

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 Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052 2011

		ent of the Treasury evenue Service	ote.	The foundat	ion may				ate Foundati this return to:		reporti	ng requirements	
_		lendar year 2011 o								, and end			, 20
		of foundation									A	Employer identifi	cation number
	TEC	HNICAL ASSISTA	NC	E CORP.	FOR F	OUSI	1G					23-705812	5
	Numl	per and street (or P O t	ох г	number if mail is	not deliv	ered to str	eet addres	is)		Room/su	ute E	3 Telephone numb	er (see instructions)
												(31	2) 345-3205
	200	E. RANDOLPH S	TR	EET						2100			
	City o	or town, state, and ZIP	code	e									
											C	If exemption applica pending, check here	ation is
		CAGO, IL 60601		1			1						ر——··
G	Che	ck all that apply		Initial retu		<u> </u>	\lnot		of a former p	oublic cha	rity c	1 Foreign organizat	tions check here
				Final retur		-	-	nded re				2 Foreign organiza 85% test check h	
_		·		Address c				chang				computation .	
H		ck type of organizat		-		1 1					E	If private foundation	status was terminated
4		ection 4947(a)(1) non							rivate founda			under section 507(b)(1)(A), check here . P
ı		market value of all							ash XAc	cruai	F		in a 60-month termination
		ear (from Part II, col ► \$ 5, 23			(Part I	otner (s)	pecify) _	st he or	n cash basis)			under section 507(b))(1)(B) check here . P
		Analysis of Rever					r (u) mu.	31 00 01	r casir basis)	<u> </u>			(d) Disbursements
•	art	total of amounts in co	lum.	ns (b), (c), an	d (d)	(a)	Revenue		(b) Net inv		(c)	Adjusted net	for charitable
		may not necessarily o column (a) (see instru			s in	•	penses p books	æ	incon	ne		income	purposes (cash basis only)
-	1	Contributions, gifts, grants, e		·			20	,000.					(Casil basis only)
	2	if the fo	und	ation is not req	uired to			·					
	3	Interest on savings and t		B			2	,097.		2,097.			ATCH 1
	4	Dividends and interes		•									111011 1
	-	Gross rents											
		Net rental income or (los										-	
ø	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a												
Revenue													
Š	7	Capital gain net incor	ne (from Part IV,	line 2) .								
œ	8	Net short-term capital	gaı	n									
	9	Income modifications	٠.										
	10 a	Gross sales less returns and allowances · · · ·	.			ļ							
		Less Cost of goods sold				1							
		Gross profit or (loss) (040				03.040	
	11	Other income (attach						,940.		2 007		83,940.	ATCH 2
_	12	Total Add lines 1 thre						,037.	 	2,097.		83,940. 53,820.	15,180
	13	Compensation of officers						,000.				55,620.	15,100
Se	14	Other employee salar											
ŝ	15	Pension plans, emplo	•	= =									
ğ	16a	Legal fees (attach sch		· • • • •	• • • •		20	,389.				15,903.	4,486
Ü	b	Accounting fees (atta						, 505.				13,303.	17100
₹	17	Other professional fee						334.	RECE	IVED		261.	73
stra	17 18	Interest . ATTACH			**		5	, 368.			78	4,187.	1,181
Ĕ	19	Taxes (attach schedule) (Depreciation (attach:			• • • •			8	NOV 1	9 2012	8	<u> </u>	
튱	20	Occupancy		•				14	I I V Y	·	S		
Ž	21	Travel, conferences, a					10	,641.			<u> 기운</u>	8,300.	2,341
anc	22	Printing and publicate							OGDE	N, UT			
Бu	23	Other expenses (attac				-	36	,692.				28,620.	8,072
ati	24	Total operating and											
Operating and Administrative Expenses	1	Add lines 13 through					142	,424.				111,091.	31,333
Õ	25	Contributions, gifts, g					2,252						2,252,384
	26	total expenses and disburs	emen	nts Add lines 2			2,394	,808.	<u> </u>	0		111,091.	2,283,717
£	26	Subtract line 26 from	line	12									
▼		Excess of revenue over exp			ents		2,288	<u>,771.</u>					
\		Net investment incor								2,097.			
_	L c	Adjusted net income	(ıf r	negative, ente	r -0-)								
F	or Pa	perwork Reduction Ad	t N	otice, see ins	tructions	 s.			_ _	J	SA **	ATCH 5	Form 990-PF (2011)

