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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)

OMB No 1545 0047

Department of the Treasury

inte	rnai Reven	ue Service	· The organization	may have to use	a copy of this return to	satisty state report	ing requirements.	Oper	to Public inspection	oπ
	For the	2009 calendar year, or t	<u>lax ye</u> ar begini	ning 7/01	. , ;	2009, and endin	g 6/30		2010	_
В	Check if a						D Emplo	yer Identifi	cation Number	_
	Addi	ess change Please use Co	ommunity H	Housing I	mprovement	Program	94-	22233	98	
	Nam	e change or type 10	001 Willov	v Streét	•	•	E Teleph			_
	\vdash	See Ch	hico, CA 🤉	95928			530	-891-	6021	
	\vdash	Instruc-					1 330	031	0931	
	\vdash	nination tions.							4 455 054	
		nded return					G Gross		4,457,271	÷
	Appl	• • • •	address of principal	officer Jam	es W. Jesse	e	H(a) Is this a group retu		ates? Yes X N	ю
			C Above				H(b) Are all affiliates inc If 'No,' attach a list		uctions) Yes N	do
<u>L</u>	Tax-e	exempt status X 501(c)	(3)	(insert no)	4947(a)(1)	or 527		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
J	Webs	site: ► N/A					H(c) Group exemption r	umber 🟲		
K	Form o	f organization X Corporation	Trust	Association	Other ►	L Year of Format	ion 1973 M	State of leg	gal domicile CA	_
P	art I	Summary								_
	1 8	riefly describe the organ	ıızatıon's mıssı	on or most sig	gnificant activities	To provi	de affordabl	le hoi	ısina	_
Ф				·	_				22.13	_
Activities & Governance	-									
Ë										_
Š	2 0	heck this box ► If the	he organization	n discontinue	d its operations or	disposed of mo	ore than 25% of its	assets		_
ð	3 1	lumber of voting member	rs of the gover	ning body (Pa	art VI, line 1a)			3	1	12
9		lumber of independent vi				l, line 1b)		4		12
i₽	5 T	otal number of employee	es (Part V, line	2a)				5		58
훒	6 T	otal number of volunteer	rs (estimate if i	necessary)				6		0
Ř	7a T	otal gross unrelated bus	iness revenue	from Part VIII	I, column (C), line	12		7a	0).
	b N	et unrelated business ta	xable income f	rom Form 99	0-T, line 34			7 b	0	<u>.</u>
	}						Prior Year		Current Year	
•	8 0	ontributions and grants ((Part VIII, line_	1h)				000.	30,000	j.
Revenue	9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines (Cart VIII), column (A), lines 5, 6d, 8c, 9c, 16c, and 11e)						3,255,		4., 375, 534	
e e	10 li	vestment income (Part	VIII, column/(A), lines EE	50A 76B			466.	51,737	
ď	11 0	ther revenue (Part VIII,	column (A) المرار	es 5, 6d, 86	9c, 10c, and 11e)	1				_
	12 T	otal revenue – add lines	s 8 through	mush equal F	Part VIII, column	A), line 12)	3,349,	308.	4,457,271	_
	13 (Grants and similar amoun	its paid (Part I	X, column (A)	1 (S-1,1998)					_
	14 E	enefits paid to or for me	embers (Part IX	column (A)	line 4) 9					_
	15 S							518.	1,886,735	
ge 8	16a F									÷
Expenses	100.7							,,	1	
ă	0				•		-			
		other expenses (Part IX,			•		1,915,		4,538,903	
		otal expenses Add lines				25)	4,103,		6,425,638	_
_		levenue less expenses S	Subtract line 18	3 from line 12			-753,	880.	-1,968,367	<u>.</u>
Net Assets or Fund Balancos							Beginning of	Year	End of Year	
100	20 T	otal assets (Part X, line	16).				35,849,	571.	32,131,829	<u> </u>
4 4 5 E	21 T	otal liabilities (Part X, lir	ne 26)				26,214,	496.	24,465,121	<u> </u>
žZ	22 N	let assets or fund balanc	es Subtract lir	ne 21 from lin	e 20		9,635,	075.	7,666,708	١.
P	art II	Signature Block								_
		Under penalties of perjury, I de true, correct, and complete De	clare that I have ex-	amined this return	, including accompanying	ng schedules and stat	lements, and to the best	of my knov	vledge and belief, it is	_
		true, correct, and complete De	Claration of prepare	(other trian office	er) is based on all illion	nation of which prepa	irer has any knowledge			
Si	gn	- Same	<u> </u>	$ \times$ \angle	Sex					
He	ere	Signature of officer		()			Date			
		▶ James W. Jes	see	\bigcirc			President			
		Type or print name and title	e							_
						Date	Check if	Pre	parer's identifying number instructions)	_
	iid	Preparer's	- 0100	-	/.	1 1.1.	self- employed	- []		
Pr	-	signature >	m Ton	aozem		10/4/	16	N/	'A	
	rer's		omaszewsk					1/		_
Us	se 1ly	yours if self employed). > 3811 Tilden Drive						N/A		
J	пy	address and	rado Hill		762			(916) 804-5367	_
Ma	v the IR	S discuss this return with	-			s)	, none no	(310	X Yes No	
	J 11 '			~~~~	, , , , , , , , , ,_	-,			110	

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

617-20

TEEA0113L 12/29/09

Form 990 (2009)

_	n 990 (2009) Community Housing Improvement Program	94-2223	398		Page 2
Par	Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission.				
	To provide affordable housing				
	Datable and the second state of the second sta		-		
2	Did the organization undertake any significant program services during the year which were not listed on Form 990 or 990-EZ?	tne prior	7 v	⊽	NI -
	If 'Yes.' describe these new services on Schedule O	Ĺ	Yes	X	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services.	"coc2 [Yes	X	No
3	If 'Yes,' describe these changes on Schedule O	vices.	163	Ţ.	110
4	Describe the exempt purpose achievements for each of the organization's three largest program services	by expenses	Section !	501 <i>(</i> c)	(3)
-	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	d allocations to	others,	the tot	àl
	expenses, and revenue, if any, for each program service reported				
4 a	a (Code) (Expenses \$ 4,830,414. including grants of \$) ()
	To own, manage and develop low-income rental properties for farm-	workers a	<u>nd</u> _		
	low-income families.				
	(Code (Expenses \$ 883,803. including grants of \$) (Payanua ¢			
41	To provide technical assistance to families assisting in the cons		of hor	166	<u> </u>
	(rural self-help program), and to build homes for sale to low inc			100_	
		3=0 2===			
		- 			
40	c (Code) (Expenses \$260, 601. including grants of \$) ()
	Provide services to low-income familes and credit counseling to i	<u>ndividual</u>	<u> </u>		
40	d Other program services (Describe in Schedule O)				
•	(Expenses \$ including grants of \$) (Revenue \$)	
4	e Total program service expenses ► 5, 974, 818.				

