Care
- ₇ McKinney Act—Other homeless programs
- ₈ Economic Development Initiative/
Neighborhood Initiatives
- ₉ YouthBuild
- ₁₀ Section 8
- ₁₁ Rural Housing
- ₁₂ Brownfields
- ₁₃ Other HUD (specify) _____

b. USDA Programs

- ₁ Section 502—Single Family
- ₂ Section 504—Home Repair
- ₃ Section 514/516—Farm Labor Housing
- ₄ Section 515—Rental Housing Direct
- ₅ Section 523—Self Help TA
- ₆ Section 525 technical assistance
- ₇ Section 533—Housing Preservation
- ₈ Section 538—Rental Housing Guarantee
- ₉ Intermediary Relending Program (IRP)
- ₁₀ Rural Business Enterprise Grant (RBEG)
- ₁₁ Rural Community Development Initiative (RCDI)
- ₁₂ Community Facilities
- ₁₃ Other USDA (specify) _____

c. Other Federal Programs

- ₁ Americorps/VISTA
- ₂ Economic Development Administration/
Title IX grants
- ₃ SBA/Microloan Demonstration Project
- ₄ SBA/Program for Investment in Micro-Entrepreneurs
- ₅ Social Service Block Grants (formerly Title XX)
- ₆ Office of Community Services/Discretionary
Fund for Community Economic Development
- ₇ Job Opportunities for Low Income (JOLI)
- ₈ HHS Community Services Block Grant
(CSBG)
- ₉ Community Development Financial
Institutions Fund
- ₁₀ Dept of Commerce/Technology Opportunity
Program
- ₁₁ Dept of Transportation/Job Access Reverse
Commuting Program

c. Other Federal Programs (continued)

- ₁₂ Transportation Enhancements (from
metropolitan or state sources)
- ₁₃ Congestion Mitigation Air Quality (from
metropolitan or state sources)
- ₁₄ Low Income Heat and Energy Assistance Program
- ₁₅ Dept of Justice
- ₁₆ Dept of Labor
- ₁₇ Temporary Assistance for Needy Families (TANF)
- ₁₈ Other federal (specify) _____

d. Tax Credit Investments

- ₁ Low-income Housing Tax Credit
- ₂ Historic Preservation Tax Credit
- ₃ New Markets Tax Credit
- ₄ State tax credits

e. State/Local Programs

- ₁ State government (excluding CDBG, TANF,
and Transportation funds)
- ₂ Local government (excluding CDBG, TANF,
and Transportation funds)
- ₃ Tax-exempt bonds

f. Intermediary Organizations/Partnerships

- ₁ Local Initiatives Support Corp.
- ₂ Enterprise Foundation
- ₃ Neighborhood Reinvestment Corp/
Neighborhood Housing Services of America
- ₄ Housing Assistance Council
- ₅ National Council of La Raza
- ₆ Rural Development Finance Corporation
- ₇ Rural Community Assistance Corporation
- ₈ McAuley Institute
- ₉ Local intermediaries/partnerships/collaborations
- ₁₀ Other (specify) _____

g. Other Private-sector Sources

- ₁ Banks (excluding intermediary money)
- ₂ Foundations (excluding intermediary money)
- ₃ Corporations (excluding intermediary money)
- ₄ Insurance companies
- ₅ Religious institutions
- ₆ United Way
- ₇ Fannie Mae
- ₈ Freddie Mac
- ₉ Federal Home Loan Bank (FHLB) Affordable
Housing Program
- ₁₀ Other FHLB programs
- ₁₁ Fee income
- ₁₂ Pension funds
- ₁₃ Other (specify) _____

36. If you received equity from the Low-income Housing Tax Credit, did you receive—between January 2001 and December 2004—“net proceeds” totaling . . .

- | | |
|--|---|
| <input type="checkbox"/> ₁ Less than \$500,000 | <input type="checkbox"/> ₄ \$2,000,000 or more |
| <input type="checkbox"/> ₂ \$500,000 to \$999,999 | <input type="checkbox"/> ₅ Did NOT receive equity from LIHTC |
| <input type="checkbox"/> ₃ \$1,000,000 to \$1,999,999 | |

Section B: Amount and Sources of Operating Funds

37. In your **most recently completed fiscal year**, what amount did you spend on **non-development costs** (i.e., the amounts you spent on staff salaries, overhead, supplies, program delivery, and other items, and excluding development project costs)?

