



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 ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NORTHPOINT HOUSING INC	D Employer identification number 94-3287293
		Doing Business As	E Telephone number (415) 989-1111
		Number and street (or P O box if mail is not delivered to street address) Room/suite 345 SPEAR STREET No 700	G Gross receipts \$ 3,859,990
		City or town, state or country, and ZIP + 4 SAN FRANCISCO, CA 94105	
		F Name and address of principal officer D VALENTINE 345 SPEAR STREET No 700 SAN FRANCISCO, CA 94105	
I Tax-exempt status ☒ 501(c) (3) ◀(insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ n/a			

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of formation 1997	M State of legal domicile CA
--	---------------------------------	-------------------------------------

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities Successfully provided affordable housing by serving as the general partner Continued to supply support to BRIDGE Housing Corporation BRIDGE Housing Corporation creates high-quality, affordable homes for working families and seniors With over 12,500 homes placed in service and over 3,500 units currently in progress, BRIDGE is among the largest affordable housing developers in California BRIDGE builds a range of housing types that not only fit comfortably into their surroundings but also act as the catalyst for revitalizing and strengthening neighborhoods
	2	Check this box ☐ 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) 3
	4	Number of independent voting members of the governing body (Part VI, line 1b) 0
	5	Total number of employees (Part V, line 2a) 0
	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 . . . 0

Revenue			Prior Year	Current Year
			769,770	569,644
			249,251	3,111,709
			177,468	178,637
				0
			1,196,489	3,859,990
Expenses			457,376	267,873
				0
				0
				0
			2,198,879	4,770
			2,656,255	272,643
			-1,459,766	3,587,347
Net Assets or Fund Balances			Beginning of Current Year	End of Year
			17,863,723	20,778,660
			2,246,166	1,573,756
			15,617,557	19,204,904

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	2010-11-15 Date
	D KEMP VALENTINE CFO cfo Type or print name and title	

Paid Preparer's Use Only	Preparer's signature ▶ Lndquist von Husen Joyce LLP	Date	Check if self-employed ▶ ☐	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ LINDQUIST VON HUSEN & JOYCE LLP 90 NEW MONTGOMERY STREET 11TH FLOOR SAN FRANCISCO, CA 94105			EIN ▶ Phone no ▶ (415) 957-9999

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

1 Briefly describe the organization's mission

To provide low income housing by serving as general partner

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 \$ 270,068 including grants of \$ 267,873) (Revenue \$ 3,111,709)

The corporation is a General Partner in several Partnerships that own and operate affordable housing projects for low-income persons

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	\$ 270,068
-----------	---------------------------------------	-------------------

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	No
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
14b	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	Yes	
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	1a	1	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
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	2a	0	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file 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: 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	3	
b	Enter the number of voting members that are independent . . .	1b	0	
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		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
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		No
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 CA
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. ☐ Own website ☐ Another's website ☒ 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. THE ORGANIZATION 345 SPEAR STREET No 700 SAN FRANCISCO, CA 94105 (415) 989-1111

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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

[illegible]

1b	Total	0	1,051,970	226,809
-----------	------------------------	---	-----------	---------

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 **0**

		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

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 **0**

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	569,644				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f			569,644			
Program Service Revenue			Business Code					
	2a	INC FROM INV IN PSHI	531,390	2,863,580	2,863,580			
	b	ASSET MANAGEMENT REVEN	531,390	208,940	208,940			
	c	INCENTIVE MANAGEMENT R	531,390	35,051	35,051			
	d	OTHER INCOME	531,390	4,138	4,138			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			3,111,709			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		178,637			178,637	
	4	Income from investment of tax-exempt bond proceeds . . .						
	5	Royalties						
	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)					
	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 . . .					
	9a	Gross income from gaming activities See Part IV, line 19						
		b	Less direct expenses					
		c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances						
		b	Less cost of goods sold					
		c	Net income or (loss) from sales of inventory . . .					
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions			3,859,990	3,111,709	0	178,637	

