

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



NOV-6-2002 11:27A FROM:

Form	9	90	Uı			_ , or 4947(a)(1)	of the inte	empt Fro					OMB No 15	09
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Assets	20	Total assets	(Part X, Ili	ne 16) •) . 🖵			8∤ · · · □		397,8	95		478,000
Fund Bail-	21	Total liabilitie	es (Part X,	line 26)	• • • • • •	· · \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	1111- 2-	G 2010	Ŷ · · · [_		5,9	73		0
2000	22	Net assets o	r fund bala	ances. Sut	stract line 21	from line 20	JOB 1		<u> </u>		391,9	22		478,000
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For P	rivacy	Act and Pape	erwork Re	duction A	t Notice, sec	the separate	Instruction	18.			EE	۹ .	Form 1	990 (2009)

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Part III Statement of Program Service Accomplishments 1 Briefly describe the organization's mission To Increase and preserve the supply of decent, affordable for low-income and moderate-income households. 2 Did the organization undertake any significant program services during the y the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O 3 Did the organization cease conducting, or make significant changes in how in services? If "Yes," describe these changes on Schedule O	year which were not listed on
To Increase and preserve the supply of decent, affordable for low-income and moderate-income households. 2 Did the organization undertake any significant program services during the y the prior Form 990 or 990-EZ?	year which were not listed on
for low-income and moderate-income households. 2 Did the organization undertake any significant program services during the y the prior Form 990 or 990-EZ?	year which were not listed on
 Did the organization undertake any significant program services during the y the prior Form 990 or 990-EZ?	tt conducts, any program Yes X No Yes X No Tree largest program services by expenses are required to report the amount of grants and am service reported Of \$) (Revenue \$779,112_) and provides direct technical
the prior Form 990 or 990-EZ?	tt conducts, any program Yes X No Yes X No Tree largest program services by expenses are required to report the amount of grants and am service reported Of \$) (Revenue \$779,112_) and provides direct technical
the prior Form 990 or 990-EZ?	tt conducts, any program Yes X No Yes X No Tree largest program services by expenses are required to report the amount of grants and am service reported Of \$) (Revenue \$779,112_) and provides direct technical
the prior Form 990 or 990-EZ?	tt conducts, any program Yes X No Yes X No Tree largest program services by expenses are required to report the amount of grants and am service reported Of \$) (Revenue \$779,112_) and provides direct technical
3 Did the organization cease conducting, or make significant changes in how is services?	rree largest program services by expenses are required to report the amount of grants and am service reported of \$) (Revenue \$
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If "Voc." describe these changes on Schedule O	are required to report the amount of grants and am service reported of \$) (Revenue \$779,112_) and provides direct technical
11 Tes, describe these changes on otherdire of	are required to report the amount of grants and am service reported of \$) (Revenue \$779,112_) and provides direct technical
4 Describe the exempt purpose achievements for each of the organization's the	am service reported of \$) (Revenue \$779,112_) and provides direct technical
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts	of \$) (Revenue \$779,112) and provides direct technical
allocations to others, the total expenses, and revenue, if any, for each progra	and provides direct technical
4a (Code) (Expenses \$ 585,634 including grants	and provides direct technical
Housing Action Illinois provides the following services:	
nousing mouse provides one many mouse and	
1) Technical Assistance and traning - Conducts workshops	
assistance to not-for-profit housing developers and housi	
2) Public Policy and Advocacy - A coalition of community	
increase housing opportunities for Illinois' lower income	residents.
3) Public Education and Organizing ~ Educates individuals	through wahrite and research
studies and keeps the housing development and advocacy fi	
developments and changes.	STA WOLL INTOLNOM OF TOOMING THROUGH
dovozopano. Os ana ondangos	
4b (Code) (Expenses \$ including grants	of \$) (Revenue \$)
4c (Code) (Expenses \$ including grants	of \$) (Revenue \$)
•	
4d Other program services (Describe in Schedule O)	
(Expenses \$ including grants of \$) (Revenue \$
4e Total program service expenses 585,634	EEA Form 990 (2009)

