

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



Return of Organization Exempt From Income Tax Under, section.501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

Department of the Treasury

inte	mai Reveni	ue Service	The digalization may have to use a copy of this feture to satisfy state	reporting requi	ioniono.	13% WHISPECHOII AND THE
<u>A</u>	For the 20	010 calend	lar year, or tax year beginning , and ending			
В	Check if appli	icable: C I	Name of organization NDC HOUSING & ECONOMIC DEVELOPMENT		D Empl	oyer identification number
$\Box$	Address char	nge	CORPORATION-GROUP RETURN			
$\exists$		•	Doing Business As	-	91-	-1884698
닏	Name change	• •	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telep	hone number
U	muten letum		708 THIRD AVENUE	710	212	2-682-1106
$\Box$	Terminated	-	City or town, state or country, and ZIP + 4			<del></del>
$\equiv$			NEW YORK NY 10017		G Gross rec	espts 91,347,372
닏	Amended ret			<del> </del>	G GIUSS IEU	aps
$\sqcup$	Application p		Name and address of principal officer: ROBERT W. DAVENPORT	H(a) isthisag	roup return for	affiliates? X Yes No
				H(b) Are all a	fibatos inch	uded? Yes X No
			708 THIRD AVENUE, SUITE 710			list. (see instructions)
			NEW YORK NY 10017	_	E STM	
1	Tax-exem		X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527	1		- 0010
J_	Website:	N/2	<u> </u>	H(c) Group e		
K	Form of orga	anization .	X Corporation Trust Association Other ► L Yo	ear of formation. 1	988	M State of legal domicile: VA
<u> </u>	Yantul 👋	Sum				
			ibe the organization's mission or most significant activities:		<i>.</i>	
	1	HEDC'S	3 PRIMARY GOALS ARE: 1) LOW INCOME HOUSING; 2) LES	SENING T	HE BUR	dens
Ş	1	OF GOV	ERNMENT; 3) STIMULATE ECONOMIC DEVELOPMENT IN LOW	INCOME A	REAS.	SEE
Ë		SCHEDU	TLE O			
8			ox If the organization discontinued its operations or disposed of more than 25	% of its net ass	ets.	
ŏ			oting members of the governing body (Part VI, line 1a)			12
80	1		ndependent voting members of the governing body (Part VI, line 1b)			12
2			er of individuals employed in calendar year 2010 (Part V, line 2a)			0
Activities & Governance					6	
ĕ			or of volunteers (estimate if necessary)		7a	
			ted business revenue from Part VIII, column (C), line 12	• • • • • • •	7b	0
_	<u> b Ne</u>	t unrelate	d business taxable income from Form 990-T, line 34	Prior Yes		Current Year
	8 Co	ntabution	s and grants (Part VIII, line 1h)		3,966	
9	1		A LOUIS CO. Dal	80,33	_	
é	1	•			7,480	
Revenue			ncome (Part VIII, column (A), lines 3, 4, and 7d) ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 and (BESELVE)	-)	, ,	2/000/044
				82-96	7- 521	91.,.347,372
_			in the second (Deed IX column (A) times (A)		3,966	
			similar amounts paid (Part IX, column (A), lines 3 d to or for members (Part IX, column (A), line 4) 8 NOV 1 6 2011		3/300	
			to or not the man of a second of the second	7		
8	15 Sa	ilaries, oth	er compensation, employee benefits (Part IX, cd/lime, (A) linear 1011	<u> </u>		
Expenses	16a Pro	ofessional	fundraising fees (Part IX, column (A)-line 11e)	**************************************	<u> ترز رکافی پی</u>	Amora do artilizar a ancionar
ğ			ising expenses (Part IX, column (D), line 25)	93,092	****	102,354,170
Ш			ses (Part IX, column (A), lines 11a-11d, 11f-24f)	93,26		
		•	ses. Add lines 13–17 (must equal Part IX, column (A), line 25)			
	19 Re	venue les	s expenses. Subtract line 18 from line 12	-10,298		-11,224,425 End of Year
Not Assets or	3			Beginning of Cur 12374		1388643760
100	20 To		(Part X, line 16)	12725		1435689680
₹°	21 To		es (Part X, line 26)			-47,045,920
Ž	22 Ne		or fund balances Subtract line 21 from line 20	-35,15	0,003	1,043,920
<u>⊁ F</u>	art II 🔅	Sign	ature Block		<del></del>	
U	inder penati	ties of perju	uy, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of	my knowled	age and belief, it is
	ue, correct,	, and copipi	ete Declaration of preparer (other than officer) is based on all information of which preparer has a	, rivalenta	1	11
	Ī		estrol Deven			1/4/11
Sig	gn		ature of officer		Date	,
He	re	G	ERTRUDE SCRIVEN CFO			
		Туре	or print name and title		<del></del>	<del>(*)</del> 1
	F	Print/Type p	reparer's name Preparer's sonature	A Date	Check	LJ
Pai			NCHI, CPA LUCEDALLA CO		/11 self-er	nployed P00586601
Pre		Firm's name	CHATTO CATTURCTO BY MY THE C PRICTIPO	CPAS F	irm's EiN 🕨	14-1638228
Us	e Only		21 NORTH SEVENTH STREET			
	· 1	Firm's addre	HIDCON NV 12524	P	hone no	518-828-6500
Ma	v the IRS	discuss th	his return with the preparer shown above? (see instructions)			Yes No
FA	Paperwi	ork Redu	ction Act Notice, see the separate instructions.			Form 990 (2010)
DA			· ·		•	946 996
						GI1

om 990 (2010) NDC HOUSING &		91-1884698	Page 2
	Service Accomplishments		_
	ontains a response to any question	n in this Part III	X
1 Briefly describe the organization's missi			_
HEDC'S 3 PRIMARY GOAL	LS ARE: 1) LOW INCOME H	iousing; 2) lessening	THE BURDENS
OF GOVERNMENT, 3) STIM	MULATE ECONOMIC DEVELO	PMENT IN LOW INCOME	AREAS. SEE
SCHEDULE O		• • • • • • • • • • • • • • • • • • • •	
2 Did the organization undertake any sign			
prior Form 990 or 990-EZ?	**********************	• • • • • • • • • • • • • • • • • • • •	Yes 🗓 No
If "Yes," describe these new services or	n Schedule O.		
3 Did the organization cease conducting,	or make significant changes in how it condu	ucts, any program	
services?	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	Yes X No
If "Yes," describe these changes on Sch			
	nents for each of the organization's three tar		
	nd section 4947(a)(1) trusts are required to	report the amount of grants and allocati	lons to
others, the total expenses, and revenue	, if any, for each program service reported.		
	615,431 including grants of \$	) (Revenue	
TO CONSTRUCT NEW LOW			
HOUSING FOR PERSONS C			
ELDERLY PERSONS, AND	OTHERS IN NEED OF SAM	TE ADEQUATE HOUSING.	SEE SCHEDULE
O.		**************************	
* *************************************	******************************	***********	
	**********************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		***************************************	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	**************************	*************************	
	*****************************		,
		•••••	
4b (Code: ) (Expenses \$ 9	5,668,715 including grants of \$	217,627 ) (Revenue	\$ 83,554,731
TO ASSIST IN THE EREC			
BURDENS-OF-GOVERNMENT	r and to promote socia	AL WELFARE. SEE SCI	HEDULE O
	********************************		: <del></del> <del></del>
	***************************************	*************************	
· · · · · · · · · · · · · · · · · · ·	***************************************	*******	
,	***************************************	**** * ********************************	• • • • • • • • • • • • • • • • • • • •
	************************************		
	*******************************	******************************	
*			
*			
*			
4c (Code: ) (Expenses \$	6, 287, 651 including grants of \$	) (Revenue	
TO INITIATE AND CARRY	Y OUT ACTIVITIES TO ST	FIMULATE ECONOMIC DI	EVELOPMENT IN
ECONOMICALLY DISTRESS	SED AREAS OF THE COUNT	TRY. SEE SCHEDULE (	<b>)</b> .
	***************************************	***************************************	
		***************************************	
		***************************************	
• • • • • • • • • • • • • • • • • • • •	***************************************	***************************************	, <b></b>
	••••••	*************************	
		***************************************	
4d Other program sendose /Describe in St	chedule O )		
4d Other program services. (Describe in So	•	) (Revenue C	
4d Other program services. (Describe in So (Expenses \$ 4e Total program service expenses	chedule O.) including grants of \$ 102,571,797	) (Revenue \$	

200 M.	ACTAS CHECKIST OF REQUIRE CONTROLS		Yes	<u> </u>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		TVB	No
•	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
-	the same the same as the same as a same a same as a same as a same as a same a same a same a same a same a	3	1	x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	<u> </u>		
•	at attack to the advantage of the second of	4		X
5	ts the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			<del></del>
3	assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C,	<b>\</b>		ì
	Part III	5		x
	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	٣	_	<del></del>
6	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
		6		x
_	complete Schedule D, Part I  Did the organization receive or hold # conservation easement, including easements to preserve open space,	┝╩		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<del>                                     </del>	-	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		l	<b>.</b>
	complete Schedule D, Part III	B	├──	X
9	Old the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	1		
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes."			
	complete Schedule D, Part IV	9	<del> </del>	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-			٠,
	endowments? If "Yes," complete Schedule D, Part V	10	500000000	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.	S	N#2	<b>2223</b>
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	l	l	ŀ
	complete Schedule D, Part VI	11a	X	ļ
þ	Old the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	1		۱
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		1	۱
	of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c	<del> </del>	X
d_	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		1	l
	reported in Part X, line 167 if "Yes," complete Schedule D, Part IX	-11d	<del></del>	
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	i	1	1
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		1	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			l
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	L	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, Parts II and IV	15		X
16	Did the organization report on Part IX. column (A), line 3, more than \$5,000 of aggregate grants or assistance			
•••	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
٠.	Part IX, column (A), lines 6 and 11e7 if "Yes," complete Schedule G, Part I (see instructions)	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		1	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		\	\
	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20a		20a		Х
zua b	The state of the s			
U	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	205	<u> </u>	<u></u>
	Form and mens that other one of 11	For	n <b>99</b> 0	(2010)

2000	内部で Checklist of Required Schedules (Continued)			
		i	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		u l	
	in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	21	<u> </u>	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			37
	on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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>
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a	X	
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	•		
	to defease any tax-exempt bonds?	24¢		X
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	X	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
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
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	<b>,</b>		
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
8	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	[	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		x
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	-29-	_	X-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	annon retion anni-livetime C If five a Lamminto Cabadulla Af	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	<del>                                   </del>		<del></del>
٠.	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	<del></del>		<del>                                     </del>
72		32	ł	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- <u>"-</u>	<del>                                     </del>	<del> </del>
JJ		33	1	x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	-33	· ·	<u> </u>
34		١,,		x
	IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34	<b>-</b>	X
35		35	-	
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, fine 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	38	├─-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
				X
	Part VI	37		<del>├^</del>
38	Part VI 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	37	x	

Form 990 (2010) NDC HOUSING & ECONOMIC DEVELOPMENT Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? 3а 3a b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial If "Yes." enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. X Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8888-T? <u>5c</u> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? X b If "Yes," did the organization include with every solicitation an express statement that such contributions or affis were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 If "Yes," indicate the number of Forms 8282 filed during the year 7e X Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? -X-Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g a X If the organization received a contribution of cars, boats, sirplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? R Sponsoring organizations maintaining donor advised funds. X 9a Did the organization make any taxable distributions under section 4966? 9h Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 ..... Gross receipts, Included on Form 990, Part VIII, line 12, for public use of club facilities ь Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization ficensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.

Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O ...

