



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



Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009

| | | | | |
|--|--|--|---|---|
| B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | Please use IRS label or print or type. See Specific Instructions. | C Name of organization MERCY HOUSING INC | D Employer identification number 47-0646706 | |
| | | Doing Business As | | E Telephone number (303) 830-3300 |
| | | Number and street (or P O box if mail is not delivered to street address) | Room/suite | G Gross receipts \$ 5,872,983 |
| | | 1999 BROADWAY SUITE 1000 | | |
| | | City or town, state or country, and ZIP + 4 DENVER, CO 80202 | | |
| F Name and address of principal officer BRIAN SHUMAN 1999 BROADWAY SUITE 1000 DENVER, CO 80202 | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶ | | |
| I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀(Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | | | |
| J Website: ▶ WWW.MERCYHOUSING.ORG | | | | |

| | | |
|--|---------------------------------|-------------------------------------|
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | L Year of formation 1981 | M State of legal domicile NE |
|--|---------------------------------|-------------------------------------|

Part I

Summary

| | | | |
|-----------------------------|------------|---|--|
| Activities & Governance | 1 | Briefly describe the organization's mission or most significant activities To develop, own, and operate LOW-INCOME HOUSING and provide services TO LOW-INCOME FAMILIES, ELDERLY, HANDICAPPED, HOMELESS, POTENTIALLY HOMELESS, OR OTHERWISE DISADVANTAGED PERSONS | |
| | | | |
| | | | |
| | | | |
| | | | |
| | 2 | Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets | |
| | 3 | Number of voting members of the governing body (Part VI, line 1a) 15 | |
| | 4 | Number of independent voting members of the governing body (Part VI, line 1b) 15 | |
| Revenue | 5 | Total number of employees (Part V, line 2a) 471 | |
| | 6 | Total number of volunteers (estimate if necessary) 0 | |
| | 7a | Total gross unrelated business revenue from Part VIII, column (C), line 12 . . . 0 | |
| | b | Net unrelated business taxable income from Form 990-T, line 34 . . . 7b | |
| | Expenses | 8 | Contributions and grants (Part VIII, line 1h) |
| | | 9 | Program service revenue (Part VIII, line 2g) |
| | | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) |
| | | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) |
| 12 | | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 18,528,069 | |
| 13 | | Grants and similar amounts paid (Part IX, column (A), lines 1–3) 6,079,445 | |
| 14 | | Benefits paid to or for members (Part IX, column (A), line 4) 0 | |
| 15 | | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | |
| Net Assets or Fund Balances | 16a | Professional fundraising fees (Part IX, column (A), line 11e) 0 | |
| | b | Total fundraising expenses (Part IX, column (D), line 25) ▶ 902,855 | |
| | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) 6,431,566 | |
| | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | |
| | 19 | Revenue less expenses Subtract line 18 from line 12 1,764,496 | |
| | | Beginning of Current Year | End of Year |
| | | 20 | Total assets (Part X, line 16) 52,478,930 |
| | | 21 | Total liabilities (Part X, line 26) 40,622,850 |
| 22 | | Net assets or fund balances Subtract line 21 from line 20 11,856,080 | |

Part II

Signature Block

| | | | | |
|--------------------------|---|--|---|--|
| Sign Here | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge | | | |
| | ***** Signature of officer | | 2010-08-13 Date | |
| | VINCE DODDS VP/TREASURER Type or print name and title | | | |
| Paid Preparer's Use Only | Preparer's signature ▶ | Date | Check if self-employed ▶ <input type="checkbox"/> | Preparer's identifying number (see instructions) |
| | Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ | REZNICK GROUP PC 525 N TRYON STREET SUITE 1000 CHARLOTTE, NC 28202 | | EIN ▶ |
| | | | Phone no ▶ (704) 332-9100 | |

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

THE MISSION AND CHARITABLE PURPOSE OF MERCY HOUSING, INC IS TO MANAGE OR DIRECT ENTITIES WHICH ARE ORGANIZED FOR THE PURPOSE OF CREATING STABLE, VIBRANT AND HEALTHY COMMUNITIES BY DEVELOPING, FINANCING, AND OPERATING AFFORDABLE, PROGRAM-ENRICHED HOUSING FOR FAMILIES, SENIORS, AND PEOPLE WITH SPECIAL NEEDS WHO LACK THE ECONOMIC RESOURCES TO ACCESS QUALITY, SAFE HOUSING OPPORTUNITIES MERCY HOUSING, INC , EITHER DIRECTLY OR INDIRECTLY, WILL SUPPORT OR FOSTER THE DEVELOPMENT, ACQUISITION, FINANCING, OPERATION AND MANAGEMENT OF QUALITY, AFFORDABLE PROGRAM-ENRICHED HOUSING FOR LOW AND MODERATE INCOME PERSONS

2

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

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization’s three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 8,429,262 including grants of \$ 3,673,564) (Revenue \$ 2,684,200)

Mercy Housing, Inc 's program supports affordable housing and resident services for low and moderate income persons and includes activities of asset management, housing development, consulting services, construction management and financial services specifically related to development of affordable housing

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 \$ 8,429,262

Part IV

Checklist of Required Schedules

| | | Yes | No |
|-----|---|-----|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A  | 1 | Yes |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors?  | 2 | Yes |
| 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 | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  | 4 | Yes |
| 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 | No |
| 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 | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 8 | No |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  | 9 | No |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10 | No |
| 11 | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  | 11 | Yes |
| | • 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 | No |
| 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  | 12A | Yes |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | No |
| 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 I | 14b | No |
| 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 U S? If "Yes," complete Schedule F, Part II | 15 | No |
| 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 U S? If "Yes," complete Schedule F, Part III | 16 | No |
| 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 | No |
| 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 | No |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | No |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | No |

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

| | | | Yes | No |
|---|--|---|-----|-----|
| 1a | Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable | 1a118 | | |
| | b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | | 1c | |
| 2a | Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return | 2a471 | 2b | Yes |
| | b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) | | | |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | | 3a | No |
| b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | 3b | |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | | 4a | No |
| b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts | | | | |
| 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . | | | 5a | No |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | 5b | No |
| c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | | | 5c | |
| 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? | | | 6a | No |
| b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | | 6b | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | | |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | | | 7a | No |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | | 7c | No |
| d If "Yes," indicate the number of Forms 8282 filed during the year | | | 7d | |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | 7e | No |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . | | | 7f | No |
| g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . | | | 7g | |
| h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | | | 7h | |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | | 8 | |
| 9 Sponsoring organizations maintaining donor advised funds. | | | | |
| a Did the organization make any taxable distributions under section 4966? | | | 9a | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | | | 9b | |
| 10 Section 501(c)(7) organizations. Enter | | | | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | | | 10a | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | 10b | |
| 11 Section 501(c)(12) organizations. Enter | | | | |
| a Gross income from members or shareholders | | | 11a | |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | 11b | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | | 12a | |
| b If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | 12b | |

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

| | | | | |
|----|---|----|-----|----|
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body | 1a | 15 | |
| b | Enter the number of voting members that are independent | 1b | 15 | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | No |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | No |
| 6 | Does the organization have members or stockholders? | 6 | Yes | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | Yes | |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | Yes | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| a | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |

Section B. Policies

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

| | | | | |
|-----|--|-----|-----|----|
| | | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | | No |
| b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? | 10b | | |
| 11 | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | 11 | Yes | |
| 11A | Describe in Schedule O the process, if any, used by the organization to review the Form 990 | | | |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| c | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | 12c | Yes | |
| 13 | Does the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | Other officers or key employees of the organization | 15b | Yes | |
| | If "Yes" to line a or b, 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 with a taxable entity during the year? | 16a | Yes | |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | Yes | |

Section C. Disclosure

| | | |
|----|--|--|
| 17 | List the States with which a copy of this Form 990 is required to be filed | AL , AK , AZ , AR , CA , CO , CT , DC , FL , GA , IL , KS , KY , LA , ME , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table. | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization. | VINCE DODDS VP/CONTROLLER MHI 1999 BROADWAY SUITE 1000 DENVER, CO 80202 (303) 830-6221 |

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

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

| | | | |
|-----------------|-----------|---------|---------|
| 1b Total | 3,625,606 | 217,657 | 263,606 |
|-----------------|-----------|---------|---------|

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization▶21

| | | | |
|----------|---|------------|-----------|
| | | Yes | No |
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | | No |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | Yes | |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | | No |

Section B. Independent Contractors

1

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------|---------------------|
| CGLIC-PHOENIX EASC CIGNA 5476 COLLECTION CENTER DRIVE CHICAGO, IL 606930054 | INSURANCE | 1,840,060 |
| REZNICK GROUP 525 N TRYON STREET SUITE 1000 CHARLOTTE, NC 28202 | ACCOUNTING | 2,186,014 |
| KYGY GROUP INC 17922 FITCH IRVINE, CA 92614 | ARCHITECTURE | 294,119 |
| REZNICK GROUP 2002 SUMMIT BLVD SUITE 1000 ATLANTA, GA 303191470 | ACCOUNTING | 686,460 |
| KAISER PERMANENTE PO BOX 60000 FILE 73030 SAN FRANCISCO, CA 941603030 | INSURANCE | 306,748 |

2

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶13

Part VIII

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 | |
|---|---|---|--|----------------------|--|---|---|--|
| Contributions, gifts, grants and other similar amounts | 1a | Federated campaigns . . . | 1a | | | | | |
| | b | Membership dues | 1b | | | | | |
| | c | Fundraising events | 1c | | | | | |
| | d | Related organizations | 1d | | | | | |
| | e | Government grants (contributions) | 1e | | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 3,379,443 | | | | |
| | g | Noncash contributions included in lines 1a-1f \$ _____ | | | | | | |
| | h | Total. Add lines 1a-1f | | | 3,379,443 | | | |
| Program Service Revenue | | | Business Code | | | | | |
| | 2a | SERVICE FEES | 531,390 | 369,509 | 369,509 | | | |
| | b | CONSULTING FEES | 531,390 | 1,057,332 | 1,057,332 | | | |
| | c | MISC REVENUE | 531,390 | 104,239 | 104,239 | | | |
| | d | | | | | | | |
| | e | | | | | | | |
| | f | All other program service revenue | | | | | | |
| | g | Total. Add lines 2a-2f | | | 1,531,080 | | | |
| Other Revenue | 3 | Investment income (including dividends, interest and other similar amounts) | | | 962,460 | | 962,460 | |
| | 4 | Income from investment of tax-exempt bond proceeds . . . | | | 0 | | | |
| | 5 | Royalties | | | 0 | | | |
| | 6a | Gross Rents | (i) Real | (ii) Personal | | | | |
| | | b | Less rental expenses | | | | | |
| | | c | Rental income or (loss) | | | | | |
| | | d | Net rental income or (loss) | | | | | |
| | 7a | Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | | |
| | | b | Less cost or other basis and sales expenses | | | | | |
| | | c | Gain or (loss) | | | | | |
| | | d | Net gain or (loss) | | | 0 | | |
| | 8a | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | | | | | | |
| | | b | Less direct expenses | | | | | |
| | | c | Net income or (loss) from fundraising events . . . | | | 0 | | |
| | 9a | Gross income from gaming activities See Part IV, line 19 | | | | | | |
| | | b | Less direct expenses | | | | | |
| | | c | Net income or (loss) from gaming activities . . . | | | 0 | | |
| | 10a | Gross sales of inventory, less returns and allowances | | | | | | |
| | | b | Less cost of goods sold | | | | | |
| | | c | Net income or (loss) from sales of inventory . . . | | | 0 | | |
| Miscellaneous Revenue | | Business Code | | | | | | |
| 11a | | | | | | | | |
| b | | | | | | | | |
| c | | | | | | | | |
| d | All other revenue | | | | | | | |
| e | Total. Add lines 11a-11d | | | 0 | | | | |
| 12 | Total revenue. See Instructions | | | 5,872,983 | 1,531,080 | | 962,460 | |