			V	
	1		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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	1		
	Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part i	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
Ū	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	Ť		
J	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
		9		Х
40	complete Schedule D, Part IV	-		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	40	ļ	Х
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	44	v	
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete			
	Schedule D, Part VI			
•	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			
•	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			
•	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			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	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? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		.	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part L	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any]
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
10	If "Yes," complete Schedule G, Part III	19		X _
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
<u> </u>	EEA	Form	990 (2009)

Checklist of Required Schedules (continued) Part IV Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 21 X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and IL Did the organization report more than \$5,000 of grants and other assistance to individuals in the 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 X 23 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 X 24a Did the organization maintain an escrow account other than a refunding escrow at any time during the year Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a X 25a 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 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L. Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? X 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) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28a а A family member of a current or former officer, director, trustee, or key employee? If "Yes." complete X 28b An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c X X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, X Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

38

19? Note, All Form 990 filers are required to complete Schedule O

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Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Enter

Housing Action Illinois Page 6 Form 990 (2009) 'Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Section A. Governing Body and Management Yes No 16 Enter the number of voting members that are independent 16 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 6 X 6 Does the organization have members, stockholders, or other persons who may elect one or more members 7a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?...... Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. 8a Each committee with authority to act on behalf of the governing body?........... Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes Nο X 10a b If "Yes." does the organization have written policies and procedures governing the activities of such chapters, 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 11 X form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b Х Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c X 13 X 13 X 14 14 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? 15a X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard Section C. Disclosure 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 (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply X Another's website Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest

policy, and financial statements available to the public

organization > Sharon Legenza (312)939-6074

20

State the name, physical address, and telephone number of the person who possesses the books and records of the

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

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

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. Use Schedule J-2 if additional space is needed

- 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 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

(A)	(B)			(6)			(D)	(E)	(F)
Name and Title	Average hours per week	Position of the position of th	I t n r s u t s i t e u e	0++-6	Key emplo	Hc e I o m g m p h p I e e o s n y t s e t	F	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Cheryll Boswell			o n a i		e e	e d				
Co-Chairman	2.00			X				0	o	o
Bob Campbell	2.00									
Director	2.00	X								
Joyce Hothan										
Secretary	2.00			Х						
Kurt Kuyawa										
Treasurer	2.00			X						
Ofelia Navarro										
Director	2.00	X								
Joe Neri										
Director	2.00	X								
Laurie Peterson										
Director	2.00	X					L.			
Cathy Grafton						1				
Director	2.00	X					L			
Gail Schechter										
Director	2.00	X		ļ			_			
Mary Ellen Tamasy			1							
Co-Chairman	2.00	ļ		X			ļ			
Al Timke							ļ			
Director	2.00	X		_			ļ			
Mike Wasserberg						1				
Director	2.00	X	<u> </u>	ļ	<u> </u>	-	├ ─			
Linda Bookwalter						1				
Director	2.00	X	<u> </u>	_	<u> </u>	ļ	 		<u> </u>	
Ryan Dowd								!		
Director	2.00	X	<u> </u>		<u> </u>	 	├ ─	 		
Mary Walker			1							
Director	2.00	X	├			ļ	 	<u> </u>		
Sharon Legenza					х	x		1		