- | | |
|--|--|
| <input type="checkbox"/> ₁ Less than \$100,000 | <input type="checkbox"/> ₆ \$800,000 to \$999,999 |
| <input type="checkbox"/> ₂ \$100,000 to \$199,999 | <input type="checkbox"/> ₇ \$1,000,000 to \$1,499,999 |
| <input type="checkbox"/> ₃ \$200,000 to \$399,999 | <input type="checkbox"/> ₈ \$1,500,000 to \$1,999,999 |
| <input type="checkbox"/> ₄ \$400,000 to \$599,999 | <input type="checkbox"/> ₉ \$2,000,000 or more |
| <input type="checkbox"/> ₅ \$600,000 to \$799,999 | |

38. In your **most recently completed fiscal year**, from what sources do you receive \$10,000 or more in **core operating support** (i.e., support that was not earmarked for specific projects or programs)? (CHECK ALL THAT APPLY)

- | | |
|--|---|
| <input type="checkbox"/> ₁ Individuals' contributions | <input type="checkbox"/> ₆ State government |
| <input type="checkbox"/> ₂ Foundations | <input type="checkbox"/> ₇ Local government |
| <input type="checkbox"/> ₃ Corporations | <input type="checkbox"/> ₈ Earned income |
| <input type="checkbox"/> ₄ Intermediaries (national or local) | <input type="checkbox"/> ₉ Other (specify) _____ |
| <input type="checkbox"/> ₅ Federal government | <input type="checkbox"/> ₁₀ None of the above |

PART 4: OTHER IMPORTANT TOPICS

Section A: Target Communities

Community developers aim to promote revitalization of whole communities, not just serve the people who live in the housing units they build or participate in the programs they offer. This survey will collect, for the first time, good national information on the kinds of communities CBDOs work in, which together with other national data, can help document the community impacts they achieve.

42. Please estimate the percentage that each income group represented of the residents/beneficiaries of the projects you developed and/or the programs you offered between January 2001 and December 2004.

INCOME LEVEL OF RESIDENTS/BENEFICIARIES FROM 1/2001 THRU 12/2004	Percentage
a. Above 115% of area median income (above moderate income)	
b. Between 80%-115% of area median income (moderate income)	
c. Between 50%-80% of area median income (low income)	
d. Between 30%-50% of area median income (very low income)	
e. Below 30% of area median income (poverty level income)	
TOTAL	100%

43. What percentage of the residents/beneficiaries of the projects you developed and/or the programs you offered between January 2001 and December 2004 were . . . (Count each person only once.)

RACE/ETHNICITY OF RESIDENTS/BENEFICIARIES FROM 1/2001 THRU 12/2004	Percentage
a. African American	
b. White (non-Hispanic)	
c. Hispanic/Latino	
d. Asian Pacific American	
e. American Indian and Alaska Native	
f. Other (specify) _____	
TOTAL	100%

44. What percentage of the residents/beneficiaries of the projects you developed and/or the programs you offered between January 2001 and December 2004 would you estimate were recent immigrants to the United States?

_____ % Recent immigrants

Section B: Effects of Welfare Requirements and Economic Change

45. Through your community development work between January 2001 and December 2004, did you observe any of the following as a consequence of changes in welfare time limits, work requirements, or other aspects of changes in Federal or State laws or regulations pertaining to TANF? (CHECK ONE RESPONSE PER LINE)

	<u>Increase</u>	<u>Decrease</u>	<u>No change</u>	<u>Don't know</u>
a. Rental payment delinquencies	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
b. "Doubling up"	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
c. Crime in the area/neighborhood	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
d. People working in jobs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
e. People in job training programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
f. Need for child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
g. Need for transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
h. Other (specify) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

46. As a result of the changes listed in Question 45, did you experience an increased demand for any of the following services that you provided between January 2001 and December 2004? (CHECK ONE RESPONSE PER LINE)

	<u>Yes</u>	<u>No</u>	<u>Didn't provide service</u>	<u>Not applicable</u>
a. Job-related programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
b. Post-employment services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
c. Affordable housing	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
d. Homeless shelter services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
e. Family counseling/support	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
f. Entrepreneurship programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
g. Youth employment programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
h. Child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
i. Other (specify) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

47. As a result of changes due to welfare reform in the community(ies) you serve, with which of the following have you established new or significantly expanded working (or funding) relationships? (CHECK ALL THAT APPLY)