Enter the amount of reserves on hand

14a

organization: ► ADAM ENNIS 708 THIRD AVENUE, SUITE 710

10017

NEW YORK

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Form 990 (201	O) NDC	HOUSING '	E ECONOMIC	DEVELOPMENT	91-1884698	Page
					ployees, Highest Compensa	ited Employees,
	and Inc	dependent Cor	ntractors			
	Check	if Schedule O	contains a respo	onse to any questio	n in this Part VII	

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 organization's tax year.
- 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, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)
   who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average	Posi	(C) (D) (E) Position (check all that apply) Reportable Reportable							(F) Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer		Highest compensated employee		compensation from the organization (W-2/1098-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) ROBERT W DAVENPO CHAIRMAN/DIR	RT AS NEEDED	x		x				0	0	0
(2) DANIEL MARSH III		x		x				0	0	
PRES./DIR. (3) JOHN FINKE	AS NEEDED		-				<u> </u>			0
V.P. /DIR. (4) ANN VOGT	AS NEEDED	X 	$\models$		-	+	⊨	0	0	0
SEC/TR./DIR.	40.00	X	ļ	x				0	. 0	0
(5) BARRY LANG BOARD MEMBER	AS NEEDED	x	_			<u> </u>		0	0	0
(6) JOHN LINNER BOARD MEMBER	40.00	x			ŀ			o	O	o
(7) JOHN DOWNS		x						0	0	0
BOARD MEMBER (8) KEVIN URQUHART	AS NEEDED			-		$\dagger$				
BOARD MEMBER (9) DAVID TREVISANI	AS NEEDED	X	_	_	┝	╁	-	0	0	c
BOARD MEMBER (10) INGRID NARDONI	40.00	X	$\vdash$	_	ļ.,	-	<u> </u>	0	0	0
BOARD MEMBER	40.00	x						0	0	0
(11) PATRICIA THOMSON	AS NEEDED	x			1			o	0	
(12) ADAM ENNIS DIRECTOR/CFO	40.00	x						0	0	0
(13)		Ī								,
(14)			$\vdash$				┢┈			
(15)	<del></del>		$\mid$							-
(16)		T	<del>                                     </del>		1	T				· · · · · · · · · · · · · · · · · · ·

91-1884698

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Form 990 (2010) NDC HOUSING & ECONOMIC DEVELOPMENT

Pai	- V	II Statem	ent of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ត្ត	1a	Federated carr	paigns	1a						
Contributions, gifts, grants and other similar amounts		Membership de		1b						
S,E	C	Fundralsing ev	ents	1c						
#g#	d	Related organi	zations	1d						
pĒ	8	Government grants (	contributions)	18						
	f	All other contribution		1						
결		and similar emounts	not included above	1f	21	7,627				
言	9	Noncesh contribution	s included in lines 1a-	1 <b>t</b> \$ .						
	<u>h</u>	Total. Add line	s 1a-1f	<u></u>	<del></del>	<u> ▶</u>	217,627			
울					В	ısn. Code				
Ž	2a	TOM INC	WE HOUSING				534,781	534,781	·	
8	þ	• • • • • • • • • • • • •	HE BUNDENS		,		83,554,731	83,554,731		
울	C	STIMULA.	re econ. Dev	BLOPMEN	×7		5,489,589	5,489,589		
S	đ				├		<del></del>		· · · · · · · · · · · · · · · · · · ·	<u></u>
튄	8				-		· · · · · · · · · · · · · · · · · · ·			
Program Service Revenue		•	am service reve				90 570 101			
-		Total. Add line					89,579,101			
l	3	Investment inc					1 850 644	1 550 644		
			iar amounts)				1,550,644	1,550,644	<del></del>	
<u> </u>	4		rvestment of tax			æeas ►			<del></del>	
ı	5	Royattles .	(D. Darel	<del></del>	(II) Pen					
ł	_		(i) Real		(a) Pers	IONAL	1			
		Gross Rents								
	þ	Less: rental exps								
- 1	C	Rental Inc. or (loss)		<u></u>						
	7a	Gross emount from	me or (loss) (i) Securitie		(ii) O1	her				
		sales of assets	(i) Securius	•	(11) (1		1			
	ا ا	other than inventory		<del></del>			1			
	_₽	Less: oost or other		-						
	_	basis & sales exps. Gain or (loss)		<del>-</del>			†			
		Net gain or (loss)				<b>•</b>		9		
		Gross income fr								
울	94	not including \$	•	1						
enne			reported on line 10	····						
	ŀ		18							
Other R	١,	Less: direct 6		<u>.</u> .	····		1			
ಕ		Net income of		ے ۔ Iraisina e	events	🕨				
		Gross income fr								
	"		19							
	ь	Less: direct e								
		Net income of			vities	▶				
		Gross sales								
	i		lowances							
	b	Less: cost of								
		Net income of			entory	🕨				
			ellaneous Revenu			usn. Code				
	118	1 , , , , , , , , , , , , , , , , , , ,			T		<u> </u>		<b></b>	<del> </del>
	b				[_		ļ		<b></b>	<del></del>
	6				i			<u> </u>		
	d		านอ							
	0	Total. Add line	es 11e-11d			▶				
	12	Total revenue	. See Instructio	ns	<u> </u>	<b>.</b>	91,347,372	91,129,745	0	Form <b>990</b> (2010

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).

	not include amounts reported on ilnes 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	217,627	217,627		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<del></del>
8	Pension plan contributions (include section 401(k)				
ø				Į	
	and section 403(b) employer contributions)				<del> </del>
9	Other employee benefits		· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>
10	Payroll taxes				<del> </del>
11	Fees for services (non-employees):	,			
8	Management		<del></del>		1
ь	Legal				
C	Accounting				
đ	Lobbying				
0	Professional fundralsing services. See Part IV, line 17				
f	Investment management fees				
9	Other			<u></u>	
12	Advertising and promotion				<b></b>
-13-	- Office expenses		·		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	41,857,228	41,857,228		
21	Payments to affiliates		· - · •		
22	Depreciation, depletion, and amortization	27,455,570	27,455,570		<u> </u>
23	Incurance				1
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
_	(A) amount, fist line 24f expenses on Schedule O.)  OPERATING/MAINTENANCE	8,169,499	8,169,499		
8	• • • • • • • • • • • • • • • • • • • •				<del> </del>
Þ	ADMINISTRATIVE EXPENSES	5,861,565			<del></del>
C	UTILITIES	4,499,333			+
đ	ORGANIZATION FEE EXPENSE	3,537,001		<del></del>	<del>                                     </del>
8	RENT REFUND	3,049,461			
f	All other expenses	7,924,513			
25	Total functional expenses. Add lines 1 through 24f	102,571,797	102,571,797	L	0
26	Joint costs. Check here				
	SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column				1
	(B) joint costs from a combined educational	j			
	campaign and fundraising solicitation			<u></u>	<u> </u>
DAA					Form 990 (2010)

Pa		Balance Sheet			rage 11
			(A)		(B)
			Beginning of year	L	End of year
	1	Cash—non-interest bearing	2,854,249		6,570,302
-	2	Savings and temporary cash investments	337,712,663	2	351,144,405
1	3	Piedges and grants receivable, net		3	
	4	Accounts receivable, net	9,967,180	4	4,072,157
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
- 1		employers and sponsoring organizations of section 501(c)(9) voluntary			
_		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	46,236,447
88	8	Inventories for sale or use		8	
۷	9	Prepaid expenses and deferred charges	678,740	9	604,115
	10a	Land buildings and equipment; cost or			
		other basis. Complete Part VI of Schedule D 10a 882,73	5,520		
- 1	ь	Less: accumulated depreciation 10b 117,741	3,015 751,067,478	10c	764,988,505
1	11	Investments—publicly traded securities	_	11	
ł	12	Investments—other securities. See Part IV, line 11		12	
I	13	Investments—program-related. See Part IV, line 11	384,612	13	852,075
	14	Intangible assets		14	
- {	15	Other assets. See Part IV, line 11	07 040 071	15	214,175,754
	16	Total assets. Add lines 1 through 15 (must equal line 34)			
	17	Accounts payable and accrued expenses			2,394,411
i	18	Grants payable		18	
	19	Deferred revenue	2,461,854	19	17,683,246
- 1	20	Tax-exempt bond liabilities	1193280000	20	1340245000
တ္သ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22				
- 호		employees, highest compensated employees, and disqualified persons.			
31		Complete Part II of Schedule L		-22-	
	23	Secured mortgages and notes payable to unrelated third parties		23	
İ	24	Unsecured notes and loans payable to unrelated third parties	34,546,027		17,278,925
- 1	25	Other liabilities. Complete Part X of Schedule D	39,801,414		58,088,098
1	26	Total liabilities, Add lines 17 through 25	<u>1272587555</u>	26	1435689680
SS		Organizations that follow SFAS 117, check here ▶ X and complete			
Š		lines 27 through 29, and lines 33 and 34.			
프	27	Unrestricted net assets	-35,156,603	27	-47,045,920
ä	28	Temporarily restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets	į .	29	
2		Organizations that do not follow SFAS 117, check here ▶ ☐ and			
7		complete lines 30 through 34.			
ģ	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-In or capital surplus, or land, building, or equipment fund		31	
AS.	32	Retained earnings, endowment, accumulated income, or other funds		32	
1	33	Total net assets or fund balances	-35,156,603		-47,045,920
ž	34	Total flabilities and net assets/fund balances		34	1388643760

Form 990 (2010)

om	990 (2010) NDC HOUSING & ECONOMIC DEVELOPMENT 91-1884698				Pag	<sub>1e</sub> 12
Pa	Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI	<u></u>	<del></del>			X
				_		
1	Total revenue (must equal Part VIII, column (A), line 12)					<u> 372</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				<u> 797</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	-11	<u>.,27</u>	24,4	<u> 425</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	- 35	<u>, 1</u> !	56,	603
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-6	54,	892
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6	-47	1,04	45,	920
Pa	it XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				,	
					Yes	No
1	Accounting method used to prepare the Form 990:   Cash X Accrual Other		[			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	<b></b>		2a	X	<u>.</u>
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	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?	<b></b>		2c	X	
-	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.		1			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		1			
	issued on a separate basis, consolidated basis, or both:					
	Separate basis 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	<u></u>	X
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b		<u> </u>
				For	n 990	(2010)

## SCHEDULE A (Form 990 or 990-EZ)

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.