	- Total Control of Madanas Contractor			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1_	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		<u>x</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	Х	
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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10_		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	!
	 Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 			
	 Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII 			3
	 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 		4	, '
	• 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		1 -	
	• 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 			<u> </u>
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
	AWas the organization included in consolidated, independent audited financial statement for the tax Yes No		;*	-
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	15,	ا بو ا	, , , , , , , , , , , , , , , , , , ,
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
'-	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Part I</i>	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17		17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	10		v
20	complete Schedule G, Part III Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	19 20		X

BAA	L	Form	990	(2009)
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	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
	organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
	Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35		<u> </u>
35	line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R,	34	X	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,		v	
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? If 'Yes,' complete Schedule R, Part I	33		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
(An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
ŧ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		7,7	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
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? If 'Yes,' complete Schedule L, Part II	26		X
ŀ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
25 a	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? If 'Yes,' complete Schedule L, Part I	25a		Х
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
(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		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25	24a		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		<u> </u>
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? If 'Yes,' complete Schedule I, Parts I and III	22		X
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? If 'Yes,' complete Schedule I. Parts I and II	21		х
	•		Yes	No

	1-2223398	Р	age 5
Part V Statements Regarding Other IRS Filings and Tax Compliance			
		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	54 ₹.		,
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0 .	4 1	- 4
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?	gaming 1c		X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	58		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	tions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authori financial account in a foreign country (such as a bank account, securities account, or other financial account)	ty over, a		Х
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 ar Financial Accounts	ıd		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding P Tax Shelter Transaction?	rohibited 5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organ solicit any contributions that were not tax deductible?	ization 6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gi	i l		
deductible? 7 Organizations that may receive deductible contributions under section 170(c).	80	 -	۳,
*	703	•	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods a provided to the payor?	7a	*	X
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. Form 8282?	red to file 7c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a persona			-
benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
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 req			
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess businoidings at any time during the year?	ness 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 any distribution to a donor, donor advisor, or related person?	9ь		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12			ļ
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			_
11 Section 501(c)(12) organizations. Enter.			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

Form 990 (2009) BAA

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

sec	tion A.	Governin	d Roa	y and	ivian	agen	nent														
_														1	1					Yes	No
	_	e number of v	•			•	_	•	•						1 a			12			, !
t	Enter the	e number of v	oting m	embers	s that a	are inc	depen	ndent	1					L	1 b			12			
2	Did any officer, d	officer, directe lirector, truste	or, truste e or ke	ee, or k y emplo	key em oyee?	nploye	e hav	ve a f	family i	relatio	onship	or a b	usines	s rela	tionship	with	any oth	ner	2		X
3	Did the o	organization d rs, directors o	lelegate or trusted	control	l over	manag	geme	ent du a ma	uties cu anagen	ustom	narily p	erform	ned by	or un	der the	dırec	t superv	rision	3		
4		organization n			-				-		•	•	•	0,00,,				ŀ	4		<u>x</u>
		prior Form 9							· g-···-•									ŀ			
5		rganization b			durina	the ve	ear of	f a m	aterial	diver	rsion o	f the o	rganiza	ation's	assets	5?			5		Х
6		organization											3			-		r	6	X	
7 a	Does the	organization g body?	have m	ember	s, stoc	kholde	ers, o	or oth	er per	sons	who m	ay ele	ct one	or mo	re mer	nbers	of the	Ī	7a	Х	
		decisions of t																ŀ	7b		X
_			_	_	_				-						•						 -
8	the follow	organization c ving	ontemp	oraneo	usiy u	ocume	ent trie	ie me	eungs	rieid	or writ	ilen ac	tions u	maert	aken di	uring	ine year	ру			;
ä	The gove	erning body?																	8a	Х	
ŀ	Each cor	nmittee with	authority	y to act	t on be	ehalf o	of the	gove	erning l	body?	7							Γ	8ь	Х	
9	Is there	any officer, di tion's mailing	rector o	r truste	e, or l	key en	nploye	ee lis	sted in	Part	VII, Se	ection	A, who	canr	ot be r	eache	d at the		9		х
Sec	tion B.														auirea	d by	the Int	ernal			
Reve	enue Code	;)	• · · · · ·									,			,						
																	_			Yes	No
10 a	Does the	organization	have lo	cal cha	apters,	branc	ches,	or af	ffiliates	s?								Γ	10 a		X
ı	If 'Yes,' o	does the orga iches to ensu	inization	ı have ı	written	n polici re cons	ies an	nd pro	ocedur	res go	overnin	ng the a	activitie	es of	such ch	napter	s, affilia	ites,	10b		
		organization i																-	11	Х	
		ın Schedule	•		•							-	_	-		•		-	•••		-
		organization	•		_		•		•					330	500	50.	Cuul	F	12 a	Х	
		ers, directors						•	-		_			ests th	at coul	d aive	rise	<u> </u>			
	to conflic	cts?			·		•	•				-						T	12b	X	
	Schedule	e organization e O how this	ıs done	S	See S	chec	dule	e 0		iorce	compii	ance v	vitii tiie	s pond	y ii i	es, (iescribe	L	12 c	X	
		organization						•										-	13	X	
14	Does the	organization	have a	written	1 docu	ment r	retent	tion a	and des	struct	tion po	licy ⁷						-	14	X	
15	Did the persons,	process for de comparability	eterminir y data, a	ng com and cor	ipensa ntempi	tion of oraneo	f the fous su	follow ubsta	ving pe antiatio	erson on of t	is inclu the del	ide a re iberati	eview a on and	and ap	proval ion?	by in	depende	ent		_	
	•	inization's CE	•				•	_										Ĺ	15 a	X	
1	o Other of	ficers of key e	employe	es of th	he org	anızatı	ion	See	e Sch	hedu	ule C)						L	15 b	Х	
	If 'Yes' to	o line 15a or	15b, des	scribe t	he pro	cess i	ın Sch	hedul	le 0 (See II	instruct	lions.)									,
16		organization in		, contril	bute a	ssets	to, or	r parti	cipate	e ın a	joint v	enture	or sim	ıılar a	rranger	nent	with a ta	axable	16 a		X
ı	f 'Yes,'	has the organ	nization gements	adopte	d a wr	itten p	olicy	or pr	rocedu law. a	ure rec	quiring	the or	rganıza safequ	ition t	evalu	ate it	s particij	pation			
	status w	ith respect to	such ar	rangen	nents?							-							16b		
	tion C.																				
		states with wh						•			_										
18	_	6104 requires on Indicate h	_	•				rms 1 heck					le), 990	0, and	990-T	(501)	c)(3)s o	nly) av	aılabl	e for p	oublic
		website	X	,						-	reques										
19	Describe stateme	in Schedule nts available	O wheth to the p	ner (and ublic	d if so Se	, how) e Sc.	the dine dine	organ lule	nizatior O	n mal	kes its	gover	ning do	cume	nts, co	nflict	of intere	est polic	cy, ar	nd fina	incial
		e name, phys ie Sutto														d reco	rds of th	ne orga	nızat	ion	
											· —			_===							