- | | |
|--|---|
| <input type="checkbox"/> ₁ State/county employment offices | <input type="checkbox"/> ₉ Community colleges |
| <input type="checkbox"/> ₂ State/county social services agencies | <input type="checkbox"/> ₁₀ Vocational schools |
| <input type="checkbox"/> ₃ Public-sector employers | <input type="checkbox"/> ₁₁ Child-care providers |
| <input type="checkbox"/> ₄ Private industry councils/workforce boards | <input type="checkbox"/> ₁₂ Health-care providers |
| <input type="checkbox"/> ₅ Private-sector employers | <input type="checkbox"/> ₁₃ Transportation providers |
| <input type="checkbox"/> ₆ Private staffing agencies | <input type="checkbox"/> ₁₄ Other (specify) _____ |
| <input type="checkbox"/> ₇ Job trainers/intermediaries | <input type="checkbox"/> ₁₅ Have NOT established new or expanded relationships |
| <input type="checkbox"/> ₈ Elementary/secondary schools | |

48. Have you added, dropped, or substantially changed the scale of your services **due to the U.S. economic changes since 2001?** (CHECK ALL THAT APPLY)

- ₁ Added
 ₂ Dropped
 ₃ Substantially increased scale
 ₄ Substantially decreased scale
 ₅ Have made NO changes due to economy

49. Please indicate whether funding has increased or decreased from the following sources **as a result of economic changes since 2001.** (CHECK ONE RESPONSE PER LINE)

	<u>Increase</u>	<u>Decrease</u>	<u>No change</u>	<u>Don't know</u>	<u>Not applicable</u>
a. Federal programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. State programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. Local government programs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. Financial intermediaries	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. Foundations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
f. Private sector	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
g. Individuals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
h. Fundraising	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

Section C: Faith-based Development

In recent years, the role of faith-based organizations in community development has gained new prominence. This section aims to capture information on the prevalence of faith-based organizations and their characteristics.

50. Do you consider yourself a “faith-based” organization? (For purposes of this survey, “faith-based” CBDOs are groups that are engaged in community economic development as an expression of religious or spiritual ministry, calling, or faith.)

- ₁ Yes → **IF YES, PLEASE ANSWER THE REMAINDER OF THIS SECTION, AS APPROPRIATE.**
₂ No → **IF NO, YOU HAVE COMPLETED THE SURVEY. PLEASE PLACE IT IN THE ENVELOPE PROVIDED, AND MAIL IT BACK TO US.**

51. Please check ALL of the following statements that describe your affiliation with or relationship to the faith community.

- ₁ Started by a faith-based organization but now independent
₂ Have board or other corporate links to a religious entity
₃ Are a non-profit [501(c)(3)] controlled by a religious entity
₄ Are a community-based corporation with other kinds of “faith roots”

52. Which of the following best describes the body involved in your founding?

- | | |
|---|--|
| <input type="checkbox"/> ₁ A congregation | <input type="checkbox"/> ₄ Interfaith association |
| <input type="checkbox"/> ₂ Denominational agency | <input type="checkbox"/> ₅ Independent ministry |
| <input type="checkbox"/> ₃ Christian ecumenical agency | <input type="checkbox"/> ₆ Other (specify) _____ |

53. With which religious tradition(s) is your organization or its founding body affiliated? (CHECK ALL THAT APPLY)

- | | |
|---|--|
| <input type="checkbox"/> ₁ Christian: | |
| <input type="checkbox"/> ₂ Roman Catholic | <input type="checkbox"/> ₄ Protestant — Evangelical |
| <input type="checkbox"/> ₃ Protestant — Mainline | <input type="checkbox"/> ₅ Eastern Orthodox |
| <input type="checkbox"/> ₆ Jewish | |
| <input type="checkbox"/> ₇ Muslim | |
| <input type="checkbox"/> ₈ Buddhist | |
| <input type="checkbox"/> ₉ Other (specify) _____ | |

54. What is the racial or ethnic composition of the **majority** of the congregation with which your organization or its founding body is affiliated? (CHECK ONLY ONE RESPONSE)

- | | |
|--|---|
| <input type="checkbox"/> ₁ African American | <input type="checkbox"/> ₅ American Indian and Alaska Native |
| <input type="checkbox"/> ₂ White (non-Hispanic) | <input type="checkbox"/> ₆ Other (specify) _____ |
| <input type="checkbox"/> ₃ Hispanic/Latino | <input type="checkbox"/> ₇ No congregational affiliation |
| <input type="checkbox"/> ₄ Asian Pacific American | |

55. Which of the following best describes the executive director of your organization?

- | |
|---|
| <input type="checkbox"/> ₁ Religious leader (for example, minister, rabbi) |
| <input type="checkbox"/> ₂ Congregation member |
| <input type="checkbox"/> ₃ Neither of the above |

56. As a result of your affiliation (or that of your founding body) with a congregation, denomination, or other ecumenical/interfaith group, did you receive financial support from religious sources between January 2001 and December 2004?