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	267,873	267,873		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	2,575		2,575	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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	licenses and permits	1,965	1,965		
b	DUES AND CONFERENCES	230	230		
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	272,643	270,068	2,575	0
26	Joint costs. Check here ☒ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			558,627	1	498,888
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,737,059	4	1,539,374
	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			2,391,000	7	2,391,000
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a				
	b	Less accumulated depreciation	10b			10c	
	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			12,210,210	13	15,228,272
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			966,827	15	1,121,126
	16	Total assets. Add lines 1 through 15 (must equal line 34)			17,863,723	16	20,778,660
Liabilities	17	Accounts payable and accrued expenses			496,166	17	473,756
	18	Grants payable				18	
	19	Deferred revenue				19	
	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				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			1,750,000	25	1,100,000
	26	Total liabilities. Add lines 17 through 25			2,246,166	26	1,573,756
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			15,617,557	27	19,204,904
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ 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			15,617,557	33	19,204,904
	34	Total liabilities and net assets/fund balances			17,863,723	34	20,778,660

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ 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? . . .		No
b Were the organization's financial statements audited by an independent accountant?	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	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 ☐ Separate basis ☒ Consolidated basis ☐ 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?		No
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 . . .		

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 NORTHPOINT HOUSING INC	Employer identification number 94-3287293
--	--

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)

	Yes	No
11g(i)		No
11g(ii)		No
11g(iii)		No

(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	
BRIDGE HOUSING CORPORATION	942827909	7	Yes		Yes		Yes		270,068
Total									270,068

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.")						
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						
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						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
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						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

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						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
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.)						
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						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 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		
b33 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		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

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

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
NORTHPOINT HOUSING INC

Employer identification number
94-3287293

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? ☐ Yes ☐ No	
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 ☐ Yes ☐ No	

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)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

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?

☐ Yes ☐ No

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)?

☐ Yes ☐ No

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

1b

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▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

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)

☐

☐

(ii)

related organizations

3a(ii)

☐

☐

b

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

3b

☐

☐

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				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				0

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)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	
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	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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)	5	

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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)	5	

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
------------	------------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
NORTHPOINT 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
94-3287293

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
BRIDGE HOUSING CORPORATION345 SPEAR STREET SAN FRANCISCO ,CA 94105	942827909	501(c)(3)	267,873				TO SUPPORT LOW INCOME HOUSING ACTIVITIES

2

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

1

3

Enter total number of other organizations

0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

[illegible]

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 NORTHPOINT HOUSING INC	Employer identification number 94-3287293
--	--

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		
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ 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	
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	
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		
	☒ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☒ Form 990 of other organizations ☒ 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	No
b	Any related organization?	6b	No
	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	

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

[illegible]

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
------------	------------------	-------------

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization
NORTHPOINT HOUSING INC

Employer identification number

94-3287293

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		CORPORATE CONTROLLER AND CFO CONDUCT A DETAILED REVIEW OF THE RETURN BEFORE IT IS FILED. DETAILED REVIEW INCLUDES AGREEING NUMBERS TO AUDIT REPORT, REASONABLENESS TESTS ON DATA, AND REVIEWING SALARY INFORMATION. EACH MEMBER OF THE AUDIT COMMITTEE AND THE BOARD OF DIRECTORS, UPON REQUEST, CAN REVIEW THE FORM 990 AND SUBMIT COMMENTS BEFORE IT IS FILED.
Form 990, Part VI, Section B, line 12c		ANY DIRECTOR OR OFFICER WHO HAS A FINANCIAL INTEREST, DIRECTLY OR INDIRECTLY, MUST DISCLOSE IT BEFORE A CONSIDERATION OR VOTE OF THE TRANSACTION IS MADE BY THE BOARD OF DIRECTORS. THE REMAINING BOARD WILL THEN DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS. IF THE BOARD DETERMINES THAT A CONFLICT OF INTEREST EXISTS, THE INTERESTED DIRECTOR OR OFFICER MAY MAKE AN INFORMATIONAL PRESENTATION TO THE BOARD IN CONNECTION WITH THE TRANSACTION, BUT MAY NOT BE PRESENT DURING THE DISCUSSION OR THE VOTE. THE BOARD MINUTES REFLECT THE ABOVE-DESCRIBED DISCUSSIONS. EACH YEAR THE DIRECTORS AND OFFICERS SIGN A STATEMENT TO DENOTE IF CONFLICTS EXISTED DURING THE YEAR AND IF SO, DISCLOSING THE NATURE OF THE CONFLICT. THE ORGANIZATION ALSO DOES PERIODIC REVIEWS TO ENSURE COMPENSATION IS REASONABLE AND GOODS AND SERVICES ARE RECEIVED AT ARMS-LENGTH AND CONFORM WITH INTERNAL POLICIES.
Form 990, Part VI, Section B, line 15		Proposed compensation is presented to the Compensation Committee of the Board of Directors of BRIDGE Housing Corporation. The proposal includes comparable data from independent sources. The committee then approves or discusses alternatives to the proposal.
Form 990, Part VI, Section C, line 19		The documents are available for public inspection upon request.
FORM 990, PART IV, LINE 12 AND PART XI, LINE 2B		THE ORGANIZATION AND AFFILIATED ENTITIES WERE INCLUDED IN A COMBINED FINANCIAL STATEMENT IN ACCORDANCE WITH STATEMENT OF POSITION 94-3. THE COMBINED FINANCIAL STATEMENTS WERE AUDITED BY AN INDEPENDENT ACCOUNTANT. THE ORGANIZATION DID NOT RECEIVE A SEPARATE AUDITED FINANCIAL STATEMENT.