36-3585238

Pa	rt VII Section A. Officers, Directors, Trustee	s, Key Emplo	yees,	and	d Hi	ghes	st Con	npen	sated Employees	(continued)			
	(A)	(B)			(C)			(D)	(E)		(F)	
	Name and Title	Average		_	_	_	that app		Reportable	Reportable	1	stimate	
		hours per week	l t d	l n i	r f	K	H c e	F	compensation from	compensation from related	l a	mount o	1
			d u r	1 t :	s ı	y e	g m p	μ	the	organizations	1	npensat	
			v t c	i t e	e e	m	e e o s n y	e r	organization (W-2/1099-MISC)	(W-2/1099-MISC)	1	rom the ganizati	
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Mic	helle Rodriguez-Taylor		 	-								_	
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			 	-	 	┼							
1b	Total			+	 	 -			0	0			0
2	Total number of individuals (including but not limite										+	-	
_	reportable compensation from the organization			•						0_			
												Yes	No
3	Did the organization list any former officer, director												
	employee on line 1a? If "Yes," complete Schedule									• • • • • • • •	3	-	X
4	For any individual listed on line 1a, is the sum of re												
	the organization and related organizations greater						ete Scr	neau	ie J for such		4		X
5	Individual						ed orga	· ·	tion for		-		
5	services rendered to the organization? If "Yes," cor										5		X
Sec	ction B. Independent Contractors												
1	Complete this table for your five highest compensa	ted independ	ent co	ntra	ctor	s tha	t rece	ved	more than \$100,0	00 of	,		-
	compensation from the organization												
	(A)								(B)	Ì		(C)	
	Name and business addr	ess							Description of	services	Comp	ensat <u>io</u>	n
												_	
				-									
									L				
2	Total number of independent contractors (including	but not limite	ed to the	hose	list	ed a	bove)	who	received				
	more than \$100,000 in compensation from the orga												

Form 99			s			36-358523	8 Page 9
Part \	/	· Statement of Revenue					
	•	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contri- butions,	1a b c	Federated campaigns 1a Membership dues 1b Fundraising events 1c	23,103				
gifts, grants and other similar amounts	d e f	All other contributions, gifts, grants, and similar amounts not included above 1d 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f 5					
	h	Total. Add lines 1a-1f	<u> </u>	758,639			
Program Service Revenue	b	Conferences & Trainings	Business Code 531390	16,149	16,149		
	d e						
	l .	All other program service revenue					
	9	Total. Add lines 2a-2f	• • • • • • • •	16,149			
	4	Investment income (including dividends, interest other similar amounts)	ceeds	4,324	4,324		
	5	Royalties	• • • • • • •				
	b b	Gross Rents	(II) Personal			:	
		Gross amount from sales of assets other than inventory	(ii) Other				
Other Revenue	c d 8a b c 9a b c	Less cost or other basis and sales expenses					-
	b	returns and allowances	Business Code		-		_
	b c d	All other revenue	•••••				
	12	Total revenue. See instructions		779,112	20,473	0	Form 990 (2009)
			EEA				, Onn 990 (2009)

36-3585238

Part IX **Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete colum		uired to complete colu	mns (B), (C), and (D).	
	o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and	- -	Спропосо	garrata anparious	
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	US See Part IV, lines 15 and 16			:	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	377,658	298,214	27,028	52,416
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	48,953	39,988	3,039	5,926
10	Payroll taxes	28,836	22,764	2,208	3,864
11	Fees for services (non-employees)				
а	Management				
þ	Legal				
С	Accounting	30,437	2,054	28,383	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17.				
f	Investment management fees				
g	Other	83,937	82,339	929	669
12	Advertising and promotion			_	
13	Office expenses	10,198	8,697	957	544
14	Information technology				
15	Royalties				
16	Occupancy	44,164	35,765	3,099	5,300
17	Travel	20,655	19,134	1,431	90
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	33,468	33,468		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,044	2,466	213	365
23	Insurance	2,232	1,766	204	262
24	Other expenses Itemize expenses not				,
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				,
	5% of total expenses shown on line 25 below)				
a	Staff Development	618	550	33	35
þ	Awards & Grants	2,900	2,900		
C	Subscriptions & Dues	12,389	8,011	2,787	1,591
d	Equipment Rental	6,385	4,774	934	677
е	Telephone and Internet	13,718	12,226	422	1,070
f	All other expenses	12,624	10,518	455	1,651
25	Total functional expenses. Add lines 1 through 24f	732,216	585,634	72,122	74,460
26	Joint Costs. Check here if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				Form 990 (2009)
		EEA			FUIIII 330 (2009)