2010
Operate Public

Department of the Treasury internal Revenue Service
Name of the organization

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

		CORFORMITON	<del></del>						T004					
Pa	rti Reas	on for Public Charlty	Status (All organizations	s must c	omplet	e this	part.)	See in	struction	ons.				
The o	rganization is not	a private foundation becau	se it is: (For lines 1 through 11,	check only	one box	.)								
1	_		sociation of churches described	-		-								
2	_	·	(A)(II). (Attach Schedule E.)			,,								
3		* *	ice organization described in se	ction 170	(b)(1)(A)(i	HI).								
4		•	ed in conjunction with a hospital			•	)(1)(A)(i)	i). Ente	r the hos	pital's name	<b>B</b> .			
	city, and stat	-					,, ,, ,,	,						
5	<b>~</b> •		of a college or university owned	or operat	ed by a q	ovemme	ental uni	t descri	bed in		•••••			
		b)(1)(A)(iv). (Complete Par	- · ·		,									
6			governmental unit described in s	ection 17	ነበ/ኩነ/4ነ/ሴ	Mv)								
7		_	substantial part of its support fr				from the	cener	l nublic					
• 1	-	section 170(b)(1)(A)(vi). (C		o a go	J	i dilik di	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	gonera	провію					
8			170(b)(1)(A)(vi). (Complete Pari	. III S										
	TEST '		(1) more than 33 1/3% of its sup	•	contellu el		mhamhi	a face	and area					
•		<del>-</del>						•	-	3				
	•	n activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its n gross investment income and unrelated business taxable income (less section 511 tax) from businesses												
	• •	_		-			t) #Om t	iusines	563					
40		=	30, 1975. See section 509(a)(2)											
10	_	-	exclusively to test for public sal	•				44						
11		-	exclusively for the benefit of, to											
		• • •	ted organizations described in a					-	Bection		•			
	,	Check the box that describes the type of supporting organization and complete lines 11e through 11h.  pe I b Type II c Type III—Functionally integrated d Type III—Other												
	_ a L Type	,,,	٠٠ ــــــ			đ								
0			ganization is not controlled direc	-				•	•					
		<del>-</del>	er than one or more publicly su	ported or	ganizatio	ns desci	ibed in s	ection .	509(a)(1)	)				
	or section 50				<b></b>	_								
f	_		ermination from the IRS that it is	з а Туре І	Type II,	or Type	ill supp	orting						
		check this box	• • • • • • • • • • • • • • • • • • •									Ш		
8	Since Augus	it 17, 2006, has the organiza	ation accepted any gift or contrib	oution from	n any of t	he								
	following pe													
		· •	controls, either alone or together	-						_	Yes	No		
			e supported organization?			<i></i> .				11g(l)	4	┿		
	-	member of a person descr								119(4	<u>۷</u> ــــــــــــــــــــــــــــــــــــ	↓		
	(III) A 35% (	controlled entity of a person	described in (I) or (ii) above?			. <b>.</b>		. <b>.</b>		119(0	J)	<u> </u>		
h	Provide the	following information about	the supported organization(s).											
(I) N	Name of supported	(II) EIN	(III) Type of organization		organization	(v) Did	you notify		is the	(VII) An	nount of	,——		
	organization	ļ	(described on lines 1-9 above or IRC section		sted in your		nization in of your	lorgánizat	ton in cal.	ant	port			
			(see instructions))	Sovering	document?		port?		S.7					
_			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	Yes	No	Yes	No					
(A)														
			<u> </u>	1		;	<u> </u>	L	1 1					
(B)						1								
				İ.		<u> </u>	L	1 . :						
(C)														
• •				1	ľ		[							
(D)														
				1			}							
(E)														
							<u> </u>			_				
Total								k W						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 'NDC HOUSING & ECONOMIC DEVELOPMENT 91-1884698 Page Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sect	ion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			<del></del>			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			2			
	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets						
11	(Explain in Part IV.)					7	
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years. If the Form 990 is for the	. (See instructions) A omanization's fire	t second third for	urth or fifth tax ve	er as a section 501	(c)(3)	
13	organization, check this box and stop her						▶ [
Sec	tion C. Computation of Public S	upport Percen	tage		.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
14	Public support percentage for 2010 (line			nn (f))		14	%
15	Public support percentage from 2009 Sch	nedule A. Part II III	10 14	****		15	%
16a	33 1/3% support test—2010. If the organ	ization did not che	ck the box on line	13, and line 14 is	33 1/3% or more. o	heck this	
100	box and stop here. The organization qua	lifies as a publicly i	supported organiza	ation	,		▶[
b	33 1/3% support test—2009. If the organ	ization did not che	ck a box on line 13	or 16a, and line	15 is 33 1/3% or m	ore.	
U	check this box and stop here. The organi						▶ [
17a	10%-facts-and-circumstances test—20						
	10% or more, and if the organization mee	ets the Tacts-and-c	ircumstances" test	, check this box a	nd stop here. Expl	ain in	
b	organization 10%-facts-and-circumstances test—20						▶ [
-	15 is 10% or more, and if the organization	n meets the facts-	and-circumstances	s" test, check this	box and stop here		
	Explain in Part IV how the organization m						
	supported organization						▶ [
18	Private foundation. If the organization di	id not check a box	ол Ilne 13, 16a, 16	b, 17a, or 17b, ch	eck this box and se	90	
							▶ [
	instructions	· · · · · · · · · · · · · · · · · · ·					

Schedule A (Form 990 or 990-EZ) 2010 'NDC HOUSING & ECONOMIC DEVELOPMENT Part III Support Schedule for Organizations Described in Section 509(a)(2)

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			Dolow, ploade			<del></del>
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual	552,633	85,521	438,689	173,966	217,627	1,468,436
2	grants.")  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	43,718.032	51,957,983	84,535,167	80,336,075	89,579,101	350,126,358
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities fumished by a governmental unit to the organization without charge						
6	Total, Add lines 1 through 5	44,270,665	52,043,504	84,973,856	80,510,041	89,796,728	351,594,794
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
5	line 6.)						351,594,794
	tion B. Total Support  ndar year (or fiscal year beginning in) ▶	4-1 0000	/b\ 0002	(-) 0000			
		(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	44,270,665	52,043,504	84,973,856	80,510,041	89,796,728	351,594,794
10a 	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	-2,441,508	4,686,158	2,124.907	2,457,480	1,550,644	13,260.697
Ç	Add lines 10a and 10b	2,441,508	4,686,158	2,124,907	2,457,480	1,550,644	13,260,697
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	_				0	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,					V = - W	
	and 12.)	46,712,173	56,729,662	87,098,763			364,855,491
14	First five years. If the Form 990 is for the		second, third, fou	rth, or fifth tax yea	r as a section 501	(c)(3)	
<del></del>	organization, check this box and stop her			····	·····		<u></u>
	tion C. Computation of Public St			- //\	<del></del>		
15 46	Public support percentage for 2010 (line 8						96.37%
16 Sec	Public support percentage from 2009 Scheition D. Computation of Investme				<u> </u>	16	95.60%
17	Investment income percentage for 2010 (I			column (f))		17	4 %
18	Investment income percentage from 2009				******************	18	4 %
19a	33 1/3% support tests—2010. If the orga		•••••	14, and line 15 is	more than 33 1/39		
	17 is not more than 33 1/3%, check this b			•		-	<b>▶ X</b>
b	33 1/3% support tests—2009. If the orga		-	•		• • • • • • •	<u>.</u>
	line 18 is not more than 33 1/3%, check the		_	•			▶ 🔲
20	Private foundation. If the organization did	I not check a box o	n line 14, 19a, or 1	9b, check this box	and see instruction	ons	<b>▶</b> □

Schedule A (Fo	orm 990 or 990-EZ) 2010 'NDC HOUSING	& ECONOMI	C DEVELOPMENT	91-1884698	Page 4
Part IV	Supplemental Information. Complete Part II, line 17a or 17b; and Part III, lir instructions).	this part to prov	ide the explanations i	required by Part II, line 10;	
		• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •
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DAA				Schedule A (Form 990 or 99	0-EZ) 2010

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. 2010
Open to Public Income line

Revenue Service ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT 91-1884698 CORPORATION-GROUP RETURN Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year ..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Part #2 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/08, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? \_\_\_\_\_\_ Yes \_\_\_ No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (I) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990; Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets Included in Form 990, Part X ... Schedule D (Form 990) 2010 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Sched	fule D (Form 990) 2010 NDC HOUSIN	IG & ECONOMIC	DEAETOBWE	INT	91-188	4698	<u>_</u> F	Page Z
50.00	付割る Organizations Maintaining (						ets (continued	<u> </u>
3	Using the organization's acquisition, accession collection items (check all that apply):	, and other records, check	any of the following	g that an	e a significan	t use of its		
a	Public exhibition	d Loan or	exchange program	3				
ь	Scholarty research							
c	Preservation for future generations	٠.			••• •• ••• •			
_	Provide a description of the organization's colle	ections and explain how the	v further the organ	ization's	exempt pure	ose in Part		
•	XIV.		,					
5	During the year, did the organization solicit or	receive donations of ert. his	storical treasures, o	or other s	similar			
J	assets to be sold to raise funds rather than to						Tyes	No
<b>**</b> 54	Escrow and Custodial Arra	ngements. Complete	if the organiza	tion a	nswered "	es" to For		
	line 9, or reported an amoun						555, 1 2	•
4-	Is the organization an agent, trustee, custodiar			or accet	e not			
18							Yes	No
	Included on Form 990, Part X?	and accordant the fallowing t		• • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	[] les [	٠,٠٠٥
D	ir Tes," explain the arrangement in Part AlV a	no complete tile totowing t	2010.				Amount	
	m					4.	ranoant	
C	Beginning balance							<del></del>
	Additions during the year							
е	Distributions during the year					1		
f	Ending balance					[15]_	<del></del>	<del></del>
	Did the organization include an amount on For	m 990, Part X, line 217					Yes	_) No
b	If "Yes," explain the arrangement in Part XIV.							
· Pa	rt V Endowment Funds, Comple							
		(a) Current year	(b) Prior year	(c) Two	years back	(d) Three years	back (e) Four year	8 back
1a	Beginning of year balance							4,000
ь	Contributions					1000000		
	Net investment earnings, gains, and							
	losses		1			- 20		
d	Grants or schotarships	<b>{</b>						
	Other expenditures for facilities and							
•	programs	1	1					
f	Administrative expenses							
	End of year balance —— — — — — — — — — — — — — — — — — —						383 15 4 3 4 4	
9	Provide the estimated percentage of the year	and halance held as:	<del></del>					
4	Board designated or quasi-endowment ▶	eriu Daleitos ficio es.						<del>-</del>
<i>a</i>	Permanent endowment ▶ %							
C	Term endowment ▶ %  Are there endowment funds not in the possess	rion of the armanization that	are held and adm	inietoro	I for the			
38		oron or the organication that	, are new and addi	#(131616 <u>C</u>	01 416		Yes	No
	organization by:						3a(i)	+ "
	(i) unrelated organizations	•						+
	(ii) related organizations	**************************************			• • • • • • • • • • • • • • • • • • • •		3a(II)	+
	If "Yes" to 3a(ii), are the related organizations						[ 30 ]	ш.
<u>4</u>	Describe in Part XIV the intended uses of the	organization's endowment	nunds.				<u> </u>	
Pa	it Vi Land, Buildings, and Equip				(c) A	T	(d) Book value	
	Description of investment	(a) Cost or other basis	(b) Cost or other I	D9212	(c) Accur deprec		(d) Book value	•
		(investment)	(other)	<u> </u>	Coprec		24 222	F 6 7
1a	Land		24,233				24,233,	
	Buildings		836,202			78,940	729,223,	
C	Leasehold improvements		10,327			98,162	4,729	
	Equipment		11,972	,738	5,1	70,913	6,801,	,825
	Other							
T. 4-1	Add long to through to /Column (d) must be	und Form DOO Bard Y cohi	mn (B) (ine 10(c) \			<b>▶</b>	764.988.	. 505

Schedule D (Form 990) 2010

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Schedule D (Form 990) 2010 NDC HOUSING & ECONOMIC DE			Page 4
Pair XI Reconciliation of Change in Net Assets from Form			
1 Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2 Total expenses (Form 990, Part IX, column (A), line 25)		2	
3 Excess or (deficit) for the year. Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments		4	
5 Donated services and use of facilities		5	
6 Investment expenses		6	
7 Prior period adjustments		7	
8 Other (Describe in Part XIV.)		8	
9 Total adjustments (net). Add lines 4 through 8		9	
10 Excess or (deficit) for the year per audited financial statements. Combine lines	s 3 and 9	10	
Part XII. Reconciliation of Revenue per Audited Financial St			
1 Total revenue, gains, and other support per audited financial statements			
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments	2a		
b Donated services and use of facilities			
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV.)	2d		
Add lines 2a through 2d		20	
3 Subtract line 2e from line 1		·····	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4.		
b Other (Cessibe is Bort VIV.)	4b		
b Other (Describe in Part XIV.) c Add lines 4a and 4b		46	
c Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Part XIII Reconciliation of Expenses per Audited Financial S			
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	اما		
b Pries year adjustments	26		
b Prior year adjustments  c Other losses	20		
c Other losses d Other (Describe in Part XIV )	24		
e Add lines 2a through 2d			
-3 -Subtract line 2e from-line 1-		·····-	<del></del>
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 4		
a Investment expenses not included on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIV.)	<del>Laizul</del>		
c Add lines 4a and 4b			
5 Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u> </u>	5	
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F			
Part V, tine 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, li	nes 2d and 4b. Also complet	e this part to provide	
any additional information.			
any additional information.		- <del></del> - <del></del>	<del></del>
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Schedule D (Form 990) 2010

ichedule D (Form 99	30) 2010 N	DC HOUSIN	NG & ECONOMIC	DEVELOPMENT	91-1884698	Page 5
Part XIV Sup	plementa	Information	continued)			
	• • • • • • • • • • • • • • • • • • • •	******	• • • • • • • • • • • • • • • • • • • •	•••••		
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					Schedu	ile D (Form 990) 2010