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

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

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

List persons in the following order individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons

ot compen	sate a	ny d	curre	ent d	officer	, dır	ector, or trustee		
(B)			((:)		-	(D)	(E)	(F)
Average hours							Reportable	Reportable	Estimated amount of other
per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099 MISC)	compensation from related organizations (W-2/1099-MISC)	amount or other compensation from the organization and related organizations
2	Х						0.	0.	0.
2	Х						0.	0.	0.
2	Х						0.	0.	0.
2	Х						0.	0.	0.
2	х						0.	0.	0.
2	Х						0.	0.	0.
2	Х						0.	0.	0.
2			х				0.	0.	0.
2			х				0.	0.	0.
2			Х				0.	0.	0.
2			х				0.	0.	0.
40		ì		х			74,269.	0.	0.
40				х			107,973.	0.	0.
40				Х			71,066.	0.	0.
	(B) Average hours per week 2 2 2 2 2 2 2 2 40 40	Average hours per week cor director stratee 2 X 2 X 2 X 2 X 2 X 2 X 2 X 40 40	Average hours per week 2 X 2 X 2 X 2 X 2 X 2 X 2 X 40 40	(B) Average hours per week Average hours per week 2	Average hours per week Position (check all to the check a	Average hours per week Position (check all that appl highest compensated or director) and trustee Reployee Reposition Reployee Reployee Reployee Reployee Reployee Reployee Re	Average hours per week Average hours per week Or circlindividual trustee 2	Average hours per week Position (check all that apply) Reportable compensation from the organization (W-2/1099 MISC)	Column

Par	T VIII Statement of Revenue				
 		(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1. Endersted compound		revenue		512, 513, 01 514
STA	1a Federated campaigns 1a b Membership dues 1b				1
850	b Membership dues 1b				ı
AN.	c Fundraising events 1c				
불립	d Related organizations 1d				
SES	e Government grants (contributions)				,
로취	f All other contributions, gifts, grants, and similar amounts not included above 1f 30,000.				·
윤티	similar amounts not included above 1f 30,000.				,
S S	g Noncash contribus included in lns 1a-1f \$	30,000.			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	h Total. Add lines 1a-1f Business Code	30,000.			·
N.	2a Forgiveness of Debt	2,080,059.	2,080,059.		
١	b Contract Services	1,733,554.	1,733,554.	-	
뜅	c Fee Revenue	509, 453.	509,453.	- -	
Š	d Low Income Rent	485,571.	485,571.		
4 SE	e Other Miscellaneous	188,032.	188,032.		
RA	e Other Miscerialieous	-621,135.	-621,135.		
စ္တို	f All other program service revenue g Total. Add lines 2a-2f	4,375,534.	021,133.		
-		4,373,334.			
	3 Investment income (including dividends, interest and other similar amounts)	51,737.	51,737.		
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	(i) Real (ii) Personal				,
	6a Gross Rents				
	b Less rental expenses				ı
	c Rental income or (loss)				L
	d Net rental income or (loss).			- ,	
	7 a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory	•			
	b Less: cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)				
	8a Gross income from fundraising events				
NUE	(not including \$,
Ĕ	of contributions reported on line 1c)				
8	See Part IV, line 18				
OTHER REVENU	b Less. direct expenses b				
_	c Net income or (loss) from fundraising events				<u> </u>
	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 b				
	c Net income or (loss) from sales of inventory			and the second second	
	Miscellaneous Revenue Business Code				
	11 a				
	b				
	c				
	d All other revenue.				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	4,457,271.	4,427,271.	0.	0.

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 i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	· · · · · · · · · · · · · · · · · · ·	схренаез	general expenses	expenses
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	253,308.	213,795.	39,513.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,252,601.	1,064,782.	187,819.	.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1/202/001.	1,001,102.	107,013.	
9	Other employee benefits	269,775.	213,556.	56,219.	
10	Payroll taxes	111,051.	94,243.	16,808.	
11	Fees for services (non-employees)				P
ā	Management				
t	Legal	4,356.	2,013.	2,343.	
(Accounting				
(Lobbying		·		
•	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
ç	g Other				
	Advertising and promotion	34,225.	33,862.	363.	
13	Office expenses	32,015.	16,962.	15,053.	
14	Information technology	Í	,	· · · · · · · · · · · · · · · · · · ·	
15	Royalties				
16	Occupancy	212,683.	161,783.	50,900.	
17	Travel	57,944.	50,331.	7,613.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,147.	2,029.	1,118.	
20	Interest	28,764.	28,764.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	116,080.	107,841.	8,239.	
	Insurance	16,485.	5,666.	10,819.	
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)				
	Impairment	3,624,331.	3,624,331.		
ı	Rental Operations	315,841.	315,841.		
•	Bad Debts	111,332.	111,332.		
(Contract Services	71,641.	67,141.	4,500.	
•	Telephone	27,370.	19,192.	8,178.	
1	All other expenses	-117,311.	-158,646.	41,335.	·····
_25	Total functional expenses Add lines 1 through 24f	6,425,638.	5,974,818.	450,820.	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				
BAA					Form 990 (2009)

Part X : Balance Sheet (A) Beginning of year **(B)** End of year $\overline{2,037,127}$. 2,437,211. 1 .1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 266,900 3 118,867. 692,416. 4 657,342. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 3,249,273. 3,276,887 7 Notes and loans receivable, net Inventories for sale or use 8 22,337 9 25,367. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. 10a 5,866,074 Complete Part VI of Schedule D 10b 2,352,820 3,650,496 3,513,254. **b** Less accumulated depreciation 10 c 11 Investments - publicly-traded securities 11 12 12 Investments - other securities See Part IV, line 11 Investments - program-related See Part IV, line 11 13 13 1,787. 14 2,047 14 Intangible assets 25,501,277 15 22,528,812. 15 Other assets See Part IV, line 11 16 Total assets Add lines 1 through 15 (must equal line 34) 35,849,571 16 32,131,829. 1,007,413 17 970,444. 17 Accounts payable and accrued expenses 18 18 Grants payable 14,008 19 12,951. Deferred revenue 19 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 951,955 23 23,445,954. Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 241,120 25 35,772. Other liabilities Complete Part X of Schedule D 26,214,496 26 24. 465,121 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ |X| and complete lines N E T 27 through 29 and lines 33 and 34. 5,767,243 3,299,260. ASSETS 27 27 Unrestricted net assets 537,254 28 537,254. Temporarily restricted net assets 3,330,578 29 3,830,194. Permanently restricted net assets P Organizations that do not follow SFAS 117, check here and complete 'n 24 FUZD lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 BALANCES 31 Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, endowment, accumulated income, or other funds 32 9,635,075. 33 7,666,708. Total net assets or fund balances 33

BAA

Total liabilities and net assets/fund balances

Form 990 (2009)

32,131,829.