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 | Grants and other assistance to governments and organizations in the U S See Part IV, line 21 | 3,673,564 | 3,673,564 | | |
| 2 | Grants and other assistance to individuals in the U S See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 | 0 | | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 3,073,161 | 1,845,161 | 1,121,638 | 106,362 |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | | | |
| 7 | Other salaries and wages | 0 | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 54,053 | 32,392 | 2,394 | 19,267 |
| 9 | Other employee benefits | 233,124 | 151,169 | 12,677 | 69,278 |
| 10 | Payroll taxes | 203,849 | 131,076 | 8,629 | 64,144 |
| 11 | Fees for services (non-employees) | | | | |
| a | Management | 277,525 | 179,691 | 3,982 | 93,852 |
| b | Legal | 66,449 | 63,259 | 3,190 | |
| c | Accounting | 7,204 | | 7,204 | |
| d | Lobbying | 0 | | | |
| e | Professional fundraising See Part IV, line 17 | 0 | | | |
| f | Investment management fees | 0 | | | |
| g | Other | 214,024 | 14,662 | 377 | 198,985 |
| 12 | Advertising and promotion | 164,306 | 648 | 1,299 | 162,359 |
| 13 | Office expenses | 99,634 | 43,982 | 19,638 | 36,014 |
| 14 | Information technology | 44,055 | 22,032 | 9,622 | 12,401 |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 73,897 | 50,431 | 21,951 | 1,515 |
| 17 | Travel | 202,360 | 134,490 | 3,733 | 64,137 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | |
| 19 | Conferences, conventions, and meetings | 27,262 | 6,318 | 473 | 20,471 |
| 20 | Interest | 203,149 | 203,149 | | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 14,393 | | 14,393 | |
| 23 | Insurance | 4,327 | 3,963 | 364 | |
| 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 | BAD DEBTS | 826,841 | 826,841 | | |
| b | RESERVE FOR IMPAIRED ASSETS | 434,806 | 434,806 | | |
| c | RESERVE FOR LOAN LOSSES | 358,090 | 358,090 | | |
| d | PARTNERSHIP INVMNT-(GAIN)/LOSS | 231,926 | 231,926 | | |
| e | MISCELLANEOUS ADMIN | 23,543 | 4,049 | 1,151 | 18,343 |
| f | All other expenses | 63,962 | 17,563 | 10,672 | 35,727 |
| 25 | Total functional expenses. Add lines 1 through 24f | 10,575,504 | 8,429,262 | 1,243,387 | 902,855 |
| 26 | Joint costs. Check here <input type="checkbox"/> 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 | | | | |

Part X

Balance Sheet

| | | | | | (A) | | (B) |
|-----------------------------|---|---|-----|------------|-------------------|------------|-------------|
| | | | | | Beginning of year | | End of year |
| Assets | 1 | Cash—non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 19,579,068 | 2 | 15,657,814 |
| | 3 | Pledges and grants receivable, net | | | 3,792,263 | 3 | 2,552,510 |
| | 4 | Accounts receivable, net | | | 475,489 | 4 | 419,182 |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L | | | | 6 | |
| | 7 | Notes and loans receivable, net | | | 1,146,842 | 7 | 256,149 |
| | 8 | Inventories for sale or use | | | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | | 183,906 | 9 | 208,658 |
| | 10a | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D | 10a | 4,433,628 | 1,693,909 | 10c | 1,485,119 |
| | b | Less accumulated depreciation | 10b | 2,948,509 | | | |
| | 11 | Investments—publicly traded securities | | | | 11 | |
| | 12 | Investments—other securities See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | | 5,044,486 | 13 | 7,135,806 |
| | 14 | Intangible assets | | | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | | 20,562,967 | 15 | 17,673,485 |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | | | 52,478,930 | 16 | 45,388,723 | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | 4,381,759 | 17 | 3,893,642 |
| | 18 | Grants payable | | | | 18 | |
| | 19 | Deferred revenue | | | 1,463,562 | 19 | 856,680 |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | | | 21 | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | | 26,536,753 | 23 | 28,840,917 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D | | | 8,240,776 | 25 | 4,643,925 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 40,622,850 | 26 | 38,235,164 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | | | |
| | 27 | Unrestricted net assets | | | 6,161,307 | 27 | 1,897,854 |
| | 28 | Temporarily restricted net assets | | | 4,939,773 | 28 | 4,500,705 |
| | 29 | Permanently restricted net assets | | | 755,000 | 29 | 755,000 |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | | | | |
| | 30 | Capital stock or trust principal, or current funds | | | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building or equipment fund | | | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | | | 32 | |
| | 33 | Total net assets or fund balances | | | 11,856,080 | 33 | 7,153,559 |
| | 34 | Total liabilities and net assets/fund balances | | | 52,478,930 | 34 | 45,388,723 |

Part XI **Financial Statements and Reporting**

| | Yes | No |
|--|-----------|-----|
| 1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . | 2a | No |
| b Were the organization's financial statements audited by an independent accountant? | 2b | Yes |
| c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . . | 2c | Yes |
| d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis | | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | Yes |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . | 3b | Yes |

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

| | |
|---|--|
| Name of the organization MERCY HOUSING INC | Employer identification number 47-0646706 |
|---|--|

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of support? |
|---------------------------------------|-------------|---|---|----|--|----|---|----|-----------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

| Calendar 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.") | | | | | | |
| 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 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public Support. Subtract line 5 from line 4 | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets | | | | | | |
| 11 Total support (Add lines 7 through 10) | | | | | | |

12

Gross receipts from related activities, etc (See instructions)

12

13

First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

☐

Section C. Computation of Public Support Percentage

| | | | |
|----|--|----|--|
| 14 | Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) | 14 | |
| 15 | Public Support Percentage for 2008 Schedule A, Part II, line 14 | 15 | |

16a

33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

☐

b

33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

☐

17a

10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here**. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

☐

b

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here**. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

☐

18

Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

☐

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

| Section A. Public Support | | | | | | |
|---|-----------|-----------|-----------|------------|-----------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | 2,478,523 | 1,926,686 | 2,696,662 | 13,402,051 | 3,379,443 | 23,883,365 |
| 2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 4,626,224 | 1,604,131 | 3,312,490 | 3,072,647 | 1,531,080 | 14,146,572 |
| 3Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6Total. Add lines 1 through 5 | 7,104,747 | 3,530,817 | 6,009,152 | 16,474,698 | 4,910,523 | 38,029,937 |
| 7aAmounts included on lines 1, 2, and 3 received from disqualified persons | 383,118 | 1,835,075 | 3,746,556 | 3,155,048 | 1,668,500 | 10,788,297 |
| bAmounts 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 | 840,121 | 534,233 | 127,661 | 53,913 | 489,664 | 2,045,592 |
| cAdd lines 7a and 7b | 1,223,239 | 2,369,308 | 3,874,217 | 3,208,961 | 2,158,164 | 12,833,889 |
| 8Public Support (Subtract line 7c from line 6) | | | | | | 25,196,048 |

| Section B. Total Support | | | | | | |
|--|--------------------------|-----------|-----------|------------|-----------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9Amounts from line 6 | 7,104,747 | 3,530,817 | 6,009,152 | 16,474,698 | 4,910,523 | 38,029,937 |
| 10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 1,209,775 | 612,413 | 2,660,418 | 2,053,371 | 962,460 | 7,498,437 |
| bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| cAdd lines 10a and 10b | 1,209,775 | 612,413 | 2,660,418 | 2,053,371 | 962,460 | 7,498,437 |
| 11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13Total support (Add lines 9, 10c, 11 and 12.) | 8,314,522 | 4,143,230 | 8,669,570 | 18,528,069 | 5,872,983 | 45,528,374 |
| 14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here | <input type="checkbox"/> | | | | | |

| Section C. Computation of Public Support Percentage | | | |
|--|----|---------|--|
| 15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f)) | 15 | 55.341% | |
| 16Public support percentage from 2008 Schedule A, Part III, line 15 | 16 | 58.240% | |

| Section D. Computation of Investment Income Percentage | | | |
|--|---|----|----------|
| 17 | Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f)) | 17 | 16 470 % |
| 18 | Investment income percentage from 2008 Schedule A, Part III, line 17 | 18 | 13 780 % |
| 19a | 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/> | | |
| b | 33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization <input type="checkbox"/> | | |
| 20 | Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions <input type="checkbox"/> | | |