Open to Public Inspection ջ (조 Schedule I (Form 990) (2010) OMB No. 1545-0047 2010 Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II (h) Purpose of grant or assistance SEE PART IV Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 91-1884698 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, eppresse, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of non-cash assistance ► Attach to Form 990. 217,627 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. grant NDC HOUSING & ECONOMIC DEVELOPMENT (c) IRC section if applicable 39-1943246 General Information on Grants and Assistance can be duplicated if additional space is needed (p) EIN Enter total number of section 501(c)(3) and government organizations For Paperwork Reduction Act Notice, see the Instructions for Form 890. DAA CORPORATION-GROUP RETURN the selection criteria used to award the grants or assistance? NY 10017 (a) Name and address of organization Enter total number of other organizations or government (1) PROJECT RESTORE LP 708 THIRD AVENUE Name of the organization SCHEDULE NEW YORK (Form 990) Part Part R 8 8 € 3 9 2 <u>@</u> 948.9<del>96</del>

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ation required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line 2, and any other additional information required in Part I, line	.	Part III can be duplicated if additional space is needed	tional space is needed.	_			
Supplemental Information. Complete this part to provide the information required in Part   line 2, and any other additional into the complete this part to provide the information required in Part   line 2, and any other additional into the complete this part to the complete the part to the complete the		(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Supplemental Information. Complete this part to provide the information required in Part   line 2, and any other additional info  TWO (2) HUD SUPPORTIVE HOUSING PROGRAM GRANTS PROVIDE FUNDING POR  TIONAL AND SUPPORTIVE SERVICES TO DISABLED HOMELESS INDIVIDUALS AND  TRES ELIGIBLE TO LIVE IN 20 UNITS OF SCATTERED SITE TAX-CREDIT  CED PERMANNENT HOUSING AND HOMELESS INDIVIDUALS AND FAMILIES ELIGIBLE  WE IN 29 UNITS OF SCATTERED SITE TAX CREDIT FINANCED TRANSITIONAL.  NO IN MILWAUKEE, WISCONSIN.	<b>-</b>						
Supplemental Information. Complete this part to provide the information required in Part, line 2, and any other additional information. Complete this part to provide the information required in Part, line 2, and any other additional informational. INFORMAL AND SUPPORTIVE HOUSING PROGRAM GRANTS PROVIDE FUNDING FOR TIONAL AND SUPPORTIVE SERVICES TO DISABLED HOMELESS INDIVIDUALS AND TESS ELIGIBLE TO LIVE IN 20 UNITS OF SCATTERED SITE TAX CREDIT FINANCED TRANSITIONAL.  WE IN 29 UNITS OF SCATTERED SITE TAX CREDIT FINANCED TRANSITIONAL.  NO IN MILMAUREE, WISCONSIN.	۱ م	-					
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PERATIONAL AND SUPPORTIVE SERVICES TO DISABLED HOMELESS INDIVIDUALS AND TAX-CREDIT  THANCED PERMANENT HOUSING AND HOMELESS INDIVIDUALS AND FAMILIES ELIGIBLE O LIVE IN 29 UNITS OF SCATTERED SITE TAX, CREDIT FINANCED TRANSITIONAL OUSING IN MILWAUKEE, WISCONSIN.		1 -	: :	AM GRANTS E	ROVIDE FUNDIN	IG FOR	
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OUSING IN MILWAUKEE, WISCONSIN.		FINANCED PERMANENT HOUSING	AND HOMELESS	INDIVIDUALS	AND FAMILIES	ELIGIBLE	
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(i) Pooled Inencing OMB No. 1545-0047 2010 Open to Pul Inspection Employer Identification number 91-1884698 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, Supplemental Information on Tax-Exempt Bonds ➤ See separate instructions. ► Attach to Form 990. NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN Bond Issues Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE K (Form 990) Part

ŝ × (h) On behalf of Y 88 × (g) Defeased ş × × Yes (f) Description of purpose 21, 355, 000 CONSTRUCTION 16, 155, 000 CONSTRUCTION 101,035,000 CONSTRUCTION 37,840,000 CONSTRUCTION (e) issue price 20-205912138020YAW1 02/03/05 14-1742033650861AB3 11/17/05 91-187473d939783PX8 07/16/08 26-1159878881566AN3 02/12/09 (d) Date Issued (c) CUSIP # (b) Issuer EIN AGENCY C WASH. ST. HOUSING FINANCING COMM! B CITY OF NEWBURGH IND. DEV. (a) Issuer name D GOAT HILL PROPERTIES A TES PROPERTIES

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Proceeds								
		A	8	_	S		Q	
1 Amount of bonds retired		640,000	2,	2,205,000	2	20,000	9'9	6,675,000
defeased								
3 Total proceeds of issue								
4 Gross proceeds in reserve funds	3,	3,418,478			1,36	1,366,087		
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
	1,	1,158,609	1,	1,156,155	41	417,394	1,5	1,539,335
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds	1							
_	33,	33,262,913	20,	20,198,845	14,37	14,371,519	99,4	99,495,665
11 Other spent proceeds								
9								
letion –	20	2010	2007	07	2009	•	2007	7
	Yes	No	Yes	No	Yes	No No	Yes	No
14 Ware the bands issued as part of a current refunding issue?		×		X		×		×
15 Were the bonds issued as part of an advance refunding issue?		×		×		×		×
16 Has the final allocation of proceeds been made?		×	×			×	×	
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?		×	Х			×	×	
※Part訓練 Private Business Use				•		ŀ		
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Schedule K (Form 990) 2010

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Schedule K (Form 990) 2010 4,150,000 30,183 735,772 ş × (i) Pooled financing × 38,464,04 OMB No 1545-0047 2010 Open to Pub Inspection ŝ Employer Identification number 2005 Ñ (h) On behalf of 91-1884698 Yes Yes Yes × × × 윋 (g) Defeased × × × 2,679,306 1,265,069 185,775,625 Yes ş ş × × × 2009 O (f) Description of purpose Ϋ́ Yes ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part V. 19,035,000 CONSTRUCTION 189,720,000 CONSTRUCTION 39,230,000 CONSTRUCTION 78,275,000 CONSTRUCTION 22,280,000 73,286,368 4,988,632 Supplemental Information on Tax-Exempt Bonds ş ŝ × × 2007 ▼ See separate Instructions. Yes Yes × (e) issue price 2,305,000 2,437,835 1,303,213 15,293,952 일× ŝ ×× × × 2005 20-553591765486MAAS 12/05/06 26-007377575767LAR9 04/06/04 (d) Date Issued 13-395279314983NBD2 03/08/07 16-1214039890099CN2 12/01/03 Yes ¥88 & ECONOMIC DEVELOPMENT ► Attach to Form 990. (c) CUSIP# Does the organization maintain adequate books and records to support the final altocation of proceeds? Are there any lease arrangements that may result in private business use of RETURN (b) Issuer EIN Was the organization a partner in a partnership, or a member of an LLC, For Paperwork Reduction Act Notice, see the instructions for Form 990. 45 Were the bonds issued as part of an advance refunding issue? CORPORATION-GROUP 14 Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? 16 Has the final allocation of proceeds been made? NDC HODSING 8 Working capital expenditures from proceeds Private Business Use D REDMOND COMM PROPERTIES Capital expenditures from proceeds Credit enhancement from proceeds (a) Issuer neme Amount of bonds legally defeased 5 Capitalized interest from proceeds Gross proceeds in reserve funds TOMPKINS COUNTY IDA 6 Proceeds in refunding escrows CDP KING COUNTY III Issuance costs from proceeds Year of substantial completion **Bond Issues** Total proceeds of Issue Proceeds 12 Other unspent proceeds Amount of bonds retired bond-financed property? C NJB PROPERTIES Other spent proceeds Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE K (Form 990) Part Part Part

Open to Publi Inspection 2010 Employer identification number 91-1884698 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, Supplemental Information on Tax-Exempt Bonds ▶ See separate instructions. NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN ► Attach to Form 990. Bond Issues Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE K (Form 990)

**×**) 22,420,000 1,779,598 155,505,936 2,179,466 No. (i) Pooled financing × × × × × Yes 2008 Yes X × × (h) On behalf of Yes × Š (g) Defeased × × × 1,126,802 37,094,254 4,995,000 3,944 Yes 윈 × 2004 (i) Description of purpose Yes ×I × 17, 525, 000 CONSTRUCTION 56,805,000 CONSTRUCTION 38,225,000 CONSTRUCTION 159, 465, 000 CONSTRUCTION 2,880,000 593,279 56,211,721 위× 2005 8 Ş × × ecud enssi (e) 1,300,000 1,086,718 606,012 15,832,270 Ŷ × × × × 2006 AUTH. |91-1493002|93975WCB9| 11/29/05 | 20-074106289852NAA9 04/05/06 26-0073671899697AS5 01/22/04 C WASHINGTON ECONOMIC DEV. FIN. AUTH. 91-149300293975WAX3 08/19/04 (d) Date issued Yes (c) CUSIP # 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? (b) Issuer EIN 15 Were the bonds issued as part of an advance refunding issue? 14 Were the bonds issued as part of a current refunding issue? 16 Has the final allocation of proceeds been made? D WASHINGTON ECONOMIC DEV. PIN. Working capital expenditures from proceeds. B TUMWATER OFFICE PROPERTIES Partill Private Business Use Capital expenditures from proceeds Credit enhancement from proceeds (a) Issuer name Amount of bonds legally defeased Capitalized Interest from proceeds Gross proceeds in reserve funds Issuance costs from proceeds Amount of bonds retired 6 Proceeds in refunding escrows 13 Year of substantial completion 11 Other spent proceeds .... Other unspent proceeds Proceeds 3 Total proceeds of Issue A TEB PROPERTIES Partil Part

2 Are there any lease arrangements that may result in private business use of

For Paparwork Reduction Act Notice, see the instructions for Form 990.

bond-financed property?

1 Was the organization a partner in a partnership, or a member of an LLC,

which owned property financed by tax-exempt bonds?

Schedule K (Form 990) 2010

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Yes

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Yes

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Yes

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Yes

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Yes No (i) Pooled financing 2010 Open to Publi Employer Identification number ŝ (h) On behalf of Issuer 91-1884698 Yea Yes × × ş (g) Deteased × × Yes ş (f) Description of purpose Yes Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,
 explanations, and any additional information in Part V. 305,810,000 CONSTRUCTION 164,950,000 CONSTRUCTION 158,690,335 1,095,625 5,164,040 Supplemental Information on Tax-Exempt Bonds å XX × ➤ See separate instructions. Ø **7**68 eoud ensst (e) 152,903,982 148,953,756 3,952,262 × × 27-304253d93730PAK2 12/01/10 08/13/09 (d) Date Issued ¥88 ► Attach to Form 990. NDC HOUSING & ECONOMIC DEVELOPMENT 26-2473717302716AU9 (c) CUSIP Does the organization maintain adequate books and records to support the final allocation of proceeds? CORPORATION-GROUP RETURN (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? 14 Were the bonds issued as part of a current refunding issue? B WASHINGTON BIOMEDICAL RES. FAC. 16 Has the final ellocation of proceeds been made? Other unspent proceeds Working capital expenditures from proceeds Private Business Use 8 Credit enhancement from proceeds Capital expenditures from proceeds Amount of bonds legally defeased, Capitalized interest from proceeds (a) lasuer name 4 Gross proceeds in reserve funds 6 Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion **Bond Issues** 1 Amount of bonds retired Proceeds Total proceeds of issue A FYI PROPERTIES 11 Other spent proceeds Department of the Treasury niemal Revenue Service Name of the organization SCHEDULE K Part H Part (Form 990)

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Schedule K (Form 990) 2010 Yes ŝ Yes ş M 0 g 윈× × ğ Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? bond-financed property?