35,849,571.

34

Form 990 (2009) Community Housing Improvement Program 94-2223398		Pa	age 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			1
'If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	- 5	<u>.</u>	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u> </u>
b Were the organization's financial statements audited by an independent accountant?	2b	X	
c If 'Yes' to line 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?	2 c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
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 X Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Х	
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.	3 b	Х	

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Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

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.

2009

Open to Public Inspection

Name of	the organization							Employe	r identificat	ion number	_
Comm	ommunity Housing Improvement Program 94-2223398 art I Reason for Public Charity Status (All organizations must complete this part.) See instructions										
Part	Reason for Pul	blic Charity Statu	s (All organizations	must d	omple	te this	part.)	See II	nstructi	ions	_
The or			se it is (For lines 1 thro								_
1	A church, convention	on of churches or asse	ociation of churches desc	cribed in	section	170(b)	(IXAXI)				
2	-		A)(ii). (Attach Schedule I			- ()					
3			organization described	•	on 170(l	X1YAY	iii).				
4			d in conjunction with a h					0/bY1Y4	Yiii) Fr	iter the hospital's	
٠. ۱	name, city, and sta		a in conjunction man a n	oopital t	20001100	Jee		•(DX •X-	·X, C	iter the hospital s	
5 [erated for the benefit	of a college or university	owned	or oper	ated by	a gover	nmenta	I unit des	scribed in section	
6 7	An organization that		governmental unit descri substantial part of its su art II)					t or fron	n the ger	neral public described	d
8			170(b)(1)(A)(vi). (Comple	te Part I	1)						
9 [An organization that from activities relate investment income	normally receives (1) of to its exempt function	more than 33-1/3 % of its s s — subject to certain excess taxable income (less	support f	rom cont and (2) n	o more f	han 33-	1/3 % of	its suppo	ort from gross	
10	_ `	•	exclusively to test for pu		•			` '			
11 [An organization org more publicly supp describes the type	ganized and operated orted organizations of of supporting organiz	exclusively for the beneficial escribed in section 509(station and complete lines	fit of, to a)(1) or s 11e thi	perform section ough 11	the fun 509(a)(2 lh.	ctions o 2) See	of, or ca section	rry out th 509(a)(3	ne purposes of one of the control of	or at
	a Type I	b Type II	c 🗌 Type III	I – Fund	tionally	ıntegrat	ted		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	` ' ' '	received a written det	ermination from the IRS	that is a	Type I	, Type II	or Typ	e III sup	porting o	organization,	
g	Since August 17, 2	006, has the organiza	tion accepted any gift o	r contrib	ution fro	om any	of the fo	ollowing	persons		
										Yes No	<u>D</u>
	(i) a person who	directly or indirectly overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d in (ii) a	and (III)	11g (i)	
		ber of a person desc	=							11 g (ii)	
	· · ·	•	described in (i) or (ii) a	hove?						11 g (iii)	—
h		= :	he supported organization							119/11/	_
	(i) Name of Supported Organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) organizat (i) listed gove	ts the non in cold in your trining ment?	the organ	ou notify ization in (i) of upport?	organizat (i) organi	s the ion in col zed in the	(vii) Amount of Support	
				Yes	No	Yes	No	Yes	No		
											_
				<u> </u>		L					
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				\vdash	<u> </u>						_
Total BAA F	For Privacy Act and Paperw	vork Reduction Act Notice	, see the Instructions for Forn	n 990 or 9	0-EZ.			Schedule	e A (Forr	n 990 or 990-EZ) 20	 09

Par	t II Support Schedule for	-			(b)(1)(A)(iv) an	d 170(b)(1)(A)(vi)		
~	(Complete only if you check	ed the box on line	e 5, 7, or 8 of Par	tl)					
Cale	tion A. Public Support ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')								
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public 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)		s. *		,				
6	Public support. Subtract line 5 from line 4		* 1 2 2	, y	gi.	ł.			
Sec	tion B. Total Support			,					
	ndar year (or fiscal year nning 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 form similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).								
11	Total support. Add lines 7 through 10	,	,						
12	Gross receipts from related activ	vities, etc. (see in	structions)			12			
13	First five years. If the Form 990 organization, check this box and		zation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 501(d	c)(3)		
	tion C. Computation of Pu								
	Public support percentage for 20	•		ne 11, column (f).		14	<u>%</u>		
	Public support percentage from					15	<u>%</u>		
16	a 33-1/3 support test — 2009. If the and stop here. The organization	e organization die qualifies as a pu	d not check the backlicly supported of	ox on line 13, an organization	d the line 14 is 33	1-1/3 % or more,	check this box		
١	b 33-1/3 support test — 2008. If the organization did not check a 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								
17:	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-	and-circumstance	es' test, check this	s box and stop he	re. Explain in Pa	rt IV how		
	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. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions.								
_		ization did not ch	eck a box on line	, 13, 16a, 16b, 17					
BAA					Sc	nedule A (Form	990 or 990-EZ) 2009		