Balance Sheet Part X (A) (B) End of year Beginning of year 1 1 313,376 365,630 2 2 3 3 56,250 79,909 4 12,393 4 12,344 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Α s 7 7 S Notes and loans receivable, net 8 8 9 Prepaid expenses and deferred charges 9 6,578 13,863 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D. | 10a 13,815 Less accumulated depreciation 10b 10c 10,961 b 5,898 2,854 11 11 12 12 13 13 14 14 15 15 3,400 3,400 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 397,895 478,000 17 17 5,973 18 18 L 19 19 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties 23 е 24 24 25 25 26 0 5,973 Organizations that follow SFAS 117, check here 🕨 💢 and complete lines 27 through 29, and lines 33 and 34. NF u 27 27 е 218,922 478,000 t n 28 28 173,000 d 29 29 s В Organizations that do not follow SFAS 117, check here S а and complete lines 30 through 34. е 1 t а 30 30 n Paid-in or capital surplus, or land, building, or equipment fund 31 31 C 32 0 32 Retained earnings, endowment, accumulated income, or other funds е S 33 33 391,922 478,000 34 34 478,000 397,895 Form **990** (2009)

Form	990 ((2009) Housing Action Illinois 36-3585238		Pa	ige 12
Par	t XI	Financial Statements and Reporting			
	•			Yes	No
1	Acco	ounting method used to prepare the Form 990 🗌 Cash 🔀 Accrual 🗌 Other			
	If the	e organization changed its methods of accounting from a prior year or checked "Other," explain in	ŀ		
	Sche	edule O			
2a	Were	e the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b	Were	e the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Ye	es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the a	audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the	e organization changed either its oversight process or selection process during the tax year, explain in			
	Sche	edule O			
d	If "Ye	es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	ľ		
	issue	ed on a consolidated basis, separate basis, or both		ĺ	
		Separate basis Consolidated basis Both consolidated and separate basis			
За	As a	result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the S	Single Audit Act and OMB Circular A-133?	3a		X
b	If "Ye	es," did the organization undergo the required audit or audits? If the organization did not undergo the			

Form **990** (2009)

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

EEA

Public Charity Status and Public Support

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. See separate instructions. Open to Public Inspection

Employer identification number

Hou	sing	Action Illinois	s						36-35	85238		
Pa	rt I	Reason for	Public Charity	Status (All organiz	ations mu	st complete	this part) See inst	ructions			
The	orga	nization is not a priva	ite foundation bec	ause it is (For lines 1 th	rough 11,	check only	one box)				
1		A church, convention	n of churches, or a	ssociation of churches d	escribed ir	section 1	70(b)(1)(A	A)(I).				
2		A school described in	n section 170(b)(1	I)(A)(II). (Attach Schedu	le E)							
3		A hospital or a coope	erative hospital ser	vice organization descri	bed in sec	tion 170(b)(1)(A)(III)					
4		A medical research of	organization opera	ted in conjunction with a	hospital d	escribed in	section 1	170(b)(1)(<i>i</i>	A)(III). Ente	er the hosp	otal's name,	
		city, and state										
5		An organization ope	rated for the bene	fit of a college or univer	sity owned	l or operate	ed by a go	vernment	al unit des	cribed in		
		section 170(b)(1)(A))(Iv). (Complete Pa	art II)								
6		A federal, state, or lo	cal government or	governmental unit desc	ribed in s e	ction 170(b)(1)(A)(v	').				
7	X	An organization that	normally receives	a substantial part of its	support fr	om a gove	rnmental	unit or froi	m the gene	eral public		
		described in section 170(b)(1)(A)(vi). (Complete Part II)										
8		A community trust described in section 170(b)(1)(A)(vI). (Complete Part II)										
9	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross											
	receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its											
		support from gross (nvestment income	and unrelated business	s taxable ı	ncome (les	s section	511 tax) f	rom busine	esses		
		acquired by the orga	ınızatıon after June	30, 1975 See section	509(a)(2).	(Complete	Part III)					
10		•	•	ed exclusively to test for p		-						
11				ed exclusively for the be								
				orted organizations desc						section		
		509(a)(3). Check the	box that describe	s the type of supporting								
	_	a Type I	b 🔲 Typ	_		-Functiona			d (II-Other	
е			-	organization is not cont								
		•		ers and other than one o	or more pu	iblicly supp	orted orga	anizations	described	I in section		
_		509(a)(1) or section				~	T 11	. T				
f				letermination from the IF				ir Type III	supporting	}		
_		•							• • • • •	• • • • •		• • •
g		-	oo, nas me organi	ization accepted any gif	t or contin	Julion nom	ally Of the	5				
		following persons?	directly or indirectly	y controls, either alone o	or togethe	r with nors	nne deecri	ibed in (ii)			Yes	No
				iy of the supported orga							11g(l)	+ "
				cribed in (i) above?							11g(li)	+
				on described in (i) or (ii)							11g(III)	
h		· ·		it the supported organiz								
	(I) N	ame of supported	(II) EIN	(III) Type of organization	 	organization	(v) Did ye	ou notify	(vi) I	Is the	(vII) Amou	nt of
	``	organization		(described on lines 1-9		sted in your	the organ		organizat		suppor	t
				above or IRC section (see Instructions)	governing	document?	col (I) sup	or your port?	(I) organiz U :			
					Yes	No	Yes	No	Yes	No		
					1							
						ļ				ļ		
												