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	Related Organizations and Unrelated Partnerships ▶ 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.	OMB No 1545-0047
		2009
		Open to Public Inspection
Name of the organization NORTHPOINT HOUSING INC		Employer identification number 94-3287293

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
See Additional Data Table					

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			
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
BRIDGE Infill Development Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3390449	Develops urban infill developments	CA	BRIDGE Housing Corporation	C			
BRIDGE Properties Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-2986189	Property mangement provider	CA	BRIDGE Housing Corporation	C			
Pacific Home Connection 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 26-2704465	Provider of home ownership services and mortgage assistance programs	CA	HomeBricks Inc	C			

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

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

Yes

No

No

No

Yes

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)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(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
BRIDGE Norcal LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 26-3249497	Controlling general partner of affordable housing partnership	CA			MCB FAMILY HOUSING INC
BRIDGE SC LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 26-3714598	Controlling general partner of affordable housing partnership	CA			BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA
BRIDGE TOWER LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 37-1513008	Controlling general partner of affordable housing partnership	CA	3,001,539	15,373,289	N/A
1275 ECR LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 26-2302292	Low-income housing	CA			BRIDGE Homes Inc
474 Natoma LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 68-0657579	Low-income housing	CA			BRIDGE Homes Inc
Armstrong Townhomes LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 75-3236154	Low-income housing	CA			BRIDGE Homes Inc
Berry Street LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 87-0812903	Low-income housing	CA			BRIDGE Homes Inc
Hilltop Summit LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 26-2240786	Low-income housing	CA			BRIDGE Housing Acquisitions Inc
MANDELA GATEWAY COMMERCIAL LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 68-0533499	Low-income housing	CA			BRIDGE Economic Development Corporation
MANDELA GATEWAY TOWNHOMES LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 94-3227592	Low-income housing	CA			BRIDGE Homes Inc
BUILD West Oakland LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 48-1288883	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments (San Antonio Road) LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 57-1230341	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments MacArthur Transit Community LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments (Tri-City) LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 55-0904611	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments (Kirkner) LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA 94105 27-0128784	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments (Lewis Road) LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA 94105	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments (Tri-City II) LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA 94105 51-0580894	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
BUILD Equity Investments (South Bernardo) LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA 94105 26-2417808	Develops urban infill developments	CA			Bridge Urban Infill Land Development LLC
Alameda Housing LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA 94105 94-3227594	Controlling general partner of affordable housing partnership	CA			MCB Family Housing Inc
Winfield Hill LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA 94105 27-1164754	Controlling general partner of affordable housing partnership	CA			Winfield Hill Inc
HomeBricks NSP LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA 94105 27-1714466	Purchases foreclosed homes in distressed areas to rehabilitate and sell	CA			Homebricks 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
Alto Station Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3152631	Owner & operator of affordable housing property	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Bay Area Senior Services Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3008774	Operator of senior assisted living facility	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BLP Partnership Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 31-1811761	Owner & operator of senior assisted living facility	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BOMH Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3282930	Owner & operator of affordable housing property	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Bissell Corp 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3149477	General Partner of Affordable Housing Partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Economic Development Corporation 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3149476	Developer, general partner, and commercial property owner and operator	CA	501(c) (4)	N/A	BRIDGE HOUSING CORPORATION
BRIDGE Homes Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3227592	Developer of affordable ownership housing projects	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Housing Acquisitions Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3175634	Owner of mixed use and affordable housing complexes	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Housing Corp - Southern California 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3233154	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Housing Corporation 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-2827909	Developer of affordable hsg, G P of affordable housing	CA	501(c) (3)	7	BRIDGE HOUSING CORPORATION