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For Paparwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2010 NDC HOUSING &	ECONOMIC	DEVELOPMENT	91	-1884698					Page 2
Paris Private business Use (Continued	7	-	A		8	S		٥	
3a Are there any management or service contracts that may result in private	t may result in private	Yes		Yes	No	Yes	No	Yes	No
business use of bond-financed property?		-	×		×		×		×
b Are there any research agreements that may result in private business hand financed namedy?	in private business use of	~	×		×		×		×
c Does the organization routinely engage bond counsel or other outside	el orjother outside								
counsel to review any management or service contracts or research	acts or research				;		;		>
- 1		-	×		×		×		×
4 Enter the percentage of financed property used in a private business use by	private business use by								•
entities other than a section 501(c)(3) organization of a state of tocal	or a state or local		76		%		*		ð
government			ę.		5		*		
	on hy voir organization								
another section 501(c)(3) omanization, or a state or local government	local government		*		%	i	%		%
1			*		%		%		*
7 Has the organization adopted management practices and procedures to	es and procedures to								;
힑	npt bond liabilities?	·	×		×		×		×
Part IV Arbitrage									
		1	A	ł	8		U-		۱
1 Has a Form 8036-T, Arbitrage Rebate, Yield Reduction and Penathy in I	tion and Penalty in Lieu of	Yes	No	Yes	N <sub>O</sub>	Yes	No.	Yes	2
Arbitrage Rebate, been filed with respect to the bond issue?	d Issue?		×		×		×		×
2 is the bond issue a variable rate issue?			×		×		×		×
3a Has the organization or the governmental issuer entered into a qualified	tered into a qualified	_							
hedge with respect to the bond issue?		-	×		×		×		×
b Name of provider		-							
c Term of hedge									
d Was the hedge superintegrated?	***************************************								
e Was the hedge terminated?					,		,		,
4a Were gross proceeds invested in a GIC7		_	×		×		×		×
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d. Was the regulatory safe harbor for establishing the fair market value of	fair market value of the								
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1	97		×		×		×		×
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Part V Supplemental Information. Complete this pa	omplete this part to prov	ride addition	nal informatic	n for respo	nses to dues	tions on Sci	hedule K (se	rt to provide additional information for responses to questions on Schedule K (see instructions)	.(S)
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		-						Schedule K (F	Schedule K (Form 990) 2010
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Schedule K (Form 990) 2010 NDC HOUSING & ECONOMIC DEVE	DEVELOPMENT	91-1	884698					Page 2
	,	A	)	8		C		0
3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	No	Yes	No
business use of bond-financed property?		x		×		×		×
b Are there any research agreements that may result in private business use of	<u> </u>	*		×		*		*
c Does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts or research		1				•		;
agreements relating to the financed property?		×		×		×		×
4 Enter the percentage of financed property used in a private business use by	_							٠
entities other than a section 501(c)(3) organization or a state or local	_	•		1		3		3
government	-	*		\$		*		R
result of unrelated trade or business activity carried on by your organization,								•
another section 501(c)(3) organization, or a state or local government		%		%		8		*
6 Total of lines 4 and 5	-	%	,	%		%		*
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ensure the post-issuance compliance of its tax-exempt bond liabilities?	-	<b>*</b>		<	į	<b>4</b>		4
	-	A		8		ပ		
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes		Yes		Yes	No	Yes	No
Arbitrage Rebate, been filed with respect to the bond issue?		×		×		x		X
2 Is the bond issue a variable rate issue?		×		×		X		×
hedge with respect to the bond issue?		×		×		×		×
b Name of provider	1							
c Term of hedge	_							
d Was the hedge superintegrated?								
e Was the hedge terminated?	-							
4a Were gross proceeds invested in a GIC?		×		×		×		×
b Name of provider								-
c Term of GIC.								
d Was the regulatory safe harbor for establishing the fair market value of the							·	
SUBSTRUCT CONTRACT Invested havened an available farmonary native?		×		×		×		×
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Partiv Supplemental Information. Complete this part to provide		additional information for responses to questions	n for respor	ses to dues	tions on Sc	on Schedule K (see instructions)	e Instruction	JS).
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Schedule K (Form 990) 2010 NDC HOUSING &	ECONOMIC	DEVELOPMENT	91	-1884698					Page 2
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3a Are there any management or service contracts that may result in private	t may result in private	Yës		Yes	γ°	Yes	No	Yes	No
business use of bond-financed property?			×		×		×		×
b Are there any research agreements that may result in private business bond-financed property?	in private business use of		×		×		×		×
c Does the organization routinely engage bond counsel or other outside	el or other outside				_				
counsel to review any management or service contracts or research	acts or research	<b></b> .	×	-	×		×		×
4 Enter the percentage of financed property used in a private business use by	private business use by								•
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another section 501(c)(3) organization, or a state or local government	local government	-	%		8		%		8
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STATE OF POSICES CHARGE COMPILATOR OF ITS (BX-EXPEND) DONG ITS DIRECT OF THE STATE	npr pond liabilities (								
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1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in	lon and Penalty in Lieu of	Yes	No	Yes	No No	Yes	No	Yes	02
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2 Is the bond issue a variable rate issue?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		×		×		×		×
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hedge with respect to the bond issue?			×		×		×		×
b Name of provider		_							
d Was the hedge superintegrated?									
e Was the hedge terminated?									
4a Were gross proceeds invested in a GIC?			×		×		×		×
b Name of provider									
c Term of GIC		-							
d Was the regulatory safe harbor for establishing the fair market value of	fair market value of the								
1	140 to 100	×		×		×		×	
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o Did the bond issue quanty for an exception to repate f									
Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions)	omplete this part to prov	ride addition	al informatio	n for respor	ses to dues	tions on Scl	nedule K (se	e instruction	S).
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Schedule K (Form 990) 2010 NDC HOUSING & EC	ECONOMIC DEV	DEVELOPMENT	91-	1884698					Pege 2
Part II Private Business Use (Continued)		-							
			A	8			S		0
3a Are there any management or service contracts that may result in private	ssult in private	Yes	No	Yes	Š	Yes	No	Yes	No
business use of bond-financed property?		}	X		X				
b Are there any research agreements that may result in private business us	le business use of	_	_						
bond-financed property?	*******	-	×		×				
c Does the organization routinely engage bond counsel or other outside	ner outside								•
counsel to review any management or service contracts or research	research								
agreements relating to the financed property?	*****		×		×				
4 Enter the percentage of financed property used in a private business use	business use by								•
entities other than a section 501(c)(3) organization or a state or local	e or local								
government		-	%		%		%		%
5 Enter the percentage of financed property used in a private business use	business use as a								•
mesuli of unrelated teads or business addition and by your once of pation		_							
another section 501(c)(3) organization or a state or local government	wernment •		*		-8		%		*
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1 Has a Form 8038-T. Arbitrage Rebate Yield Reduction and Penalty in Lieu	Penalty in Lieu of	Yes	No	Yes	ž	\$88,X	οχ	Yes	S.
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Z is the bond issue a variable rate issue?	*************		4		4			-	
3a Has the organization or the governmental issuer entered into a qualified	to a qualified		}		}				
hedge with respect to the bond issue?	***************************************	-	×		×				
b Name of provider	***								
c Term of hedge		_							
d Was the hedge superintegrated?									
4a Were gross proceeds invested in a GIC?		-	×		×				
b Name of provider									
c Term of GIC		-							
1	ket value of the								
5 Were any gross proceeds invested beyond an available lemborary period	nporary period?	-	X		×				
6 Did the bond issue qualify for an exception to rebate?			×		×				
ı									
Part V Supplemental Information. Complete this part	e this part to provide		additional information for responses to questions on Schedule K (see instructions)	n for respon	ses to aues	ions on Sc	hedule K (se	e instruction	ns).
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### SCHEDULE O (Form 990 or 990-E2)

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 2010

Department of the Treasury Internal Revenue Service

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

Open to Public

Name of the organization

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES HEDC'S THREE PRIMARY EXEMPT PURPOSES ARE: A. TO CONSTRUCT NEW LOW INCOME HOUSING AND TO DEVELOP, MANAGE, OPERATE, PROMOTE, FUND, AND SUPPORT EXISTING LOW INCOME HOUSING FOR PERSONS OF LIMITED FINANCIAL MEANS, HANDICAPPED PERSONS, ELDERLY PERSONS, AND OTHER PERSONS IN NEED OF SAFE ADEQUATE AFFORDABLE HOUSING AND TO ASSIST GENERALLY IN THE ALLEVIATION OF HOUSING SHORTAGES THROUGHOUT THE US. B. TO ASSIST IN THE ERECTION AND MAINTENANCE OF PUBLIC BUILDINGS, MONUMENTS, PACILITIES, OR WORKS TO LESSEN THE BURDENS OF GOVERNMENT AND TO PROMOTE SOCIAL WELFARE. C. TO INITIATE AND CARRY OUT ACTIVITIES TO STIMULATE ECONOMIC DEVELOPMENT IN THE ECONOMICALLY DEPRESSED AREAS OF THE US. IN PARTICULAR, TO UNDERTAKE

- \* RELIEVE POVERTY AND LESSEN NEIGHBORHOOD-TENSION CAUSED BY A LACK OF JOBS IN DETERIORATED AND DEPRESSED AREAS BY PROVIDING TRAINING OPPORTUNITIES FOR THE UNEMPLOYED AND CREATING JOB OPPORTUNITIES FOR DISADVANTAGED GROUPS.
- \*\_COMBAT COMMUNITY DETERIORATION AND ELIMINATE BLIGHT BY UNDERTAKING ACTIVITIES THAT STIMULATE THE ESTABLISHMENT OF NEW BUSINESSES—AMONG DISADVANTAGED GROUPS AND WHICH REHABILITATE AND REVIVE EXISTING BUSINESSES OPERATED BY DISADVANTAGED GROUPS

FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT

LOW INCOME HOUSING

ACTIVITIES THAT:

HEDC IS A NATIONAL LEADER IN LOW INCOME HOUSING THROUGH BOTH DEVELOPMENT

Name of the grounization

NDC HOUSING & ECONOMIC DEVELOPMENT

Employer Identification number

91-1884698

AND INVESTMENT. WORKING IN PARTNERSHIP WITH NONPROFIT ORGANIZATIONS AND SERVICE PROVIDERS AROUND THE NATION, HEDC HAS DEVELOPED, FINANCED, OPERATED, AND/OR MANAGED A TOTAL OF 7,600 UNITS OF QUALITY, SAFE, ADEQUATE, AND AFFORDABLE LOW INCOME HOUSING TOTALING \$890 MILLION OF INVESTMENT IN LOW INCOME COMMUNITIES IN 27 STATES ACROSS THE NATION.

IN 2010 THROUGH OUR LOW INCOME HOUSING DEVELOPMENT AND INVESTMENT

ACTIVITIES, HEDC CONSTRUCTED OR RENOVATED 278 UNITS OF QUALITY, SAFE,

ADEQUATE, AND AFFORDABLE HOUSING FOR LOW INCOME PERSONS AND FAMILIES, THE

ELDERLY, AND PEOPLE WITH SPECIAL NEEDS. INVESTMENT AND DEVELOPMENT

ACTIVITIES TOTALED \$28 MILLION IN 6 STATES ACROSS THE NATION.

THE FOLLOWING IS A SAMPLING OF HEDC AFFORDABLE PROJECTS COMPLETED IN 2010:

\*IN WATERTOWN, NEW YORK HEDC COMPLETED THE RESTORATION OF THE FRANKLIN
BUILDING IN THIS NORTHERN NEW YORK STATE-CITY.—THE-36,000 SQUARE FOOT,
THREE-STORY BUILDING, SITUATED ON THE CITY'S PUBLIC SQUARE WAS BUILT IN
1904 AS A RETAIL ARCADE AND LATER USED FOR YEARS BY THE YWCA. THE YWCA
MOVED OUT IN THE LATE 1990S, LEAVING THE BUILDING VACANT AND EVENTUALLY IN
A STATE OF DECAY.

THROUGH A COLLABORATION OF SEVERAL LOCAL, STATE, FEDERAL AND PRIVATE

NOT-FOR PROFIT AGENCIES, THE FRANKLIN BUILDING WAS RESTORED TO ECONOMIC

ACTIVITY AND HOLDS IT'S PLACE AS THE BUILDING RETAINS ITS PRIMARY AND

SECONDARY FACADES AND CONTRIBUTES SIGNIFICANTLY TO THE INTEGRITY OF THE

PUBLIC SQUARE NATIONAL REGISTER HISTORIC DISTRICT.