_										 		
Tota	11				L			L				

36-3585238

	(Complete only if you checked the	e box on line 5, 7,	or 8 of Part I)				
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	696,257	560,216	622,945	678,725	774,788	3,332,931
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	696,257	560,216	622,945	678,725	774,788	3,332,931
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 In 4						3,332,931
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	696,257	560,216	622,945	678,725	774,788	3,332,931
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1	1,099	7,424	10,540	4,324	23,388
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 .						3,356,319
12	Gross receipts from related activities, etc	(see instructions).				12	
13	First five years. If the Form 990 is for the organization, check this box and stop here	• • • • • • • •					••••
	tion C. Computation of Public Su	*					
14	Public support percentage for 2009 (line 6,						99.30 %
15	Public support percentage from 2008 Sche				•		%
l6a	33 1/3% support test - 2009. If the organiz						
	and stop here. The organization qualifies a		•				· · · · ▶ X
b							
	box and stop here . The organization qualifi						••••
17a							
	more, and if the organization meets the "fac			•			
	organization meets the "facts-and-circums		_				•••• ▶□
b	10%-facts-and-circumstances test - 2008						
	more, and if the organization meets the "fac			•	•		
18	organization meets the "facts-and-circumst Private foundation. If the organization did						, _

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

(Complete only if you checked the box on line 9 of Part I.) Part III

	(Complete only if you checked the	box on line 9 o	rParti)				
	ction A. Public Support	(-) 0005	(1.) 0000	1 () 0007	(4) 0000	4-1.0000	(D. T.)
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		i i				
2	Gross receipts from admissions, merchan-						
	dise sold or services performed, or fac- lities furnished in any activity that is related to the organization's tax-exempt purpose			_			
3	Gross receipts from activities that are not an unrelated trade or bus under sec 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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	ction B. Total Support				·		
Cale	endar year (or fiscal year beginning in) 🕨 🏻	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the or organization, check this box and stop here.			rth, or fifth tax yea	r as a section 501(c)(3)	
Sec	ction C. Computation of Public Sup			***			
15	Public support percentage for 2009 (line 8,						<u>%</u>
16	Public support percentage from 2008 Scheo			• • • • • • •		. 16	%
Sec	ction D. Computation of Investmen						
17	Investment income percentage for 2009 (line					1 1	<u>%</u>
18	Investment income percentage from 2008 Sc						%
	33 1/3% support tests - 2009. If the organiz 17 is not more than 33 1/3%, check this box	and stop here.	The organization q	ualifies as a public	ly supported organ	iization	•••••
	33 1/3% support tests - 2008. If the organiz line 18 is not more than 33 1/3%, check this	box and stop h e	e re . The organization	on qualifies as a pi	ublicly supported o	rganization	,
20	Private Foundation: If the organization did	not check a box	on line 14, 19a, or	190, check this bo	x and see instructi	ons <u>• • • • •</u>	· · · · · · · · · · · · · · · · · · ·