BRIDGE Housing Ventures Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3147882	Controlling G P and L P of affordable partnerships and land owner	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Property Management Company 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3063990	Property mangement provider of affordable housing	CA	501(c) (3)	9	BRIDGE HOUSING CORPORATION
BRIDGE Regional Partners Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3187094	Owner of land and operator of property	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Support Organization 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 26-1501314	Support corporation to BRIDGE Housing Corporation	CA	501(c) (3)	11b	BRIDGE HOUSING CORPORATION
BRIDGE Terraza Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3211275	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
BRIDGE Thrd Street Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3130270	Controlling general partner of affordable housing partnership	CA	501(c) (3)	9	BRIDGE HOUSING CORPORATION
BRIDGE West Oakland Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3261561	Owner & operator of affordable housing property	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Emeryville Senior Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3107670	Owner & operator of affordable housing property	CA	501(c) (3)	9	BRIDGE HOUSING CORPORATION
Calistoga Brannan Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3167786	G P and L P of affordable housing partnerships	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Chestnut Creek Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3360307	Owner & operator of HUD Section 202 property	CA	501(c) (3)	9	BRIDGE HOUSING CORPORATION
Church Street Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3349372	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Coggins Square Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3294187	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Danville Senior Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 91-2148404	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Emery BRIDGE Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3130269	Former general partner of housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Fell Street Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3153378	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Hercules Senior Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3262543	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Brisbane Senior Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3323102	Owner & operator of affordable housing property	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Hotel Don Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3122110	General Partner of Affordable Housing Partnership	CA	501(c) (3)	9	BRIDGE HOUSING CORPORATION
HomeBricks Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 59-3795727	Provider of home ownership & mortgage assistance prog for low inc families	CA	501(c) (3)	11b	BRIDGE HOUSING CORPORATION
Hunt Avenue Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3119469	G P and L P of affordable housing partnerships	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION

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
MCB Family Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3227594	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Metro Senior Homes Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3213337	General partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Milpitas Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3253389	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Nairobi Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3331051	General partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
North Beach Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 82-0563916	General partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Northside Senior Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3315757	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Ohlone Housing Corporation 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3232360	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Redwood Shores Senior Housing Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3190749	Owner & operator of HUD Section 202 property	CA	501(c) (3)	7	BRIDGE HOUSING CORPORATION
Roberts Avenue Inc 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3375010	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	BRIDGE HOUSING CORPORATION
Rotary Valley Inc 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3244788	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION
San Marcos Family Housing Inc 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3265633	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION
Silverado Creek Housing Inc 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3376086	General partner of affordable housing partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION
Site K Inc 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3132902	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION
Strobridge Housing Inc 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3229530	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION
Westpark Housing Corp 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3154096	General Partner of Affordable Housing Partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION
Winfield Hill Inc 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3152859	Controlling general partner of affordable housing partnership	CA	501(c) (3)	11a	bRIDGE HOUSING CORPORATION