Schedule A (Form 990 or 990-EZ) 2009 Community Housing Improvement Program

94-2223398

Page 2

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

Calendary year (or toxial by Expensing m) Calendary year (or foxial year) Calendary year (or foxial ye	Sec	tion A. Public Support	cked the box on h	ne 9 of Part 1.)											
1 Giffs, grants, contributions and membership flees received; 00 25,620, 28,985, 25,000, 30,000, 30,000, 139,605, 2 Gross receipts from admissions, merchands sold or services performed, or that is related to the organizations tax-exempt purposes that is related to the organizations tax-exempt purpose of the services		·	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total						
2 Gross recepts from admissions, merchanduse sold or solvers performed, or admissions, merchandus experts that is related to the organization's fax-exempt purpose growth and is related to the organization's fax-exempt purpose growth and is related to the organization's benefit and organization benefit			(4) 2003	(2) 2000	(5) 2007	(2) 2000	(0) 2003		Wiotai						
2 Gross recepts from admissions, merchanduse sold or solvers performed, or admissions, merchandus experts that is related to the organization's fax-exempt purpose growth and is related to the organization's fax-exempt purpose growth and is related to the organization's benefit and organization benefit		membership fees received (Do Inot include 'unusual grants.')	25,620.	28,985.	25,000.	30,000.	30,00	o.	139,605.						
A Color		Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the		23,000.	20,000										
3 Gross receipts from activities that are not an unrelated trade or business under section 513 1 Tax revorces to receive the section 513 1 The value of services or facilities transited by a governmental unit to the programmental unit to the programmental unit to the programment of the programmen			4.208.245.	3.882.480.	4.320.683.	3.255.842.	4.375.53	4. 20	.042.784.						
organization's benefit and either paid to or expended on the paid to or expended on the paid to or expended on the sheal is behalf to the paid of the	3	Gross receipts from activities that are not an unrelated trade or business	2,233,233	<u> </u>					0.						
facilities furnished by a governmental unit to the organization without charge of totals. Add lines 1 through 5 7a Amounts included on lines 1, 2, 3 received from disqualified persons be Amounts included on lines 2, and 3 received from disqualified persons be Amounts included on lines 2, and 3 received from other than disqualified persons and the control of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 13 for the year of 1% of the amount on line 18 for the year of 1% of the amount on line 18 for the year of 1% of the year of 1% of the year of 1% o		organization's benefit and either paid to or expended on its behalf							0.						
7a Amounts included on lines 1, 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year c Add lines 7a and 7b 6. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	5	facilities furnished by a governmental unit to the							0.						
2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year or Add lines 7a and 7b 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	6	Total. Add lines 1 through 5	4,233,865.	3,911,465.	4,345,683.	3,285,842.	4,405,53	4. 20	,182,389.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) 9 Amounts from line 6 10 a Gross income from interest, dividentist, payments received on securities loans, rents. royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business is regularly carried on 120 Cher income. Do not include gain or loss from the sale of Gantal assets (Explain in Part IV) 13 Total support, losd line 1, line 112 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 income more than 33-1/3%, upont tests – 2009, life 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 income more than 33-1/3%, check this box and stop frem the organization of line organization of granization of more than 33-1/3%, check this box and stop frem the organization qualifies as a publicly supported organization. ► [2	7 a	2, 3 received from disqualified	0.	0	0.	0.		0.	0.						
C Add lines 7a and 7b D. D. D. D. D. D. D. D	b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the													
Section B. Total Support Subtract line 7c from line 6 20,182,389		•													
Section B. Total Support Calendar year (or fiscal yr beginning in) Calendar yr beginning in Cale				U.	<u> </u>	0.		 	<u> </u>						
Section B. Total Support	8	• • • • • • • • • • • • • • • • • • • •	·) 		\dashv	102 300						
Calendar year (or fiscal yr beginning in) Calendar year (or fiscal yr beginning in year) Calenda	500		* 1		Ļ	<u> </u>	L	120	,102,303.						
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b 11 Net income from unrelated business astation from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Part IV.) 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support. (wide lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 15 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Coledule A, Part III, line 17 19 a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.			(3) 2005	(b) 2006	(c) 2007	(4) 2008	(a) 2009		(f) Total						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources 10 Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. 11 Action of the sale of capital assets (Explain in Part IV) 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (edd ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 17 Investment income percentage from 2008 Schedule A, Part III, line 17 19 a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Investment income percentage from 2008 Schedule A, Part III, line 17 19 a 3-1/3 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		, , , , , , , , , , , , , , , , , , , ,						4 20							
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b 34, 935. 86, 758. 118, 493. 63, 466. 51, 737. 355, 389 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2008 Schedule A, Part III, line 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.	-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form													
c Add lines 10a and 10b 34, 935. 86, 758. 118, 493. 63, 466. 51, 737. 355, 389 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add lins 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 33-1/3 support tests — 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	t	income (less section 511 taxes) from businesses					-		0.						
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gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add lns 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	11	activities not included inline 10b, whether or not the business is							0.						
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First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	13	•	· ·					20	,537,778.						
Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 98.3 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 98.4 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		organization, check this box and	stop here		nd, third, fourth,	or fifth tax year a	s a section 50	1(c)(3)	▶ □						
16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests − 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ∑							1								
Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization					ne 13, column (f))	-								
17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							1.	16	98.4%						
18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization									1 7 0/						
19 a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		——————————————————————————————————————													
more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	17					\ //		10							
	17 18	Investment income percentage f	from 2008 Schedu	ile A, Part III, line	Investment income percentage from 2008 Schedule A, Part III, line 17 18 1.6 % 33-1/3 support tests – 2009 . If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not										
b 33-1/3 support tests — 2008. If the organization did not check a box on line 14 or 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	17 18 19a	Investment income percentage for a 33-1/3 support tests – 2009. If the more than 33-1/3%, check this based on the state of	from 2008 Schedu organization did not oox and stop here	ile A, Part III, line t check the box on . The organizatio	e 17 line 14, and line 15 n qualifies as a p	is more than 33-1/3 ublicly supported	3%, and line 17 organization	is not	1.6% ► X						

Schedule A	(Form	990 or	990-EZ	2009	Со	mmun	ity	Hou	sing	J Im	prov	ement	Prog	ram	94-	22233	98	Page	9 4
Schedule A	Supp	lemer	ntal In	format	tion.	Com	plete	this	part	to p	rovide	e the e	explana	tions r	equired	by Pa	rt II, lin	e 10;	_
	Part	II, line	17a c	or 17b;	and	Part	. III, I	ine	12. P	rovid	e any	other	additio	onal in	formatio	n. See	ınstru	ctions.	
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2009

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

Complete if the organization is described below.

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

in the digamization answered lest to rollingson railing string string and rank the	If the organization answere	d 'Yes,' to Form 990,	Part IV, line 5 (Proxy Tax), thei
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• (Section 501(c)(4), (5), or (6) o	rganizations Complete Part III								
Name	of organization			Employer (dentifica	ition number					
Cor	mmunity Housing Imp	rovement Program		94-222339	8					
Pai	til:A Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organia	zation.					
1	Provide a description of the	organization's direct and indirect political of	campaign activities in	Part IV						
2	Political expenditures			▶\$						
3	Volunteer hours			•						
Pai	微調B Complete if the o	rganization is exempt under section	on 501(c)(3).							
		ise tax incurred by the organization under		▶ \$	0.					
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶ \$	0.					
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?	·	Yes No					
4:	a Was a correction made?				Yes No					
ı	b If 'Yes,' describe in Part IV									
Pa	ft∜C Complete if the o	rganization is exempt under secti	on 501(c) , except	t section 501(c)(3).						
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt functio	n activities >\$						
2	2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities									
3	Total of exempt function exp line 17b	enditures Add lines 1 and 2 Enter here a	nd on Form 1120-PO	L, ►\$						
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No					
5	made For each organization contributions received that w	and employer identification number (EIN) I listed, enter the amount paid from the fili ere promptly and directly delivered to a se e (PAC). If additional space is needed, pr	ng organization's func eparate political organ	ds Also enter the amount rization, such as a sepa	nt of political					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds	(e) Amount of political contributions received and					
				If none, enter-0-	promptly and directly delivered to a separate political organization If none, enter -0-					