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2009

Open to Public Inspection

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

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

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

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

	Section 501(c)(4), (5), or (6) organization	ns Complete Part III			
Ν	ame of organization			Employer id	dentification number
E	lousing Action Illinois			36-3585	
P	art I-A Complete if the organ	ization is exempt under sed	ction 501(c) or i	s a section 527 orgai	nization.
1	Provide a description of the organization	n's direct and indirect political camp	aign activities in Par	t IV	
2	Political expenditures			· · · · · · • \$	
3	Volunteer hours				
Pi	art I-B Complete if the organ	ization is exempt under sec	ction 501(c)(3).		·
1	Enter the amount of any excise tax incu	rred by the organization under secti	on 4955	· · · · · · · > \$	
2	Enter the amount of any excise tax incu	rred by organization managers und	er section 4955		
3	If the organization incurred a section 49	55 tax, did it file Form 4720 for this	year?		. Yes No
4a	Was a correction made?				. Yes No
t					
Pi	art I-C Complete if the organ	ization is exempt under sec	ction 501(c), exc	cept section 501(c)(3).
1	Enter the amount directly expended by t	the filing organization for section 52	7 exempt function		
	activities			· · · · · · · • \$	
2	Enter the amount of the filing organization	on's funds contributed to other orga	nizations for section	·	
	527 exempt function activities			\$	
3	Total exempt function expenditures Add	d lines 1 and 2 Enter here and on F	orm 1120-POL,		
	line 17b			• • • • • • • • • • • • • • • • • • •	
4	Did the filing organization file Form 1120	PPOL for this year?	. .		. Yes No
5	State the names, addresses and employ	yer identification number (EIN) of al	l section 527 politica	al organizations to which pa	yments
	were made. For each organization listed	d, enter the amount paid from the or	ganization's funds	Also enter the amount of po	olitical
	contributions received that were prompt	ly and directly delivered to a separa	ite political organiza	tion, such as a separate se	gregated
	fund or a political action committee (PAI	C) If additional space is needed, pr	ovide information in	Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Hame	(2) //33/353	(0) 2	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
_					
				<u> </u>	

f Grassroots lobbying expenditures

	art II-A Complete if the organization	1111nois	lar applian FO1	a\(2\ and filed	30-33832.	
Pa	complete if the organization under section 501(h)).	ı is exempt und	ier section 50 i	c)(3) and med	romi 5766 (eleci	lion
A	Check Inf the filing organization belongs to	n an affiliated group				
	Check if the filing organization checked			oniv		
		ying Expenditures	ontrol providence a		(a) Filing	(b) Affiliated
	(The term "expenditures" m		or incurred.)		organization's totals	group totals
1a					10,583	
b	, ,		7,056			
c			17,639			
d	, , , , , , , , , , , , , , , , , , , ,	•			714,577	·
е					732,216	
f					-	
	columns	•			134,832	
	If the amount on line 1e, column (a) or (b) is:	The lobbying r	nontaxable amount	ls:		
	Not over \$500,000	20% of the am				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g					33,708	
h	Subtract line 1g from line 1a. If zero or less, ent	ter -0				
ı	Subtract line 1f from line 1c If zero or less, enter	er-0	· • • • • • • • • • • • • • • • • • • •			
j	If there is an amount other than zero on either I	ine 1h or line 1i, did	the organization file	Form 4720 reporti	ng	
	section 4911 tax for this year?					Yes X No
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)						
	Lobby	/ing Expenditures [During 4-Year Avera	ging Period	· · · · · · · · · · · · · · · · · · ·	
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount	103,761	122,247	120,892	134,832	481,732
t	Lobbying ceiling amount (150% of line 2a, column (e))					722,598
	Total lobbying expenditures	3,501	13,625	10,110	17,639	44,875
	Grassroots nontaxable amount	25,940	30,562	30,223	33,708	120,433
	Grassroots ceiling amount (150% of line 2d, column (e))					180,650