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
14TH ST ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 56-2569711	Low-income housing	CA	BRIDGE Tower LLC	Related	-20	30,681,790		No		Yes	
AREA F-1 HSG ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 90-0150206	Low-income housing	CA	N/A								
ARMSTRONG PLACE ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 68-0653328	Low-income housing	CA	N/A								
BRIDGE GRAYSON CREEK ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3389039	Low-income housing	CA	N/A								
CALISTOGA BRANNAN HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3167785	Low-income housing	CA	N/A								
CANAL HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3375830	Low-income housing	CA	N/A	Related	42,256	167,501		No		Yes	
CARMEL VALLEY HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3390105	Low-income housing	CA	N/A								
Carquinez Associates 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 26-3334622	Low-income housing	CA	BRIDGE TOWER LLC	Related	-9	2,708,567		No		Yes	
CHELSEA GARDENS ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3314552	Low-income housing	CA	N/A	Related	19,950	323,849		No		Yes	
CHESTNUT LINDEN ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3411722	Low-income housing	CA	N/A								
CHURCH STREET HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3361620	Low-income housing	CA	N/A								
CINNABAR COMMONS II 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 20-5115511	Low-income housing	CA	BRIDGE Tower LLC	Related	-163	2,987		No		Yes	
COGGINS SQUARE ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3294186	Low-income housing	CA	N/A								
COMM 22 LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 73-1728124	Low-income housing	CA	N/A								
COPPER CREEK 4 HOUSING ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 35-2166973	Low-income housing	CA	N/A								
COPPER CREEK 9 HOUSING ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 83-0369696	Low-income housing	CA	N/A								
COTTONWOOD CREEK HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 59-3837978	Low-income housing	CA	BRIDGE Tower LLC	Related	39,972	343,599		No		Yes	
CPW ONE TRIBECA LLC 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 56-2592155	Low-income housing	CA	N/A								
DANVILLE SENIOR HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3405442	Low-income housing	CA	N/A								
DRAKE MARIN ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3230387	Low-income housing	CA	N/A								
FABIAN WAY ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 68-0653330	Low-income housing	CA	BRIDGE Tower LLC	Related		16,531,390		No		Yes	
FELL ST HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3153973	Low-income housing	CA	N/A								
GEARY HOUSING PARTNERS LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 83-0481231	Low-income housing	CA	BRIDGE Tower LLC	Related	3,244,650	35,964,613		No		Yes	
GRAND OAK ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 71-0987940	Low-income housing	CA	BRIDGE Tower LLC	Related	24,245	620,197		No		Yes	
HERCULES SR HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3262539	Low-income housing	CA	N/A								
HUNT AVENUE ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3163833	Low-income housing	CA	N/A								
IRVINGTON DEV GROUP LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 61-1492960	Low-income housing	CA	BRIDGE Tower LLC	Related	21,596	1,351,483		No		Yes	
IVY HOUSING ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 71-1039863	Low-income housing	CA	N/A								
JENNINGS AVE ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 71-0987938	Low-income housing	CA	BRIDGE Tower LLC	Related	-65	1,409,769		No		Yes	
KENTFIELD ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 11-3794630	Low-income housing	CA	BRIDGE Tower LLC	Related	-55	-63,287		No		Yes	