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 47-0646706
Name: MERCY HOUSING INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| LARRY DALE VICE CHAIRMAN | 1 0 | X | | | | | | 0 | | 0 |
| MARK KORELL DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| ROSLYN HAFERTEPE DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| BARRY ZIGAS DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| JACK DIEPENBROCK DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| PAT MCDERMOTT DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| MICHAEL ZOELLNER DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| ROGER PASTORE DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| BRAD JAMES CHAIRMAN | 1 0 | X | | | | | | 0 | | 0 |
| JACK MANNING DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| RICH STATUTO DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| LESLIE WITTMANN DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| SR ROSEMARIE JASINSKI DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| SR NORITA COONEY DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| SR LINDA WERTHMAN DIRECTOR | 1 0 | X | | | | | | 0 | | 0 |
| JULIA GOULD SR VICE PRESIDENT | 1 0 | | | X | | | | 190,251 | 0 | 9,192 |
| LILLIAN MURPHY CEO | 1 0 | | | X | | | | 0 | 0 | 0 |
| CINDY HOLLER VICE PRESIDENT | 1 0 | | | X | | | | 170,650 | 0 | 10,761 |
| JANE GRAF SR VICE PRESIDENT | 1 0 | | | X | | | | 190,489 | 0 | 9,287 |
| JENNIFER ERIXON VICE PRESIDENT | 1 0 | | | X | | | | 132,462 | 0 | 15,576 |
| TRACY GARGARO VP/TREASURER | 1 0 | | | X | | | | 104,740 | 0 | 8,844 |
| MARK HOLMES VICE PRESIDENT | 1 0 | | | X | | | | 122,118 | 0 | 8,706 |
| CHRISTOPHER SHOTT VICE PRESIDENT | 1 0 | | | X | | | | 94,417 | 0 | 8,746 |
| BRIAN SHUMAN PRESIDENT/COO | 1 0 | | | X | | | | 318,787 | 0 | 20,609 |
| JEFFREY TRUAX VICE PRESIDENT | 1 0 | | | X | | | | 108,781 | 0 | 14,888 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------|--|---|-----------------------|---------|--------------|---------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| CHERYLL O'BRYAN VICE PRESIDENT | 1 0 | | | X | | | | 0 | 217,657 | 15,260 |
| CYNTHIA PARKER VICE PRESIDENT | 1 0 | | | X | | | | 137,131 | 0 | 11,695 |
| VINCE DODDS SR VP/CFO | 1 0 | | | X | | | | 163,181 | 0 | 14,530 |
| GARY TRUITT SR VICE PRESIDENT | 1 0 | | | X | | | | 225,851 | 0 | 753 |
| MICEHELE MAMET SR VICE PRESIDENT | 1 0 | | | X | | | | 82,254 | 0 | 3,191 |
| WILLIAM GOLDSMITH VICE PRESIDENT | 1 0 | | | X | | | | 210,558 | 0 | 14,414 |
| ELIZABETH COLDIRON VICE PRESIDENT | 1 0 | | | X | | | | 97,823 | 0 | 6,421 |
| CAROL BRESLAU VICE PRESIDENT | 1 0 | | | X | | | | 60,692 | 0 | 221 |
| JOANNE LATUCHIE VICE PRESIDENT | 1 0 | | | X | | | | 101,353 | 0 | 11,503 |
| PATRICIA O'ROARK SECRETARY | 1 0 | | | X | | | | 28,074 | 0 | 2,092 |
| SARA GRIFFIN ASSISTANT SECRETARY | 1 0 | | | X | | | | 8,538 | 0 | 0 |
| EUGENE WALKER VICE PRESIDENT | 1 0 | | | X | | | | 166,615 | 0 | 475 |
| RICHARD BANKS PRESIDENT | 1 0 | | | X | | | | 221,405 | 0 | 13,734 |
| CHARLES MCKINNEY SR VICE PRESIDENT | 1 0 | | | X | | | | 136,990 | 0 | 8,969 |
| SHAWN SMITLEY | 1 0 | | | | | X | | 106,373 | 0 | 8,567 |
| DAVID LYON | 1 0 | | | | | X | | 105,230 | 0 | 8,912 |
| GREGORY SPARKS | 1 0 | | | | | X | | 113,945 | 0 | 11,101 |
| KAREN FARRAND | 1 0 | | | | | X | | 113,794 | 0 | 10,645 |
| AMY ROWLAND | 1 0 | | | | | X | | 113,104 | 0 | 14,514 |

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

| <i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i> | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| BAD DEBTS | 826,841 | 826,841 | | |
| RESERVE FOR IMPAIRED ASSETS | 434,806 | 434,806 | | |
| RESERVE FOR LOAN LOSSES | 358,090 | 358,090 | | |
| PARTNERSHIP INVMNT-(GAIN)/LOSS | 231,926 | 231,926 | | |
| MISCELLANEOUS ADMIN | 23,543 | 4,049 | 1,151 | 18,343 |

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

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

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

| | |
|---|--|
| Name of the organization MERCY HOUSING INC | Employer identification number 47-0646706 |
|---|--|

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|----------|-------------|---------|---|--|
| | | | | |
| | | | | |

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing Organization's Totals | (b) Affiliated Group Totals | | | | | | | | | | | | |
|--|---|---|------------------------------------|--------------------|------------------------------|---|---|---|---|--|--|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | | | | | | | | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns | | | | | | | | | | | | | | | |
| <table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000 | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a If zero or less, enter -0- | | | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c If zero or less, enter -0- | | | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes | <input type="checkbox"/> No | | | | | | | | | | | | |

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

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
| 2a Lobbying non-taxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots non-taxable amount | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f Grassroots lobbying expenditures | | | | | |

Part II-B

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

| | (a) | | (b) |
|--|-----|----|--------|
| | Yes | No | Amount |
| 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 | | | |
| a Volunteers? | | No | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | No | |
| c Media advertisements? | | No | |
| d Mailings to members, legislators, or the public? | | No | |
| e Publications, or published or broadcast statements? | | No | |
| f Grants to other organizations for lobbying purposes? | Yes | | 12,500 |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | No | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | No | |
| i Other activities? If "Yes," describe in Part IV | | | |
| j Total lines 1c through 1i | | | 12,500 |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

Part III-A

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

| | | Yes | No |
|--|---|-----|----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | 1 | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | | |
| 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 | | |

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

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

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|------------|------------------|-------------|
| | | |

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
MERCY HOUSING INC

Employer identification number
47-0646706

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | | |
|---|---|------------------------------|
| | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | |
| 2 | Aggregate contributions to (during year) | |
| 3 | Aggregate grants from (during year) | |
| 4 | Aggregate value at end of year | |
| 5 | Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div> | |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div> | |

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

| | | | | | | | | | | | | |
|---|---|--|--|-----------------------------|---|--|---|--|---|--|---|---|
| 1 | Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)<input type="checkbox"/> Preservation of an historically importantly land area<input type="checkbox"/> Protection of natural habitat<input type="checkbox"/> Preservation of a certified historic structure<input type="checkbox"/> Preservation of open space</div> | | | | | | | | | | | |
| 2 | Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year | | | | | | | | | | | |
| | | <table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table> | | Held at the End of the Year | a | Total number of conservation easements | b | 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 |
| | Held at the End of the Year | | | | | | | | | | | |
| a | Total number of conservation easements | | | | | | | | | | | |
| b | 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 the organization during the taxable 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? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div> | | | | | | | | | | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____ | | | | | | | | | | | |
| 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)(i) and 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div> | | | | | | | | | | | |
| 9 | In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements | | | | | | | | | | | |

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or 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 balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items | |
| b | If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items | |
| | (i) Revenues included in Form 990, Part VIII, line 1 | ▶ \$ _____ |
| | (ii) Assets included in Form 990, Part X | ▶ \$ _____ |
| 2 | If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items | |
| a | Revenues included in Form 990, Part VIII, line 1 | ▶ \$ _____ |
| b | Assets included in Form 990, Part X | ▶ \$ _____ |

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

| | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | (a)Current Year | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
|----|--|---------------|-------------------|---------------------|--------------------|
| 1a | Beginning of year balance | | | | |
| b | Contributions | | | | |
| c | Investment earnings or losses | | | | |
| d | Grants or scholarships | | | | |
| e | Other expenditures for facilities and programs | | | | |
| f | Administrative expenses | | | | |
| g | End of year balance | | | | |

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of investment | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land | 0 | 855,000 | | 855,000 |
| b Buildings | | | | |
| c Leasehold improvements | 0 | 71,748 | 29,323 | 42,425 |
| d Equipment | 0 | 2,970,636 | 2,451,281 | 519,355 |
| e Other | 0 | 536,244 | 467,905 | 68,339 |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶ | | | | 1,485,119 |

Schedule D (Form 990) 2009

| Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
|--|---|------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 15,872,983 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 10,575,504 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | -4,702,521 |
| 4 | Net unrealized gains (losses) on investments | |
| 5 | Donated services and use of facilities | |
| 6 | Investment expenses | |
| 7 | Prior period adjustments | |
| 8 | Other (Describe in Part XIV) | |
| 9 | Total adjustments (net) Add lines 4 - 8 | |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | -4,702,521 |

| Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return | | |
|---|--|------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 15,912,719 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | |
| a | Net unrealized gains on investments | 2a |
| b | Donated services and use of facilities | 2b39,736 |
| c | Recoveries of prior year grants | 2c |
| d | Other (Describe in Part XIV) | 2d |
| e | Add lines 2a through 2d | 2e39,736 |
| 3 | Subtract line 2e from line 1 | 35,872,983 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a |
| b | Other (Describe in Part XIV) | 4b |
| c | Add lines 4a and 4b | 4c |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 55,872,983 |

| Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return | | |
|--|---|-------------|
| 1 | Total expenses and losses per audited financial statements | 110,615,240 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | |
| a | Donated services and use of facilities | 2a39,736 |
| b | Prior year adjustments | 2b |
| c | Other losses | 2c |
| d | Other (Describe in Part XIV) | 2d |
| e | Add lines 2a through 2d | 2e39,736 |
| 3 | Subtract line 2e from line 1 | 310,575,504 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a |
| b | Other (Describe in Part XIV) | 4b |
| c | Add lines 4a and 4b | 4c |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 510,575,504 |

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, 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.

| Identifier | Return Reference | Explanation |
|------------|----------------------|---|
| PART X | INCOME TAX PROVISION | Mercy Housing, Inc. (MHI) and its consolidated nonprofit corporations are exempt from federal and state income taxes under Section 501(c)(3) of the Internal Revenue Code and comparable state statutes and did not have any unrelated business income for the year ended December 31, 2009. Due to their tax exempt status, MHI and the consolidated nonprofit corporations are not subject to income taxes. MHI and the consolidated nonprofit corporations are required to file tax returns with the IRS and other taxing authorities. Accordingly, the financial statements do not reflect a provision for income taxes and there are no other tax positions which must be considered for disclosure. |

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
MERCY HOUSING INC

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
47-0646706

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|---------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| See Additional Data Table | | | | | | | |

2

Enter total number of section 501(c)(3) and government organizations

14

3

Enter total number of other organizations

Software ID:

Software Version:

EIN: 47-0646706

Name: MERCY HOUSING INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MERCY HOUSING SOUTHWEST1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 86-0743192 | 501(C)(3) | 90,000 | | | | LOW-INCOME HOUSING |
| MERCY HOUSING LAKEFRONT1999 BROADWAY SUITE 1000 DNEVER,CO 80202 | 36-3453183 | 501(C)(3) | 290,000 | | | | LOW-INCOME HOUSING |
| INTERCOMMUNITY MERCY HOUSING1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 91-1546525 | 501(C)(3) | 100,000 | | | | LOW-INCOME HOUSING |
| MERCY HOUSING COLORADO1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 20-1583332 | 501(C)(3) | 595,658 | | | | LOW-INCOME HOUSING |
| MERCY HOUSING CALIFORNIA1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 94-3081666 | 501(C)(3) | 474,314 | | | | LOW-INCOME HOUSING |
| MERCY HOUSING SOUTHEAST1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 56-1993872 | 501(C)(3) | 100,000 | | | | LOW-INCOME HOUSING |
| NATIONAL LOW INCOME HOUSING COALITION727 15TH ST NW 6TH FLOOR WASHINGTON,DC 20005 | 52-1089824 | 501(C)(3) | 10,000 | | | | CHARITABLE CONTRIBUTION |
| NATIONAL HOUSING TRUST1101 30TH STREET NW SUITE 400 WASHINGTON,DC 20007 | 52-1477599 | 501(C)(3) | 10,000 | | | | CHARITABLE CONTRIBUTION |
| MERCY PORTFOLIO SERVICES247 S STATE STREET SUITE 810 CHICAGO,IL 60604 | 26-4002114 | 501(C)(3) | 700,000 | | | | CHARITABLE CONTRIBUTION |
| MERCY NORTHGLEN3205 PORTIA STREET LINCOLN,NE 68521 | 47-0779681 | 501(C)(3) | 23,059 | | | | CHARITABLE CONTRIBUTION |