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2009

, , , , , , , , , , , , , , , , , , ,	O Community Ho	waing Impressed	at Dansens	04 2222	200 5 6		
Schedule C (Form 990 or 990-EZ) 200 Part II-A Complete if 1 section 501(the organization	is exempt under sec		94-2223 filed Form 5768 (ele			
A Check ► If the filir	ig organization belor	igs to an affiliated group					
B Check ► I if the filing	ng organization chec	ked box A and 'limited co	ntrol' provisions apply				
(The term	Limits on Lobbying 'expenditures' mean	g Expenditures — s amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals		
1 a Total lobbying expenditu	ires to influence pub	lic opinion (grass roots lo	bbying)				
b Total lobbying expenditu	ires to influence a le	gislative body (direct lobb	ying)	3,603.			
c Total lobbying expenditu	ires (add lines 1a ar	d 1b)		3,603.	0.		
d Other exempt purpose e	expenditures						
e Total exempt purpose e.	xpenditures (add line	es 1c and 1d)		3,603.	0.		
f Lobbying nontaxable am both columns	nount Enter the amo	ole in	721.				
If the amount on line 1e, colu	ımn (a) or (b) ıs T	ne lobbying nontaxable a	mount is				
Not over \$500,000		0% of the amount on line 1e.					
Over \$500,000 but not over \$1,	000,000	100,000 plus 15% of the excess	over \$500,000				
Over \$1,000,000 but not over \$	1,500,000	175,000 plus 10% of the excess	over \$1,000,000				
Over \$1,500,000 but not over \$	17,000,000	225,000 plus 5% of the excess of	over \$1,500,000				
Over \$17,000,000		1,000,000.					
g Grassroots nontaxable a	amount (enter 25% c	f line 1f)		180.	0.		
h Subtract line 1g from lin	e 1a If zero or less	enter -0-		0.			
i Subtract line 1f from line	e 1c. If zero or less,	enter -0-		2,882.	0.		
j If there is an amount ot section 4911 tax for this		er line 1h or line 1i, did t	he organization file For	m 4720 reporting	Yes X No		
(Som	e organizations that	-Year Averaging Period L made a section 501(h) el below. See the instruction	ection do not have to c	omplete all of the five h 2f.)			
	Lobby	ing Expenditures During	4-Year Averaging Peri	od			
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total		
2a Lobbying non-taxable amount	306,683	280,115.	229.	721.	587,748.		
b Lobbying ceiling amount (150% of line 2a, column (e))	. P		,		881,622.		

f Grassroots lobbying expenditures BAA

c Total lobbying expenditures

d Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

4,163.

76,671.

Schedule C (Form 990 or 990-EZ) 2009

<u>3,603</u>.

180.

146,937.

220,406.

0.

9,112.

199.

70,029.

1,147.

57.

Schedule C (Forr	n 990 or 990-EZ) 2009 Community	Housing	Improvement	Program _	94-2	<u> </u>	Pag
Part II-B	Complete if the organizati	on is exem	pt under section	on 501(c)(3)	and has NOT filed F	orm 5768	
	(election under section 50	11(h)).	•				
					(2)	1	/b)

		(a)		(b)
	•	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			,
á	a Volunteers?			
ı	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
(Media advertisements?			
(d Mailings to members, legislators, or the public?			
(Publications, or published or broadcast statements?			
1	Grants to other organizations for lobbying purposes?			
	p Direct contact with legislators, their staffs, government officials, or a legislative body?			
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
	Other activities? If 'Yes,' describe in Part IV			
	Total Add lines 1c through 1i			•
•	a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		~	· · · · · · · · · · · · · · · · · · ·
	b If 'Yes,' enter the amount of any tax incurred under section 4912			
	c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		. .	
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			·
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5)	, or s	ection 501(c)(6).

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

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

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2 a
b Carryover from last year	2 b
c Total	2 c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
	X.5.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	
expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (see instructions)	5
Part IV Supplemental Information	
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa Also, complete this part for any additional information	art II-B, line 1:
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa	art II-B, line 1i
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa	art II-B, line 1i
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa	art II-B, line 1i
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa	art II-B, line 1i
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa	art II-B, line 1i
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Pa	art II-B, line 1i

Schedule C (Form 990 or 990-EZ) 2009 Community Housing Improvement Program	94-2223398	Page 4
Rartily Supplemental Information (continued)		
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

2009

OMB No 1545-0047

Open to Public. Employer Identification number

Con	munity Housing Improvement Pr	cogram		04 222200
n %	intal a			94-2223398
<u>Par</u>	Organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Othe o Form 990, Part IV, line	er Similar Funds or Acce e 6.	ounts Complete If
		(a) Donor advised	funds (b) F	unds 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 do funds are the organization's property, subject			Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or dor	ng that grant funds may be nor advisor or for any other	☐Yes ☐ No
D'-£			and Washta Farm Of	
	Conservation Easements Comple			90, Part IV, line 7.
1		,	— '` <i>`</i> '	-11
	Preservation of land for public use (e g , i	recreation or pleasure)	Preservation of an historica	•
	Protection of natural habitat		Preservation of certified his	storic structure
_	Preservation of open space			
2	Complete lines 2a through 2d if the organizations day of the tax year	on held a qualified conservation	Table and I	· · · · · ·
	-			Held at the End of the Year
	Total number of conservation easements		2a	
	Total acreage restricted by conservation ease		2b	
	Number of conservation easements on a certi		` '	
	Number of conservation easements included	, , ,	2d	
3	Number of conservation easements modified,	transferred, released, extingu	ished, or terminated by the or	ganization during the tax
	year >		. J %	
4	Number of states where property subject to co			
5	Does the organization have a written policy re and enforcement of the conservation easeme	nt it holds?		ations, Yes No
	Staff and volunteer hours devoted to monitoring the year			· · · · · · · · · · · · · · · · · · ·
/	Amount of expenses incurred in monitoring, is during the year ►	nspecting, and enforcing cons	ervation easements \$	
8	Does each conservation easement reported o 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	-		Yes No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its to the organization's financial	revenue and expense statement statements that describes the	, and balance sheet, and organization's accounting for
Ŗâï	Mill® Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or Other Sin , Part IV, line 8.	nilar Assets
1 8	If the organization elected, as permitted unde treasures, or other similar assets held for put the text of the footnote to its financial statem	olic exhibition, education, or re	search in furtherance of public	nce sheet works of art, historical c service, provide, in Part XIV,
ı	 If the organization elected, as permitted unde treasures, or other similar assets held for put amounts relating to these items 	er SFAS 116, to report in its re plic exhibition, education, or re	venue statement and balance search in furtherance of public	sheet works of art, historical c service, provide the following
	(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 a amounts required to be reported under SFAS	art, historical treasures, or othe 116 relating to these items	er sımılar assets for fınancıal ç	gain, provide the following
	a Revenues included in Form 990, Part VIII, lin	e 1		> \$
١	b Assets included in Form 990, Part X			►\$ ►\$