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) Disproprtionate allocations?		(i) Code V-UBI amount on Box 20 of K-1 (\$)	(j) General or Managing Partner?	
							Yes	No		Yes	No
LA TERREZA ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3211279	Low-income housing	CA	N/A								
LAGUNA CANYON HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 56-2281684	Low-income housing	CA	N/A								
Leland Housing Partners LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 26-2979055	Low-income housing	CA	BRIDGE Tower LLC	Related	-800	100		No		Yes	
MANDELA GATEWAY ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 46-0500876	Low-income housing	CA	N/A								
MARINA ANNEX ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3396985	Low-income housing	CA	N/A								
MARINA TOWERS ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 86-1140987	Low-income housing	CA	BRIDGE Tower LLC	Related	24,996	1,214,205		No		Yes	
METRO SENIOR ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3213475	Low-income housing	CA	N/A								
MILPITAS HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3253668	Low-income housing	CA	N/A								
NAIROBI HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3331004	Low-income housing	CA	N/A								
NORTH BEACH HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 82-0563921	Low-income housing	CA	N/A								
NORTHPOINT HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3287332	Low-income housing	CA	N/A	Related	24,837	145,879		No		Yes	
NORTHPOINT II HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3324167	Low-income housing	CA	N/A	Related	18,819	117,918		No		Yes	
NORTHSIDE HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3315758	Low-income housing	CA	N/A								
NORTHWOOD HSG ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 57-1176155	Low-income housing	CA	N/A								
OHLONE HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3232359	Low-income housing	CA	N/A								
PINOLE GROVE ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3223021	Low-income housing	CA	N/A								
POINSETTIA HOUSING PARTNERS 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 33-0832030	Low-income housing	CA	N/A								
RICHMOND CITY CTR ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3146993	Low-income housing	CA	N/A								
ROBERTS AVE SENIOR HSG LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3408441	Low-income housing	CA	N/A								
ROTARY VALLEY ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3244786	Low-income housing	CA	N/A								
SANRAF ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3410682	Low-income housing	CA	N/A								
SANTA ALICIA FAMILY HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3233778	Low-income housing	CA	N/A								
SILVERADO CREEK PARTNERS 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3329192	Low-income housing	CA	N/A								
SOUTH BEACH FAMILY ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3132899	Low-income housing	CA	N/A								
St Josephs Senior LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 26-2893982	low-income housing	CA	BRIDGE Tower LLC	Related	-800	100		No		Yes	
STROBRIDGE HOUSING ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3229531	Low-income housing	CA	N/A								
TERRA COTTA HSG ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3265635	Low-income housing	CA	N/A								
TRESTLE GLEN ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 11-3794633	Low-income housing	CA	N/A								
WHITE DOVE CANYON HSG ASSOCIATES LP 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 06-1638296	Low-income housing	CA	N/A								
WINFIELD HILL ASSOCIATES 345 SPEAR STREET SUITE 700 SAN FRANCISCO, CA94105 94-3153147	Low-income housing	CA	N/A								

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
WOODBURY PARTNERS LP 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 68-0620325	low-income housing	CA	N/A								
YWCA VILLA NUEVA PARTNERS 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3143354	low-income housing	CA	N/A								
NORTH BEACH DEVELOPMENT ASSOC LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3355013	low-income housing	CA	N/A								
PACIFIC OAKS ASSOCIATES 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3026354	low-income housing	CA	N/A								
SAN RAFAEL APARTMENTS LP 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 33-0508119	low-income housing	CA	N/A								
SOUTH SAN FRANCISCO MAGNOLIA PLAZA ASSOCIATES 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3026352	low-income housing	CA	N/A								
Bridge Urban Infill Land Development LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 94-3391691	Develops urban infill developments	CA	N/A								
Tri-City Gardens LLC 901 Mariners Island Blvd 700 SAN MATEO, CA94404 20-2338326	Construction of homes for sale	CA	N/A								
Kirker Creek BBS LP 901 Mariners Island Blvd 700 SAN MATEO, CA94404 20-2928244	Real estate rental	CA	N/A								
WallLewis San Jose LLC 470 S Market St SAN JOSE, CA95113 20-5251118	Construction of homes for sale	CA	N/A								
Tri-City Gardens II LLC 901 Mariners Island Blvd 700 SAN MATEO, CA94404 20-4382157	Construction of homes for sale	CA	N/A								
South Bernardo Associates LP 49 Geary St Ste 500 SAN FRANCISCO, CA94108 26-2323955	Real estate rental	CA	N/A								
Alameda Housing Associates LP 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 26-4289796	Low-income housing	CA	N/A								
Pottery Court Housing Associates 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 27-0162400	Low-income housing	CA	N/A								
Broadway Tower Associates LP 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 27-0772994	Low-income housing	CA	N/A								
BHC Sage Park LP 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 27-1527957	Low-income housing	CA	N/A								
Summerhouse Housing Associates (Phase I and Phase II) 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 27-0901144	Low-income housing	CA	N/A								
St Josephs Family Associates 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 27-0627778	Low-income housing	CA	N/A								
Folsom Essex LLC 345 SPEAR STREET SUITE 700 sAN FRANCISCO, CA94105 27-0708193	low-income housing	CA	N/A								