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|------------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| TIMBERCREEK6816 SOUTH 137TH PLAZA OMAHA,NE 68137 | 84-1602190 | 501(C)(3) | 36,958 | | | | CHARITABLE CONTRIBUTION |
| MERCY LOAN FUND1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 84-1559406 | 501(C)(3) | 1,000,000 | | | | LOW-INCOME HOUSING |
| MERCY HOUSING IDAHO 540 NORTH EAGLE ROAD 117 EAST EAGLE,ID 83616 | 82-0458396 | 501(C)(3) | 10,000 | | | | LOW-INCOME HOUSING |
| MERCY HOUSING MIDWEST 1999 BROADWAY SUITE 1000 DENVER,CO 80202 | 47-0772351 | 501(C)(3) | 231,535 | | | | LOW-INCOME HOUSING |

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

| | |
|---|--|
| Name of the organization MERCY HOUSING INC | Employer identification number 47-0646706 |
|---|--|

Part I

Questions Regarding Compensation

| | | |
|--|--------|-----|
| | Yes | No |
| 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | |
| <input type="checkbox"/> First-class or charter travel | | |
| <input type="checkbox"/> Travel for companions | | |
| <input type="checkbox"/> Tax idemnification and gross-up payments | | |
| <input checked="" type="checkbox"/> Discretionary spending account | | |
| <input type="checkbox"/> Housing allowance or residence for personal use | | |
| <input type="checkbox"/> Payments for business use of personal residence | | |
| <input type="checkbox"/> Health or social club dues or initiation fees | | |
| <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) | | |
| b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain | 1b Yes | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 Yes | |
| 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply | | |
| <input type="checkbox"/> Compensation committee | | |
| <input type="checkbox"/> Independent compensation consultant | | |
| <input type="checkbox"/> Form 990 of other organizations | | |
| <input type="checkbox"/> Written employment contract | | |
| <input checked="" type="checkbox"/> Compensation survey or study | | |
| <input checked="" type="checkbox"/> Approval by the board or compensation committee | | |
| 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization | | |
| a Receive a severance payment or change-of-control payment? | 4a | No |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | No |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | No |
| If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | |
| Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. | | |
| 5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | |
| a The organization? | 5a | No |
| b Any related organization? | 5b | No |
| If "Yes," to line 5a or 5b, describe in Part III | | |
| 6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | |
| a The organization? | 6a | Yes |
| b Any related organization? | 6b | Yes |
| If "Yes," to line 6a or 6b, describe in Part III | | |
| 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | No |
| 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III | 8 | No |
| 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | 9 | |

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|-------------------|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|--|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| JULIA GOULD | (i) | 190,251 | 0 | 0 | 0 | 0 | 190,251 | 0 |
| | (ii) | 0 | 0 | 0 | 3,231 | 5,961 | 9,192 | 0 |
| CINDY HOLLER | (i) | 170,650 | 0 | 0 | 0 | 0 | 170,650 | 0 |
| | (ii) | 0 | 0 | 0 | 4,800 | 5,961 | 10,761 | 0 |
| JANE GRAF | (i) | 190,489 | 0 | 0 | 0 | 0 | 190,489 | 0 |
| | (ii) | 0 | 0 | 0 | 8,534 | 753 | 9,287 | 0 |
| BRIAN SHUMAN | (i) | 318,787 | 0 | 0 | 0 | 0 | 318,787 | 0 |
| | (ii) | 0 | 0 | 0 | 6,887 | 13,722 | 20,609 | 0 |
| CHERYLL O'BRYAN | (i) | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | (ii) | 217,657 | 0 | 0 | 4,680 | 10,580 | 232,917 | 0 |
| VINCE DODDS | (i) | 163,181 | 0 | 0 | 0 | 0 | 163,181 | 0 |
| | (ii) | 0 | 0 | 0 | 808 | 13,722 | 14,530 | 0 |
| GARY TRUITT | (i) | 225,851 | 0 | 0 | 0 | 0 | 225,851 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 753 | 753 | 0 |
| WILLIAM GOLDSMITH | (i) | 210,558 | 0 | 0 | 0 | 0 | 210,558 | 0 |
| | (ii) | 0 | 0 | 0 | 692 | 13,722 | 14,414 | 0 |
| EUGENE WALKER | (i) | 166,615 | 0 | 0 | 0 | 0 | 166,615 | 0 |
| | (ii) | 0 | 0 | 0 | 0 | 475 | 475 | 0 |
| RICHARD BANKS | (i) | 221,405 | 0 | 0 | 0 | 0 | 221,405 | 0 |
| | (ii) | 0 | 0 | 0 | 487 | 13,247 | 13,734 | 0 |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

| Identifier | Return Reference | Explanation |
|------------|------------------|---|
| PART I | PART I 6A & 6B | The Organization offers a bonus plan to all eligible employees based upon the performance of net modified cash earnings of Mercy Housing, Inc , and its related corporate operating companies (including the Organization). The plan is structured to pay out 4% of base wages if the consolidated net modified cash earnings are 90% or greater of budget, an additional 1% of base wages if the consolidated net modified cash earnings are 100% of budget, and up to an additional 5% of base wages for consolidated net modified cash earnings greater than 100% of budget. Consolidated net modified cash earnings greater than 100% of budget are distributed 2/3 to the Mercy Housing, Inc and related corporate operating companies and 1/3 to employees. THE ORGANIZATION ACCRUED AN AMOUNT UNDER THE PLAN IN 2008 WHICH WAS PAID TO ELIGIBLE EMPLOYEES IN 2009. |

SCHEDULE O

(Form 990)

Department of the Treasury

Internal Revenue Service

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

Name of the organization

MERCY HOUSING INC

Employer identification number

47-0646706

| Identifier | Return Reference | Explanation |
|-------------------|-------------------------------------|--|
| PART VI SECTION A | PART VI SECTION A # 6 AND #7 A&B | #6 Mercy Housing, Inc , is co-sponsored by nine congregations of women religious orders #7 A & B Mercy Housing, Inc is co-sponsored by nine congregations of women religious who appoint members to the sponsor council The sponsor council appoints the corporate members The reserved rights held by the corporate members, which may be further delegated to mercy housing, inc board of trustees include approval of the following activities certain revisions to articles and bylaw s, mergers and acquisitions, pledging, mortgaging or disposing of all or substantially all assets, appointment or removal of governing board members and officers |
| PART VI SECTION B | PART VI SECTION B #11A, 12C AND 15B | 11A Form 990 is presented to all board members and comments and questions are addressed prior to the Form 990 being filed 12C The Audit Committee of Mercy Housing, Inc review s annually the Conflict of Interest disclosures and determnes whether any action is required 15B Periodically the Human Resources Committee within the Mercy Housing, Inc Board of Trustees will review executive salaries to ensure competitiveness with external markets and for internal equity in relation to general employee wages and benefits, individual and organizational performance, and the financial resources of the Organization |
| PART VI SECTION C | PART VI SECTION C # 19 | Governing documents, conflict of interest policy and financial statements are made available to the public upon request |
| PART XI | PART XI #2B, #2C & #3 | 2B THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES THE AUDITED FINANCIAL STATEMENTS ARE REPORTED WITHIN THE CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION OF MERCY HOUSING, INC 2C RESPONSIBILITY FOR SELECTION OF AN INDEPENDENT ACCOUNTANT AND OVERSIGHT OF THE ANNUAL AUDIT IS RESERVED BY THE MERCY HOUSING, INC BOARD OF TRUSTEES 3 THE ORGANIZATION RECEIVED FEDERAL LOANS OR AWARDS AND ACCORDINGLY WAS INCLUDED IN THE SINGLE AUDIT ACT AND OMB CIRCULAR A-133 AUDIT AS REPORTED WITHIN THE CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION OF MERCY HOUSING, INC |
| part vii | PART VII SECTION A | Sister Lillian Murphy, RSM, serves as the Chief Executive Officer of Mercy Housing, Inc The Sisters of Mercy of the Americas West MidWest have entered into a contract whereby Sister Murphy has been assigned to Mercy Housing, Inc to perform services and provide executive leadership for Mercy Housing, Inc and its subsidiaries Sister Murphy is a member of a religious community and has taken a vow of poverty and therefore does not receive any personal income Sister Murphy is not an employee of Mercy Housing, Inc Mercy Housing, Inc makes payments directly to the Sisters of Mercy of the Americas West MidWest for monthly stipend payments and benefits relating to the services performed by Sister Murphy The Sisters of Mercy of the Americas West MidWest are responsible for providing the living expenses of Sister Murphy For 2009 Mercy Housing, Inc paid \$390,180 for the annual stipend fee and benefits equivalent |
| PART VII | PART VII SECTION A | DURING 2009 BARRY ZIGAS, BOARD MEMBER, PROVIDED CONSULTING SERVICES TO MERCY HOUSING, INC THROUGH ZIGAS AND ASSOCIATES |

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Name of the organization
MERCY HOUSING INC

Employer identification number

47-0646706

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

(a)
Name, address, and EIN of disregarded entity

(b)
Primary activity

(c)
Legal domicile (state
or foreign country)

(d)
Total income

(e)
End-of-year assets

(f)
Direct controlling
entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b)
Primary activity

(c)
Legal domicile (state
or foreign country)

(d)
Exempt Code section

(e)
Public charity status
(if section 501(c)(3))

(f)
Direct controlling
entity

See Additional Data Table

Part III

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | |
|--|-------------------------|--|-------------------------------------|---|------------------------------|---------------------------------------|---|----|---|---|----|
| | | | | | | | Yes | No | | Yes | No |

See Additional Data Table

Part IV

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership |
|---|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|
|---|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|

See Additional Data Table

Part V

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a Yes

1b Yes

1c Yes

1d Yes

1e Yes

1f

1g

1h

1i

1j

1k Yes

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| | (a) Name of other organization | (b) Transaction type(a-r) | (c) Amount involved |
|-----|-----------------------------------|---------------------------------|------------------------|
| (1) | See Additional Data Table | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

Schedule R (Form 990) 2009

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

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

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Are all partners section 501(c)(3) organizations? | | (e) Share of end-of-year assets | (f) Disproportionate allocations? | | (g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | (h) General or managing partner? | |
|---|-------------------------|--|--|----|--|---|----|---|---|----|
| | | | Yes | No | | Yes | No | | Yes | No |

Software ID:

Software Version:

EIN: 47-0646706

Name: MERCY HOUSING INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

| (a) Name, address, and EIN of related organization | (b) Primary Activity | (c) Legal Domicile (State or Foreign Country) | (d) Exempt Code section | (e) Public charity status (if 501(c)(3)) | (f) Direct Controlling Entity |
|--|-------------------------|---|----------------------------|--|----------------------------------|
| Mercy Portfolio Services 1999 Broadway Suite 1000 Denver, CO 80202 26-4002114 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Mercy Housing Properties Inc 1999 Broadway Suite 1000 Denver, CO 80202 84-1262403 | low-inc hsng | CO | 501(c)(3) | 11 a | nA |
| Brook Oaks Senior Residences 1999 Broadway Suite 1000 Denver, CO 80202 20-4295604 | low-inc hsng | TX | 501(c)(3) | 7 | nA |
| Mercy Commercial Finance Properties 1999 Broadway Suite 1000 Denver, CO 80202 84-1164880 | low-inc hsng | CO | 501(c)(3) | 11 a | nA |
| Mercy Housing Southwest 1999 Broadway Suite 1000 Denver, CO 80202 86-0743192 | low-inc hsng | AZ | 501(c)(3) | 11 a | nA |
| Avondale Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 86-0980810 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Camelot Casitas 1999 Broadway Suite 1000 Denver, CO 80202 86-0980809 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Casa de Merced 1999 Broadway Suite 1000 Denver, CO 80202 86-0808941 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Casa de Shanti 1999 Broadway Suite 1000 Denver, CO 80202 86-0728526 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| El Mirage Senior 1999 Broadway Suite 1000 Denver, CO 80202 86-0847975 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Mesa Senior Meadows 1999 Broadway Suite 1000 Denver, CO 80202 86-0897708 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Guadalupe Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 86-0897709 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Peoria Place 1999 Broadway Suite 1000 Denver, CO 80202 86-0980811 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Plazas de Merced 1999 Broadway Suite 1000 Denver, CO 80202 86-0758961 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Vista Alegre 1999 Broadway Suite 1000 Denver, CO 80202 86-0947230 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Decatur Place 1999 Broadway Suite 1000 Denver, CO 80202 84-1062097 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Holly Park East 1999 Broadway Suite 1000 Denver, CO 80202 84-1347445 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Willow Street Apartments 1999 Broadway Suite 1000 Denver, CO 80202 84-1334167 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Mercy Properties Arizona 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987 | low-inc hsng | AR | 501(c)(3) | 11 a | nA |
| Los Arcos 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Mercy Court 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987 | low-inc hsng | AZ | 501(c)(3) | 11 c | nA |
| Mercy Housing Colorado 1999 Broadway Suite 1000 Denver, CO 80202 20-1583332 | low-inc hsng | CO | 501(c)(3) | 11 a | nA |
| Holly Park Community Center LLC 1999 Broadway Suite 1000 Denver, CO 80202 38-3715668 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Homes for Greeley 1999 Broadway Suite 1000 Denver, CO 80202 84-1349918 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Mercy Housing California 1999 Broadway Suite 1000 Denver, CO 80202 94-3081666 | low-inc hsng | CA | 501(c)(3) | 9 | nA |
| All Hallows Community 1999 Broadway Suite 1000 Denver, CO 80202 94-2722870 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Fairfax Nonprofit Housing Develop Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-2772546 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Marin Homes for Independent Living 1999 Broadway Suite 1000 Denver, CO 80202 94-2787430 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Cantebria Senior Homes 1999 Broadway Suite 1000 Denver, CO 80202 94-3361794 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Senior Housing Oxnard 1999 Broadway Suite 1000 Denver, CO 80202 94-3224446 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

| (a) Name, address, and EIN of related organization | (b) Primary Activity | (c) Legal Domicile (State or Foreign Country) | (d) Exempt Code section | (e) Public charity status (if 501(c)(3)) | (f) Direct Controlling Entity |
|--|-------------------------|---|-------------------------------|---|-------------------------------------|
| MacLeav Nonprofit Housing Develop Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-2762529 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| EHCC Housing Corp (Eden House) 1999 Broadway Suite 1000 Denver, CO 80202 94-3234538 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Francis of Assisi Community 1999 Broadway Suite 1000 Denver, CO 80202 94-2366315 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Gault Street Senior 1999 Broadway Suite 1000 Denver, CO 80202 75-2983979 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| John W King Senior Community 1999 Broadway Suite 1000 Denver, CO 80202 94-3282891 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Housing Calwest 1999 Broadway Suite 1000 Denver, CO 80202 94-2963228 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Maria B Freitas Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3190261 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Marin Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-1358291 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Gardens 1999 Broadway Suite 1000 Denver, CO 80202 33-0809069 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Most Holy Redeemer Senior Housing 1999 Broadway Suite 1000 Denver, CO 80202 94-3044873 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Notre Dame Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3209503 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Oceana Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3167825 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Presentation Senior Community 1999 Broadway Suite 1000 Denver, CO 80202 94-3264209 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Riverside Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 68-0002157 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Russell Manor 1999 Broadway Suite 1000 Denver, CO 80202 93-1189914 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| St Andrew Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3088260 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Tierra Del Sol Inc 1999 Broadway Suite 1000 Denver, CO 80202 75-3004763 | low-inc hsng | CA | 501(c)(3) | 9 | nA |
| St Elizabeth Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-2705149 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Garden Park Apt Community 1999 Broadway Suite 1000 Denver, CO 80202 68-0484147 | low-inc hsng | CA | 501(c)(3) | 9 | nA |
| Mercy Oaks Village 1999 Broadway Suite 1000 Denver, CO 80202 75-3134134 | low-inc hsng | CA | 501(c)(3) | 7 | nA |
| Mercy Properties California 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 9 | nA |
| Foster Youth 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| The Haven 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Power Inn 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Leland House 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Osocales (McIntosh Mobile Homes) 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Richmond Hills 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Sycamore Center (Red Bluff) 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Wherry Housing 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Surreal Estates 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

| (a) Name, address, and EIN of related organization | (b) Primary Activity | (c) Legal Domicile (State or Foreign Country) | (d) Exempt Code section | (e) Public charity status (if 501(c)(3)) | (f) Direct Controlling Entity |
|--|-------------------------|---|----------------------------|--|----------------------------------|
| Sierra Vista 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Magnolia Village LLC 1999 Broadway Suite 1000 Denver, CO 80202 32-0139519 | low-inc hsng | GA | 501(c)(3) | 11 c | nA |
| Mercy Oak Forest LLC 1999 Broadway Suite 1000 Denver, CO 80202 32-0139517 | low-inc hsng | GA | 501(c)(3) | 11 c | nA |
| Mercy Housing Idaho Inc 1999 Broadway Suite 1000 Denver, CO 80202 82-0458396 | low-inc hsng | ID | 501(c)(3) | 11 a | nA |
| Eagle Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 03-0410639 | low-inc hsng | ID | 501(c)(3) | 11 c | nA |
| Mercy Southeast Idaho Inc 1999 Broadway Suite 1000 Denver, CO 80202 84-1284293 | low-inc hsng | CA | 501(c)(3) | 11 a | nA |
| Mercy Moscow Inc (Hawthorne) 1999 Broadway Suite 1000 Denver, CO 80202 82-0475388 | low-inc hsng | ID | 501(c)(3) | 11 c | nA |
| Independence Hill 1999 Broadway Suite 1000 Denver, CO 80202 72-1545927 | low-inc hsng | ID | 501(c)(3) | 11 c | nA |
| Mercy Twin Falls Inc (Willswood) 1999 Broadway Suite 1000 Denver, CO 80202 82-0492940 | low-inc hsng | ID | 501(c)(3) | 11 c | nA |
| Mercy Housing Ohio Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-2373936 | low-inc hsng | OH | 501(c)(3) | 11 c | nA |
| Mercy Properties Inc (MPI) 1999 Broadway Suite 1000 Denver, CO 80202 84-1173689 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Properties II Inc 1999 Broadway Suite 1000 Denver, CO 80202 82-0485862 | low-inc hsng | ID | 501(c)(3) | 11 c | nA |
| Neary Lagoon Inc 1999 Broadway Suite 1000 Denver, CO 80202 77-0214799 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| San Juan Housing Corp 1999 Broadway Suite 1000 Denver, CA 80202 68-0378676 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Housing Midwest 1999 Broadway Suite 1000 Denver, CO 80202 47-0772351 | low-inc hsng | NE | 501(c)(3) | 11 a | nA |
| Mercy Crestview Village 1999 Broadway Suite 1000 Denver, CO 80202 47-0785351 | low-inc hsng | NE | 501(c)(3) | 11 c | nA |
| Heartland Housing Initiative (HARP) 1999 Broadway Suite 1000 Denver, CO 80202 42-1359133 | low-inc hsng | AZ | 501(c)(3) | 11 a | nA |
| Mercy House 1999 Broadway Suite 1000 Denver, CO 80202 37-1068780 | low-inc hsng | NE | 501(c)(3) | 11 c | nA |
| Mercy Northglen 1999 Broadway Suite 1000 Denver, CO 80202 47-0779681 | low-inc hsng | NE | 501(c)(3) | 11 c | nA |
| Mercy Oakwood Gardens 1999 Broadway Suite 1000 Denver, CO 80202 84-1344220 | low-inc hsng | AZ | 501(c)(3) | 9 | nA |
| Mercy Midwest Properties (Ridgeview) 1999 Broadway Suite 1000 Denver, CO 80202 43-1584918 | low-inc hsng | MO | 501(c)(3) | 11 c | nA |
| Mercy Western Manor 1999 Broadway Suite 1000 Denver, CO 80202 47-0785349 | low-inc hsng | NE | 501(c)(3) | 11 c | nA |
| Mercy Village Joplin 1999 Broadway Suite 1000 Denver, CO 80202 37-1459692 | low-inc hsng | MO | 501(c)(3) | 11 c | nA |
| Mercy Housing Southeast 1999 Broadway Suite 1000 Denver, CO 80202 56-1993872 | low-inc hsng | NC | 501(c)(3) | 9 | nA |
| Mercy Place Belmont Inc 1999 Broadway Suite 1000 Denver, CO 80202 80-0034784 | low-inc hsng | NC | 501(c)(3) | 11 c | nA |
| Mercy Housing Pembroke Inc 1999 Broadway Suite 1000 Denver, CO 80202 13-4224803 | low-inc hsng | GA | 501(c)(3) | 11 c | nA |
| Rendu Terrace West Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-0707382 | low-inc hsng | AL | 501(c)(3) | 11 a | nA |
| Mercy Housing Georgia Holdings LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-1233986 | low-inc hsng | GA | 501(c)(3) | 11 c | nA |
| Marshside Village Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-1910771 | low-inc hsng | SC | 501(c)(3) | 11 a | nA |
| Allegre Point Senior Residences 1999 Broadway Suite 1000 Denver, CO 80202 20-4295472 | low-inc hsng | CO | 501(c)(3) | 11 a | nA |