Scriedule D (Form 990) 2009 Commi	mitty not	istiid	тшрголеше	IIL F	rogram		34-444	3330		Page Z
Part III Organizations Mainta	ining Colle	ections	s of Art, Histo	orical	Treasures, o	<u>r Other</u>	Similar Ass	ets (c	<u>ontınu</u>	ed)
3 Using the organization's acquisiti items (check all that apply):	on accession	and otl	her records, che	ck any	of the following	that are a	a significant us	e of its	collecti	on
a Public exhibition			d Loan	or exc	hange programs					
b Scholarly research			e 🗌 Other							
c Preservation for future gener	ations									
4 Provide a description of the orga Part XIV.	nızatıon's col	lections	and explain how	w they	further the organ	nization's	exempt purpo	se in		
5 During the year, did the organiza assets to be sold to raise funds r								Yes		No
Part IV Escrow and Custodia 9, or reported an amo	l Arrangen unt on For	nents m 990	Complete if c , Part X, line	rgan 21.	ızatıon answe	red 'Yes	s' to Form 9	90, Pa	rt IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodia	ın, or ot	her intermediary	for c	ontributions or ot	ner asset	s not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV	and com	plete the follow	ıng tat	ole		 			
							ļ	Amoun	<u> </u>	
c Beginning balance						1c				
d Additions during the year						1 d				
e Distributions during the year						1 e				
f Ending balance						1 f			····	
2a Did the organization include an a		rm 990,	Part X, line 217	,				Yes		No
b If 'Yes,' explain the arrangement			 							
Part V Endowment Funds Co								_		
	(a) Current	t year	(b) Prior yea	r	(c) Two years bac	k (d)	Three years back	(e)	our year	s back
1 a Beginning of year balance					1 1, ,	,	· • • • • • • • • • • • • • • • • • • •	1		
b Contributions					· · · · · · · · · · · · · · · · · · ·					
c Net Investment earnings, gains, and losses							t e	• •		
d Grants or scholarships										
e Other expenditures for facilities and programs										
f Administrative expenses										
g End of year balance.										
2 Provide the estimated percentage	e of the year	end bal	ance held as		•					
a Board designated or quasi-endov	vment 🟲		<u> </u>							
b Permanent endowment ▶										
c Term endowment ►	8									
3a Are there endowment funds not a organization by	n the posses	sion of	the organization	that a	are held and adm	ınıstered	for the	[Yes	No
(i) unrelated organizations								3a(i)		
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(ıı), are the related of	organizations	listed a	is required on Si	chedul	le R?			3b		
4 Describe in Part XIV the intended	-									<u> </u>
Part VI Investments-Land, B						line 10	า			
Description of investment		(a) Cos	it or other basis	(b)	Cost or other pasis (other)	(c) Ac	cumulated reciation	(d) E	Book Va	alue
1a Land		<u> </u>	······································		1,112,266.			1	,112.	,266.
b Buildings					4,566,471.	2,	187,646.			,825.
c Leasehold improvements					•	· · · ·	·			
d Equipment										
e Other					187,337.		165,174.		22	,163.
Total. Add lines 1a through 1e (Column	n (d) must e	qual For	m 990, Part X, d	columi		-	•	3	,513,	
		•		_						

BAA

Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 Community Housing	Improvement Pr	ogram	94-2223398	Page 3
Part VII Investments-Other Securities See Fo	orm 990, Part X, Iir	ne 12. N/A		
(a) Description of security or category (including name of security)	(b) Book value	(c) Met Cost or end-	hod of valuation of-year market value	
Financial derivatives				-
Closely-held equity interests				
Other				
	····			
			-	
	·			
				
Total. (Column (b) must equal Form 990 Part X, col (B) line 12) ►				
Part VIII Investments—Program Related (See F	orm 990. Part X. I	ine 13) N/A		
(a) Description of investment type	(b) Book value	(c) Met	hod of valuation	···
	(-)	Cost or end-	-of-year market value)
-				
			·····	
				
				.
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)				
Part IX Other Assets (See Form 990, Part X,	line 15)			
	scription	*	(b) F	Book value
Cash Impounds				177,952.
Deposits				12,481.
Property in Development			22	,338,379.
		 		
				
Total (Calumn (h) must asked Form 000, Part V, cal (P)	vno 15)		▶ 22	,528,812.
Total. (Column (b) must equal Form 990, Part X, col (B), I. Part X Other Liabilities (See Form 990, Part				, 320, 012.
(a) Description of Liability	(b) Amount		·	
Federal Income Taxes	(b) / whoark			
Revolving Fund	69	93.		•
Security Deposits Payable	35,07			,
				;
				4
				!
			•	i
				:
	05.55	7.0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ►	35,7	14.		

Schedule D (Form 990) 2009 Community Housing Improvement Program	94-2223398 Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financia	
1 Total revenue (Form 990, Part VIII,column (A), line 12)	
2 Total expenses (Form 990, Part IX, column (A), line 25)	
3 Excess or (deficit) for the year Subtract line 2 from line 1	
4 Net unrealized gains (losses) on investments	
5 Donated services and use of facilities	
6 Investment expenses	
7 Prior period adjustments	
8 Other (Describe in Part XIV)	
9 Total adjustments (net) Add lines 4 through 8	
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	
Part XII Reconciliation of Revenue per Audited Financial Statements With	Revenue per Return N/A
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	, AH
a Net unrealized gains on investments 2a	
b Donated services and use of facilities 2b	
c Recoveries of prior year grants	
d Other (Describe in Part XIV)	
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 Investments expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b.	10
	4c 5
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XIII Reconciliation of Expenses per Audited Financial Statements With	, ,
	1 Lxpenses per Return N/A
1 Total expenses and losses per audited financial statements	
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	
c Other losses 2c	
d Other (Describe in Part XIV)	
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 Investments expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	4c
5 Total expenses Add lines 3 and 4c (This must 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, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b A information	es 1a and 4, Part IV, lines 1b and 2b, Part V, Also complete this part to provide any additional
DAA	Caladala B /F 0000 0000
BAA TEEA3304L 02/02/10	Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 Part XIV Supplemental	Community	Housing	Improvement	Program	94-2223398	Page 5
PartixIV Supplemental	Information	(continued)			
•						
· 						
· 						
						-
						. -
						