	(election under section 501(h)).	(a)		(b)	
		Yes	No	Aı	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
ı	Other activities? If "Yes," describe in Part IV					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
Ь	•					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
<u>d</u>		(E) a				
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), C	r sec	HOII		
····	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	165	140
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
_	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)					
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, li				ı	
	"Yes."					
1	Dues, assessments and similar amounts from members	• •	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a	l		
	Carryover from last year					
þ			2b			
b c	Total		2b 2c			
						•
c	Total		2c			
с 3	Total	••	2c 3			_
с 3	Total	•••	2c 3			
с 3 4	Total	•••	2c 3			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			
5 Pa	Total	•••	2c 3 4 5			

(Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

	of the organization	Employer Identification number
	using Action Illinois	36-3585238
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds	s or Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	<u> </u>
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 advisors	sed
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
_	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	, raitiv, into r
•	Preservation of land for public use (e.g., recreation or pleasure) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an history	orically important land area
	Protection of natural habitat Preservation of a certification of particle and the preservation of a certification of preservation	
	Preservation of open space	ed matoric structure
2		of a concernation
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	of a conservation
	easement on the last day of the tax year	Hold state Ford of the Tou Year
_	Total number of concernation accompate	Held at the End of the Tax Year
a	Total number of conservation easements	
Þ	Total acreage restricted by conservation easements	
C	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by th	e organization during
_	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements d	uring the year
_	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	the year
_	\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
_	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expens	•
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statem	ents that describes
D -	the organization's accounting for conservation easements	01101111
Pa	organizations Maintaining Collections of Art, Historical Treasures, or Collections	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and b	
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furt	herance of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
þ	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balar	
	historical treasures, or other similar assets held for public exhibition, education, or research in furthers	ance of public service,
	provide the following amounts relating to these items	
	(I) Revenues included in Form 990, Part VIII, line 1	
	(II) Assets included in Form 990, Part X	•
2	If the organization received or held works of art, historical treasures, or other similar assets for financial	al gain, provide the
	following amounts required to be reported under SFAS 116 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	····· • \$

	dule D (Form 990) 2009 Housing Action Illin						36-358523			age 2
Pa	rt III 💛 Organizations Maintaining Co							ets (co	ontinue	ed)
3	Using the organization's acquisition, accession, an	d other red	ords, check an	y of the fo	llowing that	are a si	gnificant use of its			
	collection items (check all that apply)									
а	Public exhibition	d 🗌	Loan or excha	nge progr	ams					
b	Scholarly research	е 🗌	Other							
С	Preservation for future generations									
4	Provide a description of the organization's collection	ons and exp	olain how they	urther the	organizatio	n's exen	npt purpose in			
	Part XIV									
5	During the year, did the organization solicit or rece	ive donatio	ns of art, histo	rıcal treası	ures, or othe	r sımılaı	•			
	assets to be sold to raise funds rather than to be n	naintained	as part of the o	rganızatıor	n's collection	1 ⁷ •••		. 🗌 Y	es [No
Pa	rt IV Escrow and Custodial Arrange	ements.	Complete if or	ganızatıon	answered "	'Yes" to	Form 990,			
	Part IV, line 9, or reported an amount o	n Form 990), Part X, line 2	1						
1a	Is the organization an agent, trustee, custodian or	other interi	nediary for con	tributions	or other ass	ets not				
	ıncluded on Form 990, Part X?							. 🗌 Y	'es [No
b	If "Yes," explain the arrangement in Part XIV and o	complete th	e following tab	е						
							Amo	unt		
С	Beginning balance					10	;		-	
d	Additions during the year					10	t i			
е	Distributions during the year					10	•	,		
f	Ending balance						•			
2a	Did the organization include an amount on Form 9	90, Part X,	line 21?					. 🗍 Y	es [No
b	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete if the	e organiza	tion answered	'Yes" to Fo	orm 990, Pa	rt IV, lın	e 10			
	(a) Current ye	ar (b) Pri	or year	(c) Two yea	rs back	(d) Three years back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses .									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year end	balance he	ld as							
а	Board designated or quasi-endowment	%	•							
b	Permanent endowment %									
С	Term endowment > %									
За	Are there endowment funds not in the possession	of the orga	nization that ar	e held and	d administer	ed for th	е			
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		
	(II) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations liste	d as requir	ed on Schedule	R?				3b		
4	Describe in Part XIV the intended uses of the orga	nızatıon's e	endowment fun	ds						
	rt VI Investments - Land, Buildings				990, Part X,	line 10				
	Description of investment	1	or other basis		t or other s (other)		Accumulated epreciation	(d) Boo	k value	
1a	Land	•	·						-	
b	Buildings	. —	······································		,					
	Leasehold improvements									
	Equipment		13,815				10,961		2	,854