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

| (a) Name, address, and EIN of related organization | (b) Primary Activity | (c) Legal Domicile (State or Foreign Country) | (d) Exempt Code section | (e) Public charity status (if 501(c)(3)) | (f) Direct Controlling Entity |
|---|-------------------------|---|----------------------------|--|----------------------------------|
| Mercy Properties Georgia Inc (MPGI) 1999 Broadway Suite 1000 Denver, CO80202 58-2425127 | low-inc hsng | GA | 501(c)(3) | 11 c | nA |
| Intercommunity Properties (Appian Way) 1999 Broadway Suite 1000 Denver, CO80202 91-1708437 | low-inc hsng | WA | 501(c)(3) | 11 c | nA |
| Intercommunity Housing Ferndale 1999 Broadway Suite 1000 Denver, CO80202 91-1667138 | low-inc hsng | WA | 501(c)(3) | 11 c | nA |
| Sterling Senior Housing 1999 Broadway Suite 1000 Denver, CO80202 14-1866405 | low-inc hsng | WA | 501(c)(3) | 11 a | nA |
| Villa Caridad 1999 Broadway Suite 1000 Denver, CO80202 68-0387620 | low-inc hsng | CA | 501(c)(3) | 9 | nA |
| Park Village Apts 1999 Broadway Suite 1000 Denver, CO80202 68-0292975 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Housing 2904 N 45th St Omaha 1999 Broadway Suite 1000 Denver, CO80202 37-1068780 | low-inc hsng | NE | 501(c)(3) | 11 c | nA |
| Harrington Homes Program 1999 Broadway Suite 1000 Denver, CO80202 47-0716140 | low-inc hsng | NE | 501(c)(3) | 11 c | nA |
| Mercy Community Housing North Carolina 1999 Broadway Suite 1000 Denver, CO80202 56-2155324 | low-inc hsng | NC | 501(c)(3) | 11 c | nA |
| Mercy West I 1999 Broadway Suite 1000 Denver, CO80202 68-0254564 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Florin Housing Corp 1999 Broadway Suite 1000 Denver, CO80202 68-0336533 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Franciscan Homes III Inc 1999 Broadway Suite 1000 Denver, CO80202 31-1394513 | low-inc hsng | OH | 501(c)(3) | 11 c | nA |
| Mercy Housing CalWest 1999 Broadway Suite 1000 Denver, CO80202 94-2963228 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Mercy Bond Properties Az III 1999 Broadway Suite 1000 Denver, CO80202 77-0342735 | low-inc hsng | CA | 501(c)(3) | 11 a | nA |
| Mercy Bond Properties Nebraska I 1999 Broadway Suite 1000 Denver, CO80202 68-0378674 | low-inc hsng | NE | 501(c)(3) | 9 | nA |
| Mercy Bond Properties Colorado I 1999 Broadway Suite 1000 Denver, CO80202 94-3286321 | low-inc hsng | CO | 501(c)(3) | 9 | nA |
| Homes Again Program 1999 Broadway Suite 1000 Denver, CO80202 84-1164880 | low-inc hsng | CO | 501(c)(3) | 11 c | nA |
| Walnut Grove 1999 Broadway Suite 1000 Denver, CO80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Santa Monica 1999 Broadway Suite 1000 Denver, CO80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| Acacia Meadows 1999 Broadway Suite 1000 Denver, CO80202 68-0233835 | low-inc hsng | CA | 501(c)(3) | 11 c | nA |
| SOUTH OF MARKET MERCY 1999 Broadway Suite 1000 DENVER, CO80202 94-3199902 | low-inc hsng | CA | 501(c)(3) | 9 | NA |
| FHD Holdings LLC 1999 Broadway Suite 1000 Denver, CO80202 20-1356271 | low-inc hsng | OH | 501(c)(3) | 9 | na |
| Mercy Bond Properties Az I 1999 BROADWAY SUITE 1000 DENVER, CO80202 94-3142767 | LOW-INC HSNG | AZ | 501(c)(3) | 9 | na |
| Orangewood Apartments 1999 broadway suite 1000 denver, CO80202 94-3142767 | low-inc hsng | AZ | 501(c)(3) | 9 | na |
| wishing well ii 1999 broadway suite 1000 denver, CO80202 94-3142767 | low-inc hsng | AZ | 501(c)(3) | 9 | na |
| wishing well villas 1999 broadway suite 1000 denver, CO80202 94-3142767 | low-inc hsng | AZ | 501(c)(3) | 9 | na |
| franconia llc 1999 broadway suite 1000 denver, CO80202 80-0008567 | low-inc hsng | CA | 501(c)(3) | 9 | na |
| intercommunity mercy housing 1999 broadway suite 1000 denver, CO80202 91-1546525 | low-inc hsng | WA | 501(c)(3) | 9 | na |
| Mercy Timbercreek LLC 1999 broadway suite 1000 denver, CO80202 68-0378674 | low-inc hsng | CA | 501(c)(3) | 9 | nA |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Dispropportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|---|-------------------------|---|--|---|--------------------------------------|---|--|----|---|---|----|
| | | | | | | | Yes | No | | Yes | No |
| Junipero Serra LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308082 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Monsignor Lyne LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308080 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| St Andrew Community LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308080 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Villa Columba Mercy Riverside LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308076 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Mercy Housing California XL 1999 Broadway Suite 1000 Denver, CO 80202 26-1398920 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Mercy Housing California XXXVIII 1999 Broadway Suite 1000 Denver, CO 80202 33-1153406 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| 365 Fulton LP (Parcel G) 1999 Broadway Suite 1000 Denver, CO 80202 26-1539223 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Mercy Housing California XLII 1999 Broadway Suite 1000 Denver, CO 80202 26-2575525 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Mercy Housing California XLIV 1999 Broadway Suite 1000 Denver, CO 80202 26-3583090 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Mercy Housing California XLIII 1999 Broadway Suite 1000 Denver, CO 80202 26-2553554 | low-inc hsng | CA | na | n/a | | | | No | | | No |
| Mercy Community Housing Georgia (MHCga) 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Mercy Housing Georgia I 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Mercy Housing Georgia IV 1999 Broadway Suite 1000 Denver, CO 80202 56-2328730 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Mercy Housing Georgia V LP 1999 Broadway Suite 1000 Denver, CO 80202 90-0284434 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Mercy Housing Georgia VI LP 1999 Broadway Suite 1000 Denver, CO 80202 20-4466474 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Acquisition Properties Georgia I 1999 Broadway Suite 1000 Denver, CO 80202 20-4465851 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Mercy Housing Georgia VIII LP 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Acquisition Properties Georgia II 1999 Broadway Suite 1000 Denver, CO 80202 20-4465972 | low-inc hsng | GA | na | n/a | | | | No | | | No |
| Mercy Properties Washington 1999 Broadway Suite 1000 Denver, CO 80202 91-1903782 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Intercommunity Mercy Washington I 1999 Broadway Suite 1000 Denver, CO 80202 91-1584665 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Intercommunity Mercy Washington II 1999 Broadway Suite 1000 Denver, CO 80202 91-1572690 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Housing Washington VIII 1999 Broadway Suite 1000 Denver, CO 80202 91-2124779 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Housing Washington VI 1999 Broadway Suite 1000 Denver, CO 80202 84-1459924 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Housing Washington V 1999 Broadway Suite 1000 Denver, CO 80202 84-1457612 | low-inc hsng | OR | na | n/a | | | | No | | | No |
| Mercy Housing Washington VII 1999 Broadway Suite 1000 Denver, CO 80202 91-2038920 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Housing Washington IX LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1186086 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Housing Washington X LLC 1999 Broadway Suite 1000 Denver, CO 80202 55-0887839 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Properties Washington III LLC 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Pilchuck 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Woodlake Manor II 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Disproportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|---|-------------------------|---|--|---|--------------------------------------|---|---|----|--|---|----|
| | | | | | | | Yes | No | | Yes | No |
| Woodlake Manor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Villa Kathleen 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Skagit Village 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Oak Harbor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Olympic 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Monroe Villa 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Lake Village East 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Lake Stevens 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Fircrest 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Ferndale Villa 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Evergreen Manor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Cedarwood I 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Cedarwood IV 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Cascade Apartments 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Boundary Village 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Properties Washington II 1999 Broadway Suite 1000 Denver, CO 80202 30-0117515 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mercy Properties Washington I LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Bayshore Court 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Cambridge Apartments 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Cascade Village 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Cheney Gardens 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Mabton Gardens 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Moses Lake Estates 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Pine Road Village 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Rock Creek Terrace 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Sandstone 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Silvercrest 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Wapato Gardens 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Washington Square 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 | low-inc hsng | WA | na | n/a | | | | No | | | No |
| Padre Apartments Community 1999 Broadway Suite 1000 Denver, CO 80202 84-0789830 | low-inc hsng | CA | na | n/a | | | | No | | | No |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Disproportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|--|-------------------------|---|----|--|---|--------------------------------------|---|---|----|--|---|----|
| | | | | | | | | Yes | No | | Yes | No |
| Roseland Limited Partnership 1999 Broadway Suite 1000 Denver, CO 80202 36-4304416 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| 111 Jones Street Assoc (111 Jones St) 1999 Broadway Suite 1000 Denver, CO 80202 94-3142765 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Britton Street Assoc(Britton Court) 1999 Broadway Suite 1000 Denver, CO 80202 94-3300509 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing Nebraska I 1999 Broadway Suite 1000 Denver, CO 80202 84-1449163 | low-inc hsng | NE | na | | n/a | | | | No | | | No |
| Mercy Housing California VII 1999 Broadway Suite 1000 Denver, CO 80202 94-3229540 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Somerset Senior Hsg 1999 Broadway Suite 1000 Denver, CO 80202 74-2765568 | low-inc hsng | TX | na | | n/a | | | | No | | | No |
| Mercy Housing California II 1999 Broadway Suite 1000 Denver, CO 80202 94-3187825 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing Colorado VIII 1999 Broadway Suite 1000 Denver, CO 80202 93-1190349 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Mercy Housing Colorado-I LTD (Grace) 1999 Broadway Suite 1000 Denver, CO 80202 84-1176712 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Mercy Housing California XI 1999 Broadway Suite 1000 Denver, CO 80202 94-3244521 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Marleton Affordable Hsg Assoc 1999 Broadway Suite 1000 Denver, CO 80202 04-3594636 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mason Apartments (Mason School Apts) 1999 Broadway Suite 1000 Denver, CO 80202 42-1301449 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Mercy Housing California V 1999 Broadway Suite 1000 Denver, CO 80202 94-3229051 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Park Terrace Apts (Park Terrace Apts) 1999 Broadway Suite 1000 Denver, CO 80202 94-3332881 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Quinn Cottages LP (Quinn Cottages) 1999 Broadway Suite 1000 Denver, CO 80202 65-0367005 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing California X (The Rose) 1999 Broadway Suite 1000 Denver, CO 80202 94-3232501 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| San Felipe Homes (San Felipe Homes) 1999 Broadway Suite 1000 Denver, CO 80202 95-4384732 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| 2220 10th Avenue Assoc (Santana Apts) 1999 Broadway Suite 1000 Denver, CO 80202 94-3140163 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing California VIII 1999 Broadway Suite 1000 Denver, CO 80202 94-3229541 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing Iowa II LP 1999 Broadway Suite 1000 Denver, CO 80202 84-1284752 | low-inc hsng | IA | na | | n/a | | | | No | | | No |
| Mercy Housing California I 1999 Broadway Suite 1000 Denver, CO 80202 84-1210914 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing Arizona I 1999 Broadway Suite 1000 Denver, CO 80202 86-0791473 | low-inc hsng | AZ | na | | n/a | | | | No | | | No |
| Mercy Housing Georgia II 1999 Broadway Suite 1000 Denver, CO 80202 58-2621798 | low-inc hsng | GA | na | | n/a | | | | No | | | No |
| Mercy Housing Colorado-IX 1999 Broadway Suite 1000 Denver, CO 80202 87-0706258 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Mercy Housing Arizona II (Page Commons) 1999 Broadway Suite 1000 Denver, CO 80202 33-1075152 | low-inc hsng | AZ | na | | n/a | | | | No | | | No |