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Open to Property

2009

OMB No 1545-0047

Employer identification number 94-2223398 E • Bart । বিentification of Disregarded Entities (Complete If the organization answered 'Yes' to Form 990, Part IV, line 33.) Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. * See separate instructions. Community Housing Improvement Program Department of the Treasury Internal Revenue Service Name of the organization

(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
[Earth Identification of Related Tax-Exempt Organizations (Complete If the organization answered 'Yes' to Form 990, Part IV, line 34 because It had one or more related tax-exempt organizations during the tax year.)	ns (Complete if the orging the tax year.)	ganization answere	d 'Yes' to Form 990), Part IV, line 34 b	ecause it had
(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
Butte Creek Housing Corporation 1001 Willow St.	Provide				
<u>Chico, CA 95928</u> 68-0370958	affordable rental housing	CA	12	501 c 3	yes
Queen Ann Housing Corporation 1001 Willow Street	Provide				
Chico, CA 95928	affordable	Ŕ	13	501 0 3	992
68-U391/63	Tellcal Houstild	5	77	2 7 100	Yes

Schedule R (Form 990) (2009)

TEEA5001L 02/05/10

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

yes

501 c

12

S

rental housing

affordable Provide

Eaton Housing, Inc. 1001 Willow Street <u>Chico, CA 95928</u> – 68 – 0240738 Page 2

94-2223398

Schedule R (Form 990) 2009 Community Housing Improvement Program

94-2223398 F

Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34

Partnership during the tax year.)

Decause II nad	one or more re	משובת מתל	ם ווכמווטו וז נו במ	led as a partitiersi	—because it had one of thore related organizations treated as a partitle ship during the tax year.	di.)				
(A) ame address and FIN of	(B) Primary Activity	(C)	(0) Direct	(E) Predominant	(F) Share of total income	Share of total income Share of end-of-vear	(H) Dispropor-	© Code V-UBI	(J) General or	J) ral or
related organization		domicile	con	income (related,		assets	tionate	amount in box	mana	ging
,		(state or		unrelated, excluded from tax under			allocations?	20 of Schedule K-1	partn	, Jer
		country)		sections 512-514)			Yes No	(Form 1065)	Yes	N _o
Eaton Housing Improvement Program L.P.	it Program L.P.									
1001 Willow St										
Chico, CA 95928										
68-0240739	Housing	Ş	CHIP		0.	0.	×	N/A	×	
Campbell Commons Associates, LP	ates, LP									
1001 Willow Street										
Chico, CA 95928										
	Housing	ð	CHIP		0.	0.	×	N/A	×	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									_	
							_			

Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answer Inc. 34 because of had one or more related organizations treated as a corporation or trust during the tax year.)		as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, izations treated as a corporation or trust during the tax year.)	lete if the organis	zation answered 'Ye tax year.)	es' to Form 990, Pa	ırt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	Activity Legal domicile Direct Type of entity (C corp, S corp, country) (G) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
						:
					•	

Schedule R (Form 990) (2009)

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Page 3.

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Yes																							,				c) involv						066
		1a	,		اد	1 q	7	<u>-</u>		7	1g	1 h	1:		1.	1k	11	1m	1n		10	1 _P		19	11	lds	(C) Amount involved						D /Form
	irts II-IV																									unships and transaction thresh	(B) Transaction type (a-r)						Schedule 8 (Form 990) (2009)
Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	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:	Recent of (i) interest (ii) annuities (iii) rovalties (iv) rept from a controlled entity	A receipt of () interest (ii) obtained (iii) obtained (iii) obtained (iii)	b Giff, grant, or capital contribution to other organization(s)	c Gift, grant, or capital contribution from other organization(s)	d Loans or loan quarantees 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)	I 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)	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	(2)	(2)		(4)		(9)

94-2223398

限部数时 Unrelated Organizations Taxable as a Partnership (Complete If the organization answered 'Yes' to 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 asset 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)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount In box 20 of Schedule K-1 Form (1055)	(H) General or managing partner?	al or ging er?
			Yes No		Yes No		Yes	õ
					i 			
ВАА		TEEA5004L 02/05/10				Schedule R (Form 990) (2009)) (066 L	2009)

94-2223398

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	Public charity status (if section 501(c)(3))	(F) Direct controlling entity
<u>Chico Homes, Inc.</u> 1001 Willow St.				-	
Chico, CA 95928	Provide affordable	i			
94-2751125	rental housing	CA	12	501 c 3	yes
Kathy Court Housing Corporation 1001 Willow St.					
Chico, CA 95928	Provide afffordable				
	rental housing	CA	12	501 c 3	yes
Ellison II Housing Corporation					
Chico, CA 95928	Provide affordable				
68-0389885	rental housing	CA	12	501 c 3	no
Ellsion I Housing Corporation					
	Provide affordable				
	rental housing	CA	12	501 c 3	Yes
			-		
ВАА	TEEA5102L 03	02/02/10		Schedul	Schedule R-1 (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

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.

Employer identification number 94-2223398 Community Housing Improvement Program Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body CHIP has associate members that elect the board Form 990, Part VI, Line 11 - Form 990 Review Process 990 reviewed by board of directors prior to filing. Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts Annual disclosure of conflict of interest form is filed by each board member and director. Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Officers & Key Employees Board of Directors reviews and approves executive salaries. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available 990 is available on Guidestar for public review.

Schedule O (Form 990) 2009 Name of the organization	Page 2
Name of the organization Community Housing Improvement Program	Employer identification number 94-2223398

2009	Federal Worksheets	Page 1
Client 38° Co	mmunity Housing Improvement Program	94-2223398
10/04/10		12 37PM
Form 990, Part VIII, Line 2f Other Program Service Revenue		
<u>Description</u> Developer Fee Sale of Property Totals	Bus. Total Exempt Func Exempt Func Business Revenue \$ 45,000666,135. \$ -621,135. \$ -621,135. \$ 0	Revenue Excluded From Tax . \$ 0.
Form 990, Part IX, Line 24 Other Expenses		
	(A) (B) (C) Program Management	(D)
	TotalServices & General_	<u>Fundraising</u>
Audit Bank Fees Capitalized Expense Ceremonies & Promotions Credit Report Fees Dues & subscriptions Miscellaneous Postage and Shipping Printing and Publications Property Taxes Repairs & Maintenance Tools Training & Books	16,000.	