organization's liability for uncertain tax positions under FIN 48

16-				

Part, VII	' Investments - Other Securitie	S. See Form 990, Part X, line 12		
•	(a), Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial dei	rvatives			
Closely-held	equity interests			
O41			····	_
Other				
Total (Column	(b) must equal Form 990, Part X col (B) line 12)	.		
Part VIII	Investments - Program Relate	See Form 990 Part Y June 13		
Fait VIII	investments - r rogram neiate	See Form 990, Part X, line 13		
	(a) Description of investment type	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market value	
	_			
				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX	Other Assets. See Form 990, Part	X, line 15		
		(a) Description	(b) Book va	alue
Rental Dep	nosit			3,400
Keneur bej				3,100
- 		-		
			<u></u>	
Total. (Colun	nn (b) must equal Form 990, Part X, col (B)	line 15)		3,400
Part X	Other Liabilities. See Form 990, P.			
·				
<u>1</u>	(a) Description of liability	(b) Amount		
Federal inco	me taxes			
Total (Column	(b) must equal Form 990, Part X, col (B) line 25)			
	ootnote In Part XIV, provide the text of the			

_	rt.XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	30-3585238	Page 4
1			
2	Total revenue (Form 990, Part VIII, column (A), line 12)	1	779,112
3	· · · · · · · · · · · · · · · · · · ·	2	732,216
4	Excess or (deficit) for the year Subtract line 2 from line 1	3	46,896
-	Net unrealized gains (losses) on investments	4	
5		5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	Dotum	46,896
1	··· · · · · · · · · · · · · · · · · ·		
2	Total revenue, gains, and other support per audited financial statements	1	779,112
a			
a b	Net unrealized gains on investments	-	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIV)	-	
e	Add lines 2a through 2d	- ₀₋	
3	Subtract line 2e from line 1	2e	
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	779,112
_			
a		-	
b	Other (Describe in Part XIV)	-	
С 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	4c	
_	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	5	779,112
1	Total expenses and losses per audited financial statements	1	722 216
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	732,216
a	Donated services and use of facilities		
b	Prior year adjustments	-	
c	Other losses	- i	
d	Other (Describe in Part XIV)	-	
e	Add lines 2a through 2d	⊣ _{2e}	
3	Subtract line 2e from line 1	3	732,216
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	/32,216
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	-	
	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	732,216
Pa	t XIV Supplemental Information		1327210
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1	b	
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
this	part to provide any additional information		
			

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

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

Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

Housing Action Illinois	36-3585238
01. Members or stockholder classes and rights (Part VI, line 6)	
Housing Action Illinois is open to organizations and individuals who wish to be membe	ers by
subscribing to Housing Action Illinois' mission and by paying dues as determined by t	he
Board of Directors	
02. Member election for additional members (Part VI, line 7a)	
At each Housing Action Illinois Annual Membership meeting, the open Director seats ar	re
voted upon by member organizations.	
03. Form 990 governing body review (Part VI, line 11)	
The Audit Committee reviewed the 990 prior to submission. Conflict of interest statem	ents
are signed by the Board annually and any potential conflicts are encouraged to be sha	red.
04. CEO, executive director, top management comp (Part VI, line 15a)	
Executive Director compensation is voted, determined and approved by the Board of	
Directors.	
05. Other officer or key employee compensation (Part VI, line 15b	
Employee compensation is determined and approved by the Executive Director.	
06. Governing documents, etc, available to public (Part VI, line 19)	
Financial Statements and 990s are available to the public via the Illinois Attorney	
General's office and by request.	