| Columbus Park Properties LLC 1999 Broadway Suite 1000 Denver, CO 80202 35-2223340 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Parkside Terrace Apt LLC 1999 Broadway Suite 1000 Denver, CO 80202 36-3914505 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Parkside Terrace LP 1999 Broadway Suite 1000 Denver, CO 80202 36-3914505 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Mulberry Court LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-8008017 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Mercy Housing South Carolina I 1999 Broadway Suite 1000 Denver, CO 80202 59-3767323 | low-inc hsng | SC | na | | n/a | | | | No | | | No |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Disproportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|--|-------------------------|---|----|--|---|--------------------------------------|---|---|----|--|---|----|
| | | | | | | | | Yes | No | | Yes | No |
| Mercy Housing Georgia III 1999 Broadway Suite 1000 Denver, CO 80202 43-1954812 | low-inc hsng | GA | na | | n/a | | | | No | | | No |
| Mercy Housing South Dakota I LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-2830331 | low-inc hsng | SD | na | | n/a | | | | No | | | No |
| Mercy Housing South Dakota II LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-2830356 | low-inc hsng | SD | na | | n/a | | | | No | | | No |
| Mercy Housing Colorado XI LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-5331841 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Commons on Main LP 1999 Broadway Suite 1000 Denver, CO 80202 20-8033896 | low-inc hsng | OH | na | | n/a | | | | No | | | No |
| Aromor Mercy LLC (Aromor Apartments) 1999 Broadway Suite 1000 Denver, CO 80202 30-0296042 | low-inc hsng | CO | na | | n/a | | | | No | | | No |
| Galewood SLF Associates LP 1999 Broadway Suite 1000 Denver, CO 80202 20-1882654 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Mercy Alston Lake LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-2948887 | low-inc hsng | SC | na | | n/a | | | | No | | | No |
| Franciscan Homes III LP 1999 Broadway Suite 1000 Denver, CO 80202 31-1394513 | low-inc hsng | OH | na | | n/a | | | | No | | | No |
| Franciscan Homes IV LP 1999 Broadway Suite 1000 Denver, CO 80202 31-1463371 | low-inc hsng | OH | na | | n/a | | | | No | | | No |
| Mercy Housing Utah I 1999 Broadway Suite 1000 Denver, CO 80202 02-0564555 | low-inc hsng | UT | na | | n/a | | | | No | | | No |
| Mercy Housing Idaho IV 1999 Broadway Suite 1000 Denver, CO 80202 82-0487654 | low-inc hsng | ID | na | | n/a | | | | No | | | No |
| Mercy Housing Idaho V (Sisters Villa) 1999 Broadway Suite 1000 Denver, CO 80202 04-3624359 | low-inc hsng | ID | na | | n/a | | | | No | | | No |
| 2101 Telegraph Avenue Inc 1999 Broadway Suite 1000 Denver, CO 80202 94-3222935 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| 2101 Telegraph Avenue Assoc 1999 Broadway Suite 1000 Denver, CO 80202 94-3222935 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Bishops Block (Bishops Block) 1999 Broadway Suite 1000 Denver, CO 80202 01-0477157 | low-inc hsng | IA | na | | n/a | | | | No | | | No |
| 1028 Howard St Associates 1999 Broadway Suite 1000 Denver, CO 80202 94-3160742 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| 1101 Howard St Associates 1999 Broadway Suite 1000 Denver, CO 80202 94-3160341 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing California VI 1999 Broadway Suite 1000 Denver, CO 80202 94-3224528 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| 1475 167th Avenue Assoc 1999 Broadway Suite 1000 Denver, CO 80202 94-3249328 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Centro Partners 1999 Broadway Suite 1000 Denver, CO 80202 77-0295344 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| La Playa Residential 1999 Broadway Suite 1000 Denver, CO 80202 77-0278613 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| West 28th Street 1999 Broadway Suite 1000 Denver, CO 80202 95-4550003 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| 16th & Church Street Assoc 1999 Broadway Suite 1000 Denver, CO 80202 94-3135262 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing California III 1999 Broadway Suite 1000 Denver, CO 80202 94-3187826 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing California IX 1999 Broadway Suite 1000 Denver, CO 80202 94-3230471 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Mercy Housing California IV 1999 Broadway Suite 1000 Denver, CO 80202 94-3210969 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Visitacion Valley Affordable Housing 1999 Broadway Suite 1000 Denver, CO 80202 94-3273336 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Visitation Valley Fam Hsg Assoc 1999 Broadway Suite 1000 Denver, CO 80202 94-3275566 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Near Lagoon Partners 1999 Broadway Suite 1000 Denver, CO 80202 77-0256317 | low-inc hsng | CA | na | | n/a | | | | No | | | No |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Disproportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|--|-------------------------|---|----|--|---|--|--------------------------------------|---|---|----|--|---|----|
| | | | | | | | | | Yes | No | | Yes | No |
| Mercy Housing California XIV 1999 Broadway Suite 1000 Denver, CO 80202 94-3377941 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XV 1999 Broadway Suite 1000 Denver, CO 80202 94-3379316 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XVII 1999 Broadway Suite 1000 Denver, CO 80202 94-3400496 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXIV 1999 Broadway Suite 1000 Denver, CO 80202 74-3052786 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XVIII 1999 Broadway Suite 1000 Denver, CO 80202 03-0376881 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XIII 1999 Broadway Suite 1000 Denver, CO 80202 94-3377935 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XX 1999 Broadway Suite 1000 Denver, CO 80202 36-4497277 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XVI 1999 Broadway Suite 1000 Denver, CO 80202 94-3381170 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXIII 1999 Broadway Suite 1000 Denver, CO 80202 82-0560494 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XII 1999 Broadway Suite 1000 Denver, CO 80202 94-3366333 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Village Park Housing Associates 1999 Broadway Suite 1000 Denver, CO 80202 68-0254566 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXI 1999 Broadway Suite 1000 Denver, CO 80202 48-1259652 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XIX 1999 Broadway Suite 1000 Denver, CO 80202 01-0716135 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXV 1999 Broadway Suite 1000 Denver, CO 80202 81-0564415 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Pinewood Court Apartments 1999 Broadway Suite 1000 Denver, CO 80202 68-0435836 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXII 1999 Broadway Suite 1000 Denver, CO 80202 35-2172040 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXVI 1999 Broadway Suite 1000 Denver, CO 80202 58-2679059 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XLI 1999 Broadway Suite 1000 Denver, CO 80202 26-2350027 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XIV 1999 Broadway Suite 1000 Denver, CO 80202 94-3377941 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXVII 1999 Broadway Suite 1000 Denver, CO 80202 65-1207291 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXVIII 1999 Broadway Suite 1000 Denver, CO 80202 73-1721242 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Terrace LLC 1999 Broadway Suite 1000 Denver, CO 80202 68-0254564 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXIX 1999 Broadway Suite 1000 Denver, CO 80202 73-1729092 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXX 1999 Broadway Suite 1000 Denver, CO 80202 61-1488186 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| New Dana Strand Townhomes 1999 Broadway Suite 1000 Denver, CO 80202 51-0524022 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXXII 1999 Broadway Suite 1000 Denver, CO 80202 87-0756940 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXXVI 1999 Broadway Suite 1000 Denver, CO 80202 56-2568833 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXXI 1999 Broadway Suite 1000 Denver, CO 80202 87-0756700 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXXV 1999 Broadway Suite 1000 Denver, CO 80202 76-0827799 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |
| Mercy Housing California XXXIII 1999 Broadway Suite 1000 Denver, CO 80202 43-2100410 | low-inc hsng | CA | na | | n/a | | | | | No | | | No |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Disproportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|--|-------------------------|---|----|--|---|--------------------------------------|---|---|----|--|---|----|
| | | | | | | | | Yes | No | | Yes | No |
| Mercy Housing California XXXVII 1999 Broadway Suite 1000 Denver, CO80202 68-0631916 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Colonia San Martin Associates LP 1999 Broadway Suite 1000 Denver, CO80202 83-0481233 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Mercy Housing California XXXIX 1999 Broadway Suite 1000 Denver, CO80202 01-0885277 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Kennedy Estates Hsg Assoc 1999 Broadway Suite 1000 Denver, CO80202 68-0355465 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Tahoe Valley Townhomes Assoc 1999 Broadway Suite 1000 Denver, CO80202 94-3298324 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Florin Wood Assoc 1999 Broadway Suite 1000 Denver, CO80202 68-0318012 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Mercy Housing Idaho II 1999 Broadway Suite 1000 Denver, CO80202 84-1212029 | low-inc hsng | ID | na | n/a | | | | | No | | | No |
| Mercy Housing Colorado VII 1999 Broadway Suite 1000 Denver, CO80202 84-1473883 | low-inc hsng | CO | na | n/a | | | | | No | | | No |
| Mercy Housing Colorado-II Ltd 1999 Broadway Suite 1000 Denver, CO80202 84-1176713 | low-inc hsng | CO | na | n/a | | | | | No | | | No |
| Mercy Housing Iowa I () 1999 Broadway Suite 1000 Denver, CO80202 84-1178412 | low-inc hsng | IA | na | n/a | | | | | No | | | No |
| Mercy Housing Washington IV 1999 Broadway Suite 1000 Denver, CO80202 91-1717799 | low-inc hsng | MO | na | n/a | | | | | No | | | No |
| Mercy Housing Missouri-I LP 1999 Broadway Suite 1000 Denver, CO80202 84-1176358 | low-inc hsng | MO | na | n/a | | | | | No | | | No |
| Mercy Housing Colorado VI 1999 Broadway Suite 1000 Denver, CO80202 84-1361296 | low-inc hsng | CO | na | n/a | | | | | No | | | No |
| Mercy Housing Idaho III 1999 Broadway Suite 1000 Denver, CO80202 84-1251391 | low-inc hsng | ID | na | n/a | | | | | No | | | No |
| Mercy Housing Idaho I 1999 Broadway Suite 1000 Denver, CO80202 84-1212028 | low-inc hsng | ID | na | n/a | | | | | No | | | No |
| Mercy Housing Colorado V 1999 Broadway Suite 1000 Denver, CO80202 84-1318329 | low-inc hsng | CO | na | n/a | | | | | No | | | No |
| Mercy Housing Missouri II 1999 Broadway Suite 1000 Denver, CO80202 84-1201811 | low-inc hsng | MO | na | n/a | | | | | No | | | No |
| Mercy Housing Colorado III 1999 Broadway Suite 1000 Denver, CO80202 84-1292696 | low-inc hsng | CO | na | n/a | | | | | No | | | No |
| Mercy Housing Washington III 1999 Broadway Suite 1000 Denver, CO80202 91-1676111 | low-inc hsng | WA | na | n/a | | | | | No | | | No |
| Mercy Housing Colorado IV 1999 Broadway Suite 1000 Denver, CO80202 84-1284749 | low-inc hsng | CO | na | n/a | | | | | No | | | No |
| Marlton Affordable Housing Corp 1999 Broadway Suite 1000 Denver, CO80202 91-2164481 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Brentwood Green Valley Apts 1999 Broadway Suite 1000 Denver, CO80202 94-3135990 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| New Dana Strand Partners I LP 1999 Broadway Suite 1000 Denver, CO80202 51-0524022 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| Magnolia Limited Partnership 1999 Broadway Suite 1000 Denver, CO80202 36-3822288 | low-inc hsng | IL | na | n/a | | | | | No | | | No |
| Red Door Limited Partnership 1999 Broadway Suite 1000 Denver, CO80202 36-3915050 | low-inc hsng | IL | na | n/a | | | | | No | | | No |
| 4707 Malden Ltd Partnership 1999 Broadway Suite 1000 Denver, CO80202 36-3762788 | low-inc hsng | IL | na | n/a | | | | | No | | | No |
| Malden Limited Partnership II 1999 Broadway Suite 1000 Denver, CO80202 20-8746121 | low-inc hsng | IL | na | n/a | | | | | No | | | No |
| MPI Highland Place Apartments LP 1999 Broadway Suite 1000 Denver, CO80202 58-2461689 | low-inc hsng | GA | na | n/a | | | | | No | | | No |
| Arlington Hotel 1999 Broadway Suite 1000 Denver, CO80202 26-1398920 | low-inc hsng | CA | na | n/a | | | | | No | | | No |
| 2220 Tenth Ave 1999 Broadway Suite 1000 Denver, CO80202 94-3140163 | low-inc hsng | CA | na | n/a | | | | | No | | | No |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Disproportionate allocations? | | (i) Code V-UBI amount on Box 20 of K-1 (\$) | (j) General or Managing Partner? | |
|--|-------------------------|---|----|--|---|--------------------------------------|---|---|----|--|---|----|
| | | | | | | | | Yes | No | | Yes | No |
| South Loop Apartments 1999 Broadway Suite 1000 Denver, CO 80202 36-4027476 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| 5042 Winthrop Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 36-3855358 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Near North Partnership 1999 Broadway Suite 1000 Denver, CO 80202 32-0143113 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Mercy Housing Utah 1999 Broadway Suite 1000 Denver, CO 80202 02-0564555 | low-inc hsng | UT | na | | n/a | | | | No | | | No |
| Mercy Housing S Carolina 1999 Broadway Suite 1000 Denver, CO 80202 59-3767323 | low-inc hsng | SC | na | | n/a | | | | No | | | No |
| Mercy Terrace 1999 Broadway Suite 1000 Denver, CO 80202 68-0254564 | low-inc hsng | CA | na | | n/a | | | | No | | | No |
| Wentworth Commons 1999 Broadway Suite 1000 Denver, CO 80202 30-0082553 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Malden Arms Apartments 1999 Broadway Suite 1000 Denver, CO 80202 36-3679841 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| 901 West 63rd LP (Englewood Apartments) 1999 Broadway Suite 1000 Denver, CO 80202 26-1233617 | low-inc hsng | IL | na | | n/a | | | | No | | | No |
| Mercy Housing Georgia IX LP 1999 Broadway Suite 1000 Denver, CO 80202 20-8829418 | low-inc hsng | GA | na | | n/a | | | | No | | | No |