- | | |
|---|---|
| <input type="checkbox"/> ₁ Yes → | IF YES, ANSWER QUESTION 56.a, BELOW. |
| <input type="checkbox"/> ₂ No → | IF NO, SKIP TO QUESTION 57. |

a. How much financial support from all religious sources did you receive annually—on average—between January 2001 and December 2004? \$ _____
--

57. Did you receive in-kind support from religious sources between January 2001 and December 2004?

- ₁ Yes → **IF YES, ANSWER QUESTION 57.a, BELOW.**
- ₂ No → **IF NO, SKIP TO QUESTION 58.**

a. What type(s) of in-kind support did you receive from religious sources between January 2001 and December 2004? (CHECK ALL THAT APPLY)

<input type="checkbox"/> ₁ Office space and equipment use	<input type="checkbox"/> ₄ Accounting services
<input type="checkbox"/> ₂ Land	<input type="checkbox"/> ₅ Loaned staff
<input type="checkbox"/> ₃ Legal services	

58. Is it your mission to foster a religious purpose, for example, as expressed in a formal mission statement or in other public outreach materials?

- ₁ Yes → **IF YES, ANSWER QUESTIONS 59 AND 60.**
- ₂ No → **IF NO, SKIP TO QUESTION 61.**

59. In furtherance of your religious mission or activities, do you . . . (CHECK ONE RESPONSE PER LINE)

	<u>Yes</u>	<u>No</u>
a. Expect/require the people you serve to engage in religious activities?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
b. Expect/require your employees to engage in religious activities?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
c. Hire only those who adhere to the religious tradition that your organization or its founding body represents?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

60. In the last two years, have you been informed that a program to which you have applied for support does not permit funding of groups that carry out activities listed in Question 59?

- ₁ Yes → **IF YES, ANSWER QUESTION 60.a, BELOW.**
- ₂ No → **IF NO, SKIP TO QUESTION 61.**
- ₃ Don't know → **IF DON'T KNOW, SKIP TO QUESTION 61.**

a. Were the programs funded by . . . (CHECK ALL THAT APPLY)

<input type="checkbox"/> ₁ Public (government) agencies?	<input type="checkbox"/> ₃ Corporations?
<input type="checkbox"/> ₂ Foundations?	<input type="checkbox"/> ₄ Other (specify) _____

61. Do you think that faith-based groups that receive **public** funds should be able to . . . (CHECK ONE RESPONSE PER LINE)

	<u>Yes</u>	<u>No</u>
a. Expect/require the people served to engage in religious activities?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
b. Expect/require their employees to engage in religious activities?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂
c. Hire only those who adhere to the religious tradition that the organization represents?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂

62. Have you ever been sought out by a private or public funder to do or participate in a community improvement project **because** you are faith-based?

₁ Yes

₂ No

63. Please indicate the degree to which you agree/disagree with the following statements regarding your organization's ties to a faith community or communities. (CHECK ONE RESPONSE PER LINE)

	<u>Strongly Agree</u>	<u>Somewhat Agree</u>	<u>Neutral</u>	<u>Somewhat Disagree</u>	<u>Strongly Disagree</u>
a. Induces the faith community(ies) to become more alert and responsive to community needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b. Allows the faith community(ies) to withdraw from active forms of support	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c. Encourages other faith communities to pursue community development more actively	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d. Results in the faith community(ies) unwanted meddling in your organization's affairs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e. Has had little or no effect on the faith community's activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

**THANK YOU FOR COMPLETING THE
FIFTH NATIONAL COMMUNITY DEVELOPMENT CENSUS**

Please return your completed questionnaire in the enclosed envelope by February 8, 2005:

BY MAIL:

**Fifth National Community Development Census
2277 Research Boulevard, MS 6Y
Rockville, MD 20850-3166**

BY FAX:

301-519-6300