NDC HOUSING & ECONOMIC DEVELOPMENT

Employer Identification number 91-1884698

THIS FORMERLY BLIGHTED AND VACANT BUILDING IS NOW A FISCALLY SOUND,

MIXED-USE FACILITY, WITH SIXTEEN APARTMENTS FOR LOW-INCOME RESIDENTS, AND

13,000 SQUARE FEET OF GROUND FLOOR COMMERCIAL SPACE. THE CITY OF WATERTOWN

NOT ONLY GAINED COMMERCIAL SPACE AND AFFORDABLE HOUSING IN A TIGHT MARKET

IT WAS ABLE TO RESTORE A PIECE OF HISTORY IN THE HEART OF IT'S DOWNTOWN

WHICH CONTINUES TO BE A FOCUS OF ECONOMIC REVITALIZATION.

\*IN SEATTLE, WASHINGTON NDC COMPLETED A 51 UNIT APARTMENT AND TOWNHOME

DEVELOPMENT FOR FORMERLY HOMELESS FAMILIES. THE PROJECT LOCATED ON THE

FORMER SAND POINT NAVAL AIR STATION, BRETTLER FAMILY PLACE IS PART OF AN

EXTRAORDINARY COMMUNITY-BUILDING INITIATIVE TO PROVIDE AFFORDABLE HOUSING,

SUPPORTIVE SERVICES AND COMMUNITY FACILITIES IN ONE OF SEATTLE'S MOST

BEAUTIFUL AREAS, BORDERING MAGNUSON PARK AND OVERLOOKING LAKE WASHINGTON.

TO DATE, MORE THAN 30 FAMILIES HAVE MOVED INTO BRETTLER FAMILY PLACE.

CONTINUED DEVELOPMENT INCLUDES AN ADDITIONAL—54-UNITS, 20 FOR FAMILIES AND

34 FOR SINGLE MEN AND WOMEN, INCLUDING VETERAN, SENIORS AND PEOPLE LIVING

WITH DISABILITIES.

WHEN COMPLETE, THE SAND POINT HOUSING ZONE WILL COMPRISE 200 UNITS. HEDC CONTINUES TO WORK WITH THE CITY OF SEATTLE AND THE LOCAL NON-PROFITS TO ADDRESS THE FURTHER DEVELOPMENT OF AFFORDABLE HOUSING FOR THE LOW INCOME AND HOMELESS POPULATIONS.

FORM 990, PART III, LINE 4B - SECOND ACHIEVEMENT

LESSENING THE BURDENS OF GOVERMENT

HEDC ALSO PARTNERS WITH UNITS OF LOCAL GOVERNMENT TO ERECT AND MAINTAIN

THE PROCESSING OF MILLIONS OF BUSINESS TRANSACTIONS EVERY DAY FOR WASHINGTON'S RESIDENTS, BUSINESSES AND STATE AGENCIES - IN SOCIAL SERVICE, EMPLOYMENT, CORRECTIONS, LICENSING, FINANCE, RETIREMENT SYSTEMS, HEALTHCARE AND NATURAL RESOURCES.

\*THE CENTER FOR URBAN WATERS - TACOMA, WASHINGTON

THE CENTER FOR URBAN WATERS A 51,205 SQUARE FOOT, THREE-STORY BUILDING
FUNCTIONS AS A SHARED RESEARCH FACILITY FOR THE CITY OF TACOMA, UNIVERSITY
OF WASHINGTON AND THE PUGET SOUND PARTNERSHIP, A NOT-FOR-PROFIT WITH A
MISSION TO CLEAN UP PUGET SOUND. THE BUILDING IS A WORLD-CLASS
STATE-OF-THE-ART MARINE RESEARCH AND TESTING LABORATORY THAT HOUSES
GOVERNMENT AND NON-PROFIT GROUPS THAT COLLABORATE ON THE POLLUTION PROBLEMS
FACING URBAN COMMUNITIES. THE CENTER HAD BEEN IN THE PLANNING STAGES FOR
MANY YEARS. THE CITY OF TACOMA LOOKED TO HEDC TO GET THIS CRITICAL PROJECT
BUILT. THE PROJECT WAS DESIGNED AND BUILT IN A SHORT 18 MONTHS. SEEN FROM
THE TACOMA DOWNTOWN CORE, THE BUILDING IS CONSTRUCTED ON A BROWNFIELD SITE
AND IS A BEACON OF POSSIBILITY IN AN INDUSTRIAL NEIGHBORHOOD.

FORM 990, PART III, LINE 4C - THIRD ACHIEVEMENT

STIMULATE ECONOMIC DEVELOPMENT IN ECONOMICALLY DEPRESSED AREAS.

HEDC WORKS WITH NONPROFIT ORGANIZATIONS AND SERVICE PROVIDERS AND UNITS OF

LOCAL GOVERNMENT TO STIMULATE ECONOMIC DEVELOPMENT—IN- THE ECONOMICALLY

DEPRESSED NEIGHBORHOODS ACROSS THE NATION. WORKING THROUGH THE NEW MARKETS

TAX CREDIT PROGRAM AND WITH OTHER FINANCING, HEDC CREATES EMPLOYMENT AND

ENTREPRENEURIAL OPPORTUNITIES FOR DISADVANTAGED GROUPS AND INDIVIDUALS,

COMBATS COMMUNITY DETERIORATION, AND ELIMINATES SLUM AND BLIGHT THROUGH NEW

INVESTMENT IN LOW INCOME COMMUNITIES TO REHABILITATE AND REVITALIZE

UNDER THE NEW MARKETS TAX CREDIT PROGRAM, HEDC HAS SPONSORED 67 PROJECTS
TOTALING OVER \$1 BILLION OF NEW INVESTMENT, CREATED OVER 4,900 PERMANENT
JOBS FOR DISADVANTAGED INDIVIDUALS, AND BROUGHT BADLY NEEDED GOODS AND
SERVICES TO LOW INCOME COMMUNITIES.

NEIGHBORHOODS.

NDC HOUSING & ECONOMIC DEVELOPMENT

Employer identification number 91-1884698

IN 2010, USING NEW MARKETS TAX CREDITS AND OTHER FINANCING, HEDC COMPLETED

13 PROJECTS TOTALING \$290 MILLION OF INVESTMENT. THESE PROJECTS CREATED

2,200 JOBS FOR DISADVANTAGED INDIVIDUALS, AND OFFERED ENTREPRENEURIAL

OPPORTUNITIES TO DISADVANTAGED INDIVIDUALS.

HIGHLIGHTS OF HEDC PROJECTS THAT CLOSED IN 2010 INCLUDED:

\*THE ED ROBERTS CAMPUS - BERKELEY, CA

THE ED ROBERTS CAMPUS IS A 78,677 SQUARE FOOT TWO STORY CONCRETE AND STEEL OFFICE BUILDING WITH APPROXIMATELY 67,350 SQUARE FEET OF RENTABLE SPACE.

THE CAMPUS IS NAMED AFTER EDWARD V. ROBERTS (1939-1995), AN EARLY LEADER IN THE INDEPENDENT LIVING MOVEMENT OF PERSONS WITH DISABILITIES.

THE ED ROBERTS CAMPUS IS A CLUSTER OF A RANGE OF DISABILITY SERVICES IN ONE LOCATION AND PROVIDES CONVENIENT, EASY ACCESS VIA PUBLIC TRANSPORTATION. IT ENCOURAGES COLLABORATION AMONG THE PARTNER ORGANIZATIONS THAT RESULTED IN IMPROVEMENT TO SERVICES AND MORE EFFECTIVE SERVICE DELIVERIES. THE ED ROBERTS CAMPUS NURTURES THE INTEREST OF THE ORGANIZATIONS IN SHARING RESOURCES AND PROVIDING MUTUAL SUPPORT, ELIMINATING DUPLICATION AND DEVELOPING NEW, COLLABORATIVE PROGRAMS.

LOCATED AT THE EASTERN EDGE OF THE ASHBY BART STATION IN BERKELEY,

CALIFORNIA, THE BUILDING IS UNIVERSALLY DESIGNED AND A TRANSIT-ORIENTED

MULTI-USE FACILITY THAT INCORPORATES EXHIBITION SPACE, COMMUNITY MEETING

ROOMS, A CHILD DEVELOPMENT CENTER, FITNESS CENTER, VOCATIONAL TRAINING

FACILITIES AND A CAFÉ AS WELL AS OFFICE SPACE.

HEDC PROVIDED NMTC ALLOCATIONS TO PROVIDE FUNDING NECESSARY TO COMPLETE THE WARM SHELL BUILDING AND TENANT IMPROVEMENTS NECESSARY FOR BOTH THE ORIGINAL PARTNER ORGANIZATIONS AND OTHER PROSPECTIVE TENANTS FOR THE CENTER. THIS RESULTED IN 300 FTE JOBS CREATED AS WELL AS ANOTHER 35 FTE CONSTRUCTION JOBS NEEDED IN THE COMMUNITY.

IN ADDITION TO THE 7 NON-PROFIT PARTNERS THE BUILDING WILL ALSO INCLUDE A CHILD DEVELOPMENT CENTER, A FITNESS CENTER, A VOCATIONAL TRAINING CENTER, A CAFÉ, ADDITIONAL OFFICE SPACE, EXHIBITION SPACE AND COMMUNITY MEETING ROOMS.

\*WEIDMANN ELECTRICAL TECHNOLOGY INC. - ST JOHNSBURY, VT
WEIDMANN ELECTRICAL TECHNOLOGY INC. (WETI), A GLOBAL LEADER IN ELECTRICAL
INSULATION FOR TRANSFORMER MANUFACTURERS AND TRANSFORMER USERS, LOCATED IN
ST. JOHNSBURY, IN VERMONT'S REMOTE AND SPARSELY-POPULATED NORTHEAST KINGDOM
(DESIGNATED AS A USDA RURAL AREA ECONOMIC PARTNERSHIP AND ELIGIBLE FOR
STATE TAX CREDITS FOR MANUFACTURING). WETI AND THE NORTHERN COMMUNITY
INVESTMENT CORPORATION (NCIC) REQUESTED A NMTC ALLOCATION FOR THE
ACQUISITION AND INSTALLATION OF "DRY-END" TRANSFORMER PAPERBOARD MACHINES
AND CONSTRUCTION OF A 24,338 SQUARE FOOT EXPANSION TO HOUSE THE MACHINERY,
SUBSTANTIALLY IMPROVING THE COMPANY'S PRODUCTION CAPACITY AND QUALITY.

THE INVESTMENT RESULTED IN THE CREATION OF 60 FULL-TIME EQUIVALENT (FTE)

CONSTRUCTION JOBS AND THE RETENTION OF 270 FTE JOBS IN A RURAL AREA THAT

HAS EXPERIENCED SIGNIFICANT JOB LOSS (OVER 3,200 JOBS LOST IN THE LAST

DECADE IN A REGION WITH A POPULATION OF 39,656). WITHOUT NMTC, THE COMPANY

SERVICES IN VERMONT EACH YEAR.

AVAILABLE ON WWW.GUIDESTAR.ORG.

Employer identification number 91-1884698

WOULD HAVE LIKELY PLACED THE NEW EQUIPMENT IN ANOTHER OF THEIR

INTERNATIONAL LOCATIONS (SWITZERLAND, UKRAINE, OR CHINA). WETI HAS A

THIRTY-YEAR RECORD OF DIRECT SALARY AND WAGES PAID OF OVER A THIRD OF A

BILLION DOLLARS, AND PURCHASES APPROXIMATELY \$4.0 MILLION OF GOODS AND

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE ORGANIZATIONS PROCESS IS TO SEND OUT FORM 990, IN ADVANCE OF FILING,
TO THE BOARD INVITING THEM TO MAKE QUESTIONS AND COMMENTS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY ALL MEMBERS OF THE HEDC BOARD OF DIRECTORS AND STAFF ARE REQUIRED TO ANNUALLY EXECUTE A CONFLICT OF INTEREST AND COMPENSATION GUIDELINES ACKNOWLEDGEMENT STATING THAT THEY HAVE RECEIVED, READ AND UNDERSTAND, AND AGREE TO COMPLY WITH THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES. THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES-REQUIRE BOARD AND STAFF MEMBERS TO DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST IMMEDIATELY. THE CHAIRPERSON OF THE BOARD WILL UPON NOTIFICATION OF SUCH AN EVENT APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE-PROPOSED\_TRANSACTION. VIOLATIONS OF THE CONFLICT OF INTEREST POLICY CAN RESULT IN APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION. ALSO, ALL BOARD MEMBERS BY EXECUTING THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES ACKNOWLEDGE THAT THEY SHARE THE RESPONSIBILITY OF HEDC TO REMAIN FAITHFUL TO THE ORGANIZATIONS' CHARITABLE PURPOSES. FORM 990, PART VI, LINE 18 FORM 1023 & 990 ARE MADE AVAILABLE UPON REQUEST. FORM 990 IS MADE

Name of the organization  NDC HOUSING & ECONOMIC DEVELOPMENT	Employer Identification number 91-1884698
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS	DISCLOSURE EXPLANATION
HEDC VOLUNTARILY MAKES AVAILABLE ITS GOVERNING DO	CUMENTS UPON REASONABLE
REQUEST.	
PARK ANA RIPE WE LEVE E APPER ANNUAR IN NOR	ACCOMO PURA NUMBON
FORM 990, PART XI, LINE 5 - OTHER CHANGES IN NET	
UNREALIZED LOSS	41,025
UNREALIZED LOSS ON INTEREST RATE SWAP	583,271
BAD DEBTS PROVISION INCREASE	40,595
MISCELLANEOUS ROUNDING	<u>1</u>
TOTAL	664,892
·	
	Schedule O (Form 990 or 990-EZ) (2010)

91-1884698	•	· F	ederal Stat	ements							
Taxable Interest on Investments											
Descrip	tion						_				
		nount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)				
INTEREST ON SAVI	NGS	572,342									
TOTAL		572,342									
				- <del></del>		<u> </u>					

Forms 990-PF	Oth		nd Loans Receiv	able	2010	)
Name			<u> </u>		mployer Identification Nu	ımber
NDC HOUSING &	ECONOMIC DEVE	LOPMENT		_	1-1884698	
CORPORATION-C	SKOUP KETURN	<del> </del>			1-1884098	
FORM 990, PAI	RT X, LINE 7 -	ADDITIONA	L INFORMATIO	N		
	Name of borrower ADVANCES RECEIV	ABLE		Relationship to disqua	lified person	
(2)						
(3)						
(4)						
<u>(5)</u> <u>(6)</u>		<del></del>			<u> </u>	
(7)				······································		
(8)						
(9)						
(10)	nang sang sang panggan panggan ng Kaba					
011				72.083.505 N. 187 T. 188		
Onginal amount borrowed	Date of toan	Maturity date	Re	payment terms	Intere rate	
(1)						
(2)						
(3)						
( <del>4</del> ) ( <del>5</del> )	<del></del>					
(6)						
(7)						
(8)						
(9)						
(10)						(
				<del></del>		onass enas
Sec	curity provided by borrower			Purpose of loa	an	
(1)						
(2)		<del></del>				
(3)		<del></del>	<del></del>			
(5)	<del></del>		···			<del></del>
(6)						
(7)						
(8)				<u> </u>	<del></del>	-==
(9) (10)		· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del> :		
	Al a francisco de la colonia		Balance due at	Balance due at	Fair market valu	
	ation furnished by lender		beginning of year 47,553,159	end of year 46,236,44	(890-PF only)	<u> </u>
(1)			,,	10/230/11		
(3)						
(4)						
(5)						
(6)						
(7) (8)	·					
(9)	- <del> </del>			· <del>- · · · · · · · · · · · · · · · · · · </del>		
(10)						
Totals			47,553,159	46,236,44	7	

	Form 990	1	Tax-Exempt Bo	nd Liabilities			2010
	<del></del>	For calendar year 2010, or to	ax year beginning		and ending		
	DC HOUSIN	IG & ECONOMIC DEVI	ELOPMENT				er Identification Number
_ <u>C</u>	ORPORATIO	N-GROUP RETURN				91-1	884698
_F	ORM 990,	PART X, LINE 20	- ADDITIONAL	INFORMATIO	אכ		
		Name of lender	,		Purpose o	f issue	
(1)	TES PROP	YERTIES NEWBURGH IND. DE	7 ACENCY	<u> </u>	<del></del>		
(2) (3)	WASH. ST						······
(4)		L PROPERTIES					······································
(5)		COUNTY IDA					
<u>(6)</u>		COUNTY III					
<u>(7)</u>	NJB PROP	COMM PROPERTIES	·		<del></del>		
(8) (9)	TSB PROP			<u> </u>			
(10)		OFFICE PROPERTI	ES				
	Issue date	Original amount of issue	Form 8038 filed: Y/N Date filed	Date retire	Completio of project		Unexpended bond proceeds
<u>(1)</u>	02/12/09		N				
(2)_	11/17/05		N				
(3)	07/16/08 02/03/05		N N				
(4) (5)	12/01/03		N			<del>+</del>	
(6)	03/08/07		N				
(7)	12/05/06		N				
(8)	04/06/04		N_				
(9)	04/05/06		N				
(10)	01/22/04	56,805,000	N				
26230	Third nach:	Maturity					Interest
	Third party use percent	date		Repayment term	8		rate
(1)							
(2)			<del></del>				
(3)							· · · - · · · · · · · · · · · · · · · ·
(4) (5)							<del></del>
(6)			.				
(7)							
<u>(8)</u>							
(9)	<del></del>		<u> </u>	<del></del>			
(10)							
80.2003		Security provided by t	O CTOWN I		Amount outstan		Amount outstanding at end of year
<u>(1)</u>		Geomity provided by a	/V.(14110)		37,840,		37,200,000
(2)					19,790,	000	19,150,000
(3)					16,155,		16,135,000
(4)					96,695,		94,360,000
(5)			······································		17,310, 58,670,		16,730,000 55,995,000
<u>(6)</u>				<del></del>	189,720,		189,720,000
(7)_ (8)_	<del></del>				36,160,		35,080,000
(9)					16,570,	000	16,225,000
(10)					54,875,		53,925,000
Tota	ls			<u></u> _l	543,785,	000	534,520,000

	·	· · · · · · · · · · · · · · · · · · ·	ax-Exempt Bon	d Liabilities	<del> </del>		
F	orm 990		•				2010
Nes-		For calendar year 2010, or tax	year beginning	<del></del>	and ending	-	Adamata Adam
Namı MI		G & ECONOMIC DEVE	I.OPMENT			Employer	Identification Number
		N-GROUP RETURN	mat litili t			91-18	84698
			· · · · · · · · · · · · · · · · · · ·	<del></del>			<u> </u>
F	ORM 990,	PART X, LINE 20 -	ADDITIONAL	INFORMATIO	)N	<del>-</del> :	
		Name of lender	•		Purpose o	f issue	
(1)	WASHINGT						
(2)_			FIN. AUTH.				
(3)		OFFICE PROPERTIE	<del></del>	· · · · · · · · · · · · · · · · · · ·			
(4)		Y DEVELOPMENT PRO	PERTIES C-D				
(5)		COURT PROPERTIES	DMTEC				
<u>(6)</u>		IFTH AVENUE PROPE SYRACUSE IND. DEV					<del></del>
(7) (8)		PS PARKWAY PROPER				<del></del>	
(8) (9)	FYI PROP				<del></del>		<del></del>
(10)		ON BIOMEDICAL RES	. FAC. 3				
		Original amount	Form 8038 filed:		Completio	n date	Unexpended
	Issue date	of issue	Y/N Date filed	Date retired			bond proceeds
(1)	08/19/04	38,225,000	N				
(2)	11/29/05	159,465,000	N				
(3)	10/30/02	62,540,000	N	<del>_</del>			
<u>(4)</u>	10/24/96	7,385,000	N				
(5)	09/01/00		N .		<del></del>	<del></del>	
<u>(6)</u>	03/01/02 04/30/91	34,085,000 12,000,000	N N	<del>-</del>			
(7) (B)	04/30/31	17,000,000	N		<del></del>	<del>-  </del>	
(8) (9)	08/13/09		N	<del>-</del>			
(10)	12/01/10		N				
W		1 20173307300	1				
20020	Third party	Maturity					
	use percent	date	<u>.</u>	Repayment terms	в		interest
<u>(1)</u>							
(2)							
(3)							<u> </u>
(4)					<del></del>		
(5)	<del></del> _						
<u>(6)</u>		-					
<u>(7)</u>			<u> </u>				<del></del>
(8)			<del> </del>			<del></del>	
(9) (10)	<del> </del>	<del></del>	<del> </del>			<del>-  </del> -	
		1					
5000 500	2 ( 20, 2 - 0,000 )		777 - 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		America code	ding	America - Anton Marie - Anton
		Security provided by bo	rrower		Amount outstan at beginning of		Amount outstanding at end of year
(1)					34,330,		33,230,000
(2)					141,050,	000	137,045,000
(3)					57,370,		55,915,000
(4)			···		5,755,		5,565,000
<u>(5)</u>					49,480,		48,660,000
(6)					31,920,	000	31,340,000
<u>(7)</u>					6,780,	000	6,210,000
(8)			<del></del>		17,000, 305,810,		17,000,000
(9) (10)					303,810,		305,810,000 164,950,000
Tota				·	649,495,		805,725,000

948.896

Z,\*

	Statement 1 - Form 990, Page 1, Line H(t	b) - Af	Illiated (	Group	Return	Line H(b) - Affiliated Group Return Information	
	Business Name			,	Address		EIN
	COMMINITY DEVELOPMENT PARTMERS, INC.	708	THIRD	AVE,	SUITE	710	03-0453754
	DEVELOPMENT PROPERTIES	708	_	AVE,	SUITE	710	-359861
	DEVELOPMENT PROPERTIES	708	THIRD	AVE,	SUITE	710	20-3944397
	DEVELOPMENT PROPERTIES 24TH ST.,	108	THIRD	AVE,	SUITE	710	6-154039
	DEVELOPMENT PROPERTIES ABILENE, I	708	THIRD	AVE,	SUITE	. 012	
	DEVELOPMENT PROPERTIES ALABAMA,	708	THIRD	AVE,	SUITE	710	-098314
	DEVELOPMENT PROPERTIES ANCHORAGE	708	THIRD	AVE,	SUITE	710	-386862
	PROP. ARTLOFT HOUSING DEV. FUND (	708	THIRD	AVE,	SUITE	710	-408793
	DEVELOPMENT PROPERTIES ART SPACE, INC	708	THIRD	AVE,	SUITE	710	-436708
	DEVELOPMENT PROPERTIES ATLANTA, IN	708	THIRD	AVE,	SUITE	710	-245188
	DEVELOPMENT PROPERTIES BEAUMONT,	708	THIRD	AVE,	SUITE	710	710
	DEVELOPMENT PROPERTIES	708	THIRD	AVE,	SULTE	710	-358459
	OFFICE PROPERTIES	708	THIRD	AVE,	SUITE	710	-383743
	COMMUNITY DEVELOPMENT PROPERTIES BRONX, INC.	708	THIRD	AVE,	SUITE	710	-394312
	COMMUNITY DEVELOPMENT PROPERTIES CANON CITY, INC.	708	_	AVE,	SUITE	710	20-1794523
	COMMUNITY DEVELOPMENT PROPERTIES CARVER, INC.	708		AVE,	SULTE	710	-295882
	COMMUNITY DEVELOPMENT PROPERTIES CD, INC.	708	THIRD	AVE,	SUITE	710	-387741
_	PROPERTIES	708	THIRD	AVE,	SUITE	710	-396825
	NTON C	708	THIRD	AVE,	SUITE	710	-115151
	н	708	THIRD	AVE,	SUITE	710	-109160
	COMMUNITY DEVELOPMENT PROPERTIES CORNELL, INC.	708	THIRD	AVE,	SULTE	710	ı
	H	708	THIRD	AVE,	SULTE	710	-388845
	DUBOIS	708	THIRD	AVE,	SUITE	710	20-3579331
_	ECCO PROPERTIES	708	THIRD	AVE,	SUITE	710	•
	COMMUNITY DEVELOPMENT PROPERTIES FORT COLLINS, INC	708	THIRD	AVE,	SUITE	710	-153659
	FYI PROPERTIES	708	THIRD		SULTE	710	247371
	COMMUNITY DEVELOPMENT PROPERTIES GAF-MUCL, INC.	708	THIRD	AVE,	SUITE	710	-367891
	GOAT HILL PROPERTIES	708	THIRD	AVE,	SUITE	710	-205
	GOODMAN HOUSING PROPERTIES	708	THIRD	AVE,	SULTE	710	-
	GREENBRIDGE EDUCATION PROPERTIES	108	THIRD	AVE,	SUITE	710	-345522
	COMMUNITY DEVELOPMENT PROP. HARTFORD CLASSICAL INC	708	THIRD	AVE,	SULTE	710	-116077
	HEDC NEW MARKETS, INC.	708	THIRD	AVE,	SULTE	710	-364693
	HOUSING DEVELOPMENT GROUP, INC.	708	THIRD	AVE,	SUITE	710	-383860
	HOUSING DEVELOPMENT GROUP II, INC.	708	THIRD	AVE,	SUITE	710	-340160
	COMMUNITY DEVELOPMENT PROPERTIES HUMBOLT, INC.	708	THIRD	AVE,	SULTE	710	-153686
	COMMUNITY PROPERTIES	708	THIRD	AVE,	SUITE	710	-376270
_	$\sim$	708	THIRD	AVE,	SUITE	710	-043468
	IITY DEVELOPMENT PROP. KING	708	THIRD	AVE,	SUITE	710	3-37076
	IITY DEVELOPMENT PROP. KING COUNTY	708	THIRD	AVE,	SUITE	710	3-395279
. <del>.</del>	TAPPS PARKWAY PRO	708	THIRD	AVE,	SUITE	710	06-1525146
~~·	•						
0							

	EIN	22-3736890	27-3473882	-208925	37-1421792	-44	20-5631355	09925	96	σ	20-3066479	27-3118859	22-3752244	26-0073775	26-1948001	26-1852116	26-3455034	59-3768409	20-5787438	20-1256027	20-2498177	0111045-07	26-11598/8 55-0850079	20-021062	26-0013671	22-3812688	20-1619989	20-5535790	503	a	<b>₼</b>	7-304	0 0	1 1 1 1 1 1 1 1	אלר <u>ו</u>	117	-358	•
Line H(b) - Affiliated Group Return Information (continued)	Address	708 THIRD AVE. SUITE 710	8 THIRD AVE. SUITE 7	THIRD AVE, SUITE	708 THIRD AVE, SUITE 710	THIRD AVE, SUITE 7	THIRD AVE, SUITE 7	708 THIRD AVE, SUITE 710	THIRD AVE, SUITE	708 THIRD AVE, SUITE 710	THIRD AVE, SUITE	THIRD AVE, SUITE	AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE 7	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	AVE, SUITE	THIRD AVE, SUITE	AVE, SOLIE	708 THIRD AVE, SULTE /10	AVE, SOLIE	THIRD AVE SUITE	THIRD AVE SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	THIRD AVE, SUITE	708 THIKD AVE, SULIE /10	THIRD AVE, SOLIE	THIED AVE, SULLE	THIRD AVE, SUITE	
Statement 1 - Form 990, Page 1, Lind	Business Name	COMMUNITY DEVELOPMENT PROPERTIES LANCASTER INC.	DEVELOPMENT PROP LOS ANGELES COUNT	DEVELOPMENT PROPERTIES MADISON, INC.	DEVELOPMENT PROPERTIES MADISON I	DEVELOPMENT PROP MADISON SENIOR NFI	DEVELOPMENT	ENGLAN	PROP NEW MARKETS MM, IN			IY DEVELOPMENT		OMMUNITY PROPERTIES	DEVELOMENT PROPERTIES R	DEVELOPMENT PROPERTIES RIFLE, INC.	DEVELOPMENT PROPERTIES SAN	DEVELOPMENT PROPERTIES SCR	DEVELOPMENT PROPERTIES SEA	DEVELOPMENT PROPERTIES SME, INC.	DEVELOPMENT PROPERTIES STAMFOR	DIE THE THE PENELOPMENT PROPERTIES TEXAS, INC.	TES PROPERTIES	DEVELORIENT PROFESTIES TOMFALIS,	TEMMATER OFFICE DROPEPTER	TWENTY-PIFTH AVENIE DEODESTIES	COMMUNITY DEVELOPMENT PROPERTIES UTICA II. INC.		COMMUNITY DEVELOPMENT PROP VANDERBILT/LARNED, INC.	BIOMEDICAL RESEARCH PROPERTIES	BIOMEDICAL RESEARCH PROPERTIES	WASHINGTON BIOMEDICAL RESEARCH FACILITIES 3			COMMINITIA DEVELOPMENT PROPERTIES MILITARY INC.	DEVELORIZENT PROPERTIES WILLSON,	DEVELOPMENT PROPERTIES YONKERS	

NDC Housing and Economic Development Corporation 708 Third Avenue, Suite 710 New York, New York 10017

91-1884698

Community Development Partners, Inc.	03-0453754
Community Development Properties, Inc.	13-3598617
Community Development Properties XXI, Inc.	20-3944397
Community Development Properties 24 <sup>th</sup> St., Inc.	06-1540392
Community Development Properties Abilene, Inc.	13-3707776
Community Development Properties Alabama, Inc.	20-0983142
Community Development Properties Anchorage, Inc.	20-3868629
Community Development Properties Artloft Housing Development Fund Company, Inc.	13-4087937
Community Development Properties Art Space, Inc.	20-4367089
Community Development Properties Atlanta, Inc.	27-2451881
Community Development Properties Beaumont, Inc.	13-3907101
Community Development Properties Bridgeport, Inc.	20-3584599
Broadway Office Properties	22-3837437
Community Development Properties Bronx, Inc.	20-3943129
Community Development Properties Canon City, Inc.	20-1794523
Community Development Properties Carver, Inc.	75-2958825
Community Development Properties CD, Inc.	13-3877411

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91-1884698

Community Development Properties Cleveland I, Inc.	13-3968254
Community Development Properties Clinton County, Inc.	26-1151516
Conservation Development Properties, Inc.	33-1091602
Community Development Properties Cornell, Inc.	06-1662135
Community Development Properties Dubois Street, Inc.	13-3888457
Community Development Properties Dubois Street II, Inc.	20-3579331
ECCO Properties	26-1159772
Community Development Properties Fort Collins, Inc.	84-1536591
FYI Properties	26-2473717
Community Development Properties GAF-MUCL, Inc.	-13-3678913
Goat Hill Properties	20-2059121
Goodman Housing Properties	20-8574757
Greenbridge Education Properties	26-3455229
Community Development Properties Hartford Classical, Inc.	20-1160772
HEDC New Markets, Inc.	38-3646931
Housing Development Group, Inc.	22-3838603
Housing Development Group II, Inc.	20-3401600
Community Development Properties Humbolt, Inc.	06-1536865
Issaquah Community Properties	22-3762702

NDC Housing and Economic Development Corporation 708 Third Avenue, Suite 710 New York, New York 10017

91-1884698

Community Development Properties Ithaca, Inc.	51-0434683
Community Development Properties King County II, Inc.	13-3707632
Community Development Properties King County III, Inc.	13-3952793
Lake Tapps Parkway Properties	06-1525146
Community Development Properties Lancaster, Inc.	22-3736890
Community Development Properties Los Angeles County, Inc.	27-3473882
Community Development Properties Madison, Inc.	91-2089254
Community Development Properties Madison II, Inc.	37-1421792
Community Development Properties Madison Senior NFP	20-0454678
Community Development Properties Newburgh, Inc.	20-5631355
Community Development Properties New England, Inc.	20-0992522
Community Development Properties New Markets MM, Inc.	20-5962057
NJB Properties	20-5535917
Community Development Properties Noah, Inc.	20-3066479
Community Development Properties Parkway Gardens, NFP	27-3118859
Radford Court Properties	22-3752244
Redmond Community Properties	26-0073775
Community Development Properties Richmond, Inc.	26-1948001

NDC Housing and Economic Development Corporation 708 Third Avenue, Suite 710 New York, New York 10017

91-1884698

Community Development Properties Rifle, Inc.	26-1852116
Community Development Properties San Angelo, Inc.	26-3455034
Community Development Properties Scranton, Inc.	59-3768409
Community Development Properties Seatac, Inc.	20-5787438
Community Development Properties SME, Inc.	20-1256027
Community Development Properties Stamford, Inc.	20-2498177
Community Development Properties Texas, Inc.	20-3401110
TES Properties	26-1159878
Community Development Properties Tompkins, Inc.	55-0850079
TSB Properties	-20-0741062.
Tumwater Office Properties	26-0073671
Twenty-Fifth Avenue Properties	22-3812688
Community Development Properties Utica II, Inc.	20-1619989
Vancouver Community Properties	20-5535790
Community Development Properties Vanderbilt/Larned, Inc.	13-3615032
Washington Biomedical Research Properties I	75-3096321
Washington Biomedical Research Properties II	20-2859503
Washington Biomedical Research Facilities 3	27-3042530
WBRP 32	27-3468946

NDC Housing and Economic Development Corporation 708 Third Avenue, Suite 710 New York, New York 10017

91-1884698

WBRP 33	27-3469226
Community Development Properties Wichita Falls, Inc.	20-0526092
Community Development Properties Wilson, Inc.	20-1644196
Community Development Properties Wilton, Inc.	54-2117195
Community Development Properties Yonkers Pier, Inc.	20-3584528

Form 8868 (Re	ev. 1-2011)	• • 6:3	> > \ \ = 0				Page 2	
		utomatic) 3-Month Exte	nsion, cor	mplete only Part II and check this box	<del></del>		► X	
				onth extension on a previously filed For			• –	
	filing for an Automatic 3-Mon	th Extension, complete	only Part	I (on page 1).				
Partill Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no						o copies needed).		
Type or	Name of exempt organization					Employer identification number		
print	NDC HOUSING & ECONOMIC DEVELOPMENT							
File by the	CORPORATION-GROUP RETURN 91-1884698							
extanded due date for filing your Number, street, and room or suite no. If a P.O. box, see instructions.  708 THIRD AVENUE 710								
return, See	City, town or post office, sta	ate, and ZIP code. For a	foreign add	iress, see instructions.				
instructions.	NEW YORK	NY_	10017					
Enter the Retu	rm code for the return that this	s application is for (file a	separate a	pplication for each return)			01	
Application			Return	Application			Return	
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Form 990			01					
Form 990-B			02	Form 1041-A			08	
Form 990-E			03	Form 4720			09	
Form 990-P	· · · · · · · · · · · · · · · · · · ·		04	Form 5227			10 `	
Form 990-T (sec. 401(a) or 408(a) trust)			05	Form 6069				
Form 990-T (trust other than above)			06	Form 8870			12	
STOP! Do not	complete Part II if you were	e not already granted ar	automatic	: 3-month extension on a previously t	iled Form	8868.		
5 For cale 6 If the tax — — — — Color 7 State in ADDI	at an additional 3-month extended year 2010, or or ox year entered in line 5 is for it hange in accounting period detail why you need the extended TIONAL TIME IS ACCURATE RETURE	other tax year beginning less than 12 months, che sinsion  REQUESTED 7	eck reason:	, and ending Initial return Final return	PREPA	RE A COMP	LETE	
	pplication is for Form 990-BL,		r 6069 ent	er the tentative tax less any				
nonrefundable credits. See instructions.					8a	<u>s</u>		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and								
estimated tax payments made. Include any prior year overpayment allowed as a credit and any								
amount	paid previously with Form 88	368			8b	\$		
c Balanco	e Due. Subtract line 8b from !	line 8a. Include your pays	ment with t	his form, if required, by using EFTPS				
(Electronic Federal Tax Payment System). See instructions.					8c	\$		
•		Sig	nature a	nd Verification				
	of perjury, I declare that I have ex d complete, and that I am authoriz		accompanyin	g schedules and statements, and to the best	of my knowle	edge and belief, it is		
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