В	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End o	f year
	an t III	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	518,347.	522,974.	522,974
	3	Accounts receivable ▶15,000.			
		Less allowance for doubtful accounts ▶	15,000.	15,000.	15,000.
Light States of Fund Balances Liabilities	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	1	Receivables due from officers, directors, trustees, and other			
	6				
	_	disqualified persons (attach schedule) (see instructions)		* 3 125 964	NMCII 7
	7	Other notes and loans receivable (attach schedule) ▶ _ *		3,123,304.	
		Less allowance for doubtful accounts ▶	3,171,291.	3,125,964.	3,125,964.
ts	8	Inventories for sale or use			
se	9	Prepaid expenses and deferred charges ATCH 8.	1,396.	1,424.	1,424
AS	10 a	Investments - U S and state government obligations (attach schedule)			- <u></u> -
	ь	Investments - corporate stock (attach schedule)			
	ı	Investments - corporate bonds (attach schedule), Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	4.2	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			ATCH 9
		Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			AICH 9
		(attach schedule)	4,005,940.	1,569,889.	1,569,889.
	l	Other assets (describe ATCH 10)	4,005,940.	1,309,869.	1,309,009.
	16	Total assets (to be completed by all filers - see the	E 211 0E4	5 005 051	E 035 051
_		instructions Also, see page 1, item I)	7,711,974.		5,235,251
		Accounts payable and accrued expenses	20,450.	27,615.	
	18	Grants payable			
es	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable (attach schedule)	2,477,136.	2,431,361.	ATCH 11
_	22	Other liabilities (describe ► ATCH_12_)	150,000.		
_	23	Total liabilities (add lines 17 through 22)	2,647,586.	2,458,976.	
		Foundations that follow SFAS 117, check here ► X			
		and complete lines 24 through 26 and lines 30 and 31.			
ŝ	24	Unrestricted	2,813,601.	2,757,103.	
2	25	Temporarily restricted	2,250,787.	19,172.	
					
A E	20	Permanently restricted			
٥		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
Ē		· — ·			
S	27	Capital stock, trust principal, or current funds			
šet	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
AS	29	Retained earnings, accumulated income, endowment, or other funds		0 776 075	
et .	30	Total net assets or fund balances (see instructions)	5,064,388.	2,776,275.	
ž	31	Total liabilities and net assets/fund balances (see			
_		instructions)	7,711,974.	5,235,251.	
P	art II	Analysis of Changes in Net Assets or Fund E	Balances		
1	Total	net assets or fund balances at beginning of year - Part I	II, column (a), line 30 (r	must agree with	
	end-	of-year figure reported on prior year's return)		1	5,064,388.
2	Ente	r amount from Part I, line 27a		2	-2,288,771.
3	Othe	r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶ATTACHN	MENT 13	3	658
4	Add	lines 1, 2, and 3			2,776,275.
_	_				
6	Total	eases not included in line 2 (itemize) ► net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II. column (b)	, line 30 6	2,776,275.
<u> </u>	. 5.0	The state of the s		, <u>, , , , , , , , , , , , , , , , , , </u>	Form 990-PF (2011)

Page 3

Part IV Capital Gains	and Losses for Tax on Inv	vestment Income			
• •	.,,	•	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
			ļ		
<u>c</u>			ļ		
<u>d</u>		· · · · · · · · · · · · · · · · · · ·		 	ļ <u>.</u>
<u>e</u>		(n) Cook on other house			L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>			ļ		
<u>b</u>					
<u> </u>					
<u>d</u>					
Complete only for accets	abouting got in column (b) and our	and by the foundation on 12/21/60	 		
				Gains (Col (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
a					
b					
C					
d					
e					
2 Cont.	(-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	If gain, also enter in Part I, line 7			
2 Capital gain net income or		If (loss), enter -0- in Part I, line 7	2		
, , ,					
		· · · · · · · · · · · · · · · · · · ·	3		
Part V Qualification	Under Section 4940(e) for Ro	educed Tax on Net Investment I			
Was the foundation liable for	the section 4942 tax on the distr	• •	ase period	d?	Yes X No
			- ony ontr		
			g any entr	(d)	· · · · · · · · · · · · · · · · · · ·
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
			-		
		 	ļ		
			1		
			<u> </u>		
2006	· · · · · · · · · · · · · · · · · · ·				
2 Total of line 1, column (d)	1		2		
· · · · · · · · · · · · · · · · · · ·		te the total on line 2 by 5 or by the	1		
<u> </u>	· · · · · · · · · · · · · · · · · · ·		3		
4 Enter the net value of nor	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) Gross sales price (f) Depreciation allowed (g) Cost or other plus expense of control of the contro	rom Part X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investme			6		
7 Add lines 5 and 6			7		
8 Enter qualifying distribution If line 8 is equal to or gr	ons from Part XII, line 4 eater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% ta	x rate See the
Part VI instructions					- 000 DE (2011)

• By state legislation that effectively amends the governing instrument so that no mandatory directions that

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

Form 990-PF (2011)

Х

Х

Х

Х

7

8 b

By language in the governing instrument, or

and addresses ATTACHMENT 14

Par	rt VII-A Statements Regarding Activities (continued)		· · · ·	-9
$\overline{}$	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
• •	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	х	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	'		
12	'	42		х
42		12	х	
13		13		<u> </u>
	Website address ► N/A The books are in care of ► RALPH BROWN Telephone no ► 312-345-	3201	·	
14	The books are in care of ▶ RALPH BROWN Telephone no ▶ 312-345- Located at ▶200 E. RANDOLPH ST