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

| (a) Name, address, and EIN of related organization | | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | (d) Direct Controlling Entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income (\$) | (g) Share of end-of-year assets (\$) | (h) Percentage ownership |
|--|--|-------------------------|--|----------------------------------|--|-----------------------------------|---|-----------------------------|
| South Loop Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-4027475 | | management | IL | na | c corp | | | |
| Winthrop Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-3855355 | | management | IL | na | c corp | | | |
| Near North Apartments Corp NF 1999 Broadway Suite 1000 Denver, CO 80202 36-4570431 | | management | IL | na | c corp | | | |
| MCHG Partners Inc (MCHG) 1999 Broadway Suite 1000 Denver, CO 80202 20-8824753 | | management | GA | na | c corp | | | |
| Mercy Lithonia Park View Inc (MLithPV) 1999 Broadway Suite 1000 Denver, CO 80202 20-8829364 | | management | GA | na | c corp | | | |
| Malden Arms Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-3815990 | | management | IL | na | c corp | | | |
| Malden Arms Corp II NFP 1999 Broadway Suite 1000 Denver, CO 80202 36-3815990 | | management | CA | na | c corp | | | |
| Mercy Galewood SLF Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-5825081 | | management | IL | na | c corp | | | |
| McDermott Place 1999 Broadway Suite 1000 Denver, CO 80202 47-0779682 | | management | IA | na | c corp | | | |
| Mercy Affordable Housing Inc (MAHI) 1999 Broadway Suite 1000 Denver, CO 80202 82-0489878 | | management | ID | na | c corp | | | |
| Affordable Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 84-1173690 | | management | CA | na | c corp | | | |
| Affordable Housing Initiative (AHI) 1999 Broadway Suite 1000 Denver, CO 80202 94-3096988 | | management | CA | na | c corp | | | |
| Englewood Apartments NFP 1999 Broadway Suite 1000 Denver, CO 80202 26-1233523 | | management | IL | na | c corp | | | |
| Mercy Scottdale Oak Forest Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-8825042 | | management | GA | na | c corp | | | |
| Mercy Park View Partners Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-8829242 | | management | GA | na | c corp | | | |
| Mercy Housing Woodland Quarters Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-8827867 | | management | GA | na | c corp | | | |
| 111th & Wentworth Apartments Corp 1999 Broadway Suite 1000 Denver, CO 80202 38-3648994 | | management | IL | na | c corp | | | |
| Mercy Commercial California 1999 Broadway Suite 1000 Denver, CO 80202 94-3382154 | | low-inc hsng | CA | na | c corp | | | |
| Commercial - 10th and Mission 1999 Broadway Suite 1000 Denver, CO 80202 94-3382155 | | low-inc hsng | CA | na | c corp | | | |
| Commercial - Derek Silva 1999 Broadway Suite 1000 Denver, CO 80202 94-3382156 | | low-inc hsng | CA | na | c corp | | | |
| Commercial - Polk St 1999 Broadway Suite 1000 Denver, CO 80202 94-3382157 | | low-inc hsng | CA | na | c corp | | | |
| Commercial - Dudley 1999 Broadway Suite 1000 Denver, CO 80202 94-3382158 | | low-inc hsng | CA | na | c corp | | | |
| SAVANNAH ROSE OF SHARON LLC 1999 Broadway Suite 1000 DENVER, CO 80202 20-3591948 | | low-inc hsng | GA | NA | C CORP | | | |
| Commercial - Polk St 1999 Broadway Suite 1000 Denver, CO 80202 94-3382157 | | low-inc hsng | CA | na | c corp | | | |
| Commercial - Dudley 1999 Broadway Suite 1000 Denver, CO 80202 94-3382158 | | low-inc hsng | CA | na | c corp | | | |
| Savannah Rose of Sharon LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-3591948 | | low-inc hsng | GA | na | c corp | | | |

Form 990, Schedule R, Part V - Transactions With Related Organizations

| (a) Name of other organization | | (b) Transaction type(a-r) | (c) Amount Involved (\$) |
|-----------------------------------|---|------------------------------|-----------------------------|
| (1) | NORTHSIDE NAMPA | (A) | 70,768 |
| (2) | PADRE PALOU | (A) | 64,224 |
| (3) | MERCY PROPERTIES CALIFORNIA | (A) | 185,000 |
| (4) | DRIFTWOOD ESTATES | (A) | 69,950 |
| (5) | NORTHERN HEIGHTS | (A) | 54,791 |
| (6) | MERCY HOUSING CALIFORNIA | (A) | 75,936 |
| (7) | INTERCOMMUNITY MERCY HOUSING | (B) | 100,000 |
| (8) | MERCY HOUSING COLORADO | (B) | 595,658 |
| (9) | MERCY PORTFOLIO SERVICES | (B) | 700,000 |
| (10) | MERCY HOUSING LAKEFRONT | (B) | 290,000 |
| (11) | MERCY HOUSING CALIFORNIA | (B) | 474,314 |
| (12) | MERCY HOUSING MIDWEST | (B) | 231,535 |
| (13) | MERCY HOUSING SOUTHEAST | (B) | 100,000 |
| (14) | MERCY HOUSING SOUTHWEST | (B) | 90,000 |
| (15) | MERCY LOAN FUND | (B) | 1,000,000 |
| (16) | RIDGEVIEW | (C) | 484,750 |
| (17) | MERCY HOUSING LAKEFRONT | (D) | 275,000 |
| (18) | NORTHGLEN | (D) | 127,888 |
| (19) | CRESTVIEW VILLAGE | (D) | 174,972 |
| (20) | WESTERN MANOR | (D) | 136,405 |
| (21) | MERCY LOAN FUND | (D) | 1,741,441 |
| (22) | INTERCOMMUNITY MERCY HOUSING PREDEVELOPMENT | (D) | 411,843 |
| (23) | MERCY HOUSING COLORADO PREDEVELOPMENT | (D) | 172,883 |
| (24) | MERCY HOUSING OHIO PREDEVELOPMENT LOCS | (D) | 176,562 |
| (25) | MERCY HOUSING LAKEFRONT PREDEVELOPMENT | (D) | 773,612 |
| (26) | MERCY HOUSING CALIFORNIA PREDEVELOPMENT | (D) | 2,900,194 |
| (27) | MERCY HOUSING IDADO PREDEVELOPMENT | (D) | 86,001 |
| (28) | MERCY HOUSING SOUTHEAST PREDEVELOPMENT | (D) | 1,458,096 |
| (29) | MERCY HOUSING SOUTHWEST PREDEVELOPMENT | (D) | 83,287 |
| (30) | ATLANTIC CITY CONSTRUCTION LOC | (D) | 1,585,345 |
| (31) | MERCY HOUSING CALIFORNIA | (D) | 464,136 |
| (32) | MERCY PROPERTIES CALIFORNIA | (D) | 3,700,000 |
| (33) | VALLE DE MERCED | (D) | 497,050 |
| (34) | EVERGREEN VISTA | (D) | 436,950 |
| (35) | FAMILY TREE | (D) | 436,950 |
| (36) | GRACE APTS | (D) | 1,030,000 |
| (37) | HOLLY PARK WEST | (D) | 69,089 |
| (38) | HOMES FOR GREELEY | (D) | 28,542 |
| (39) | MERCED DE LAS ANIMAS | (D) | 91,709 |
| (40) | NEW HOPE APTS | (D) | 73,694 |
| (41) | NORTHSIDE NAMPA | (D) | 314,787 |
| (42) | PADRE PALOU | (D) | 487,614 |
| (43) | PLAZA ON PLATTE | (D) | 177,834 |
| (44) | SPRINGFIELD COURT | (D) | 324,000 |
| (45) | DRIFTWOOD ESTATES | (D) | 1,271,688 |
| (46) | NORTHERN HEIGHTS | (D) | 992,247 |
| (47) | APPIAN WAY MERCY | (D) | 300,000 |
| (48) | MERCY SERVICES CORPORATION OPERATING LOC | (D) | 7,485,495 |
| (49) | MERCY HOUSING SOUTHEAST OPERATING LOC | (D) | 3,292,531 |
| (50) | MERCY HOUSING OHIO OPERATING LOC | (D) | 471,101 |
| (51) | MERCY HOUSING COLORADO OPERATING LOC | (D) | 5,229,375 |
| (52) | MERCY HOUSING IDAHO OPERATING LOC | (D) | 662,044 |
| (53) | MERCY LOAN FUND | (E) | 3,000,000 |
| (54) | MERCY HOUSING IDAHO | (E) | 750,000 |
| (55) | MERCY COURT | (E) | 430,000 |
| (56) | MERCY PORTFOLIO SERVICES | (K) | 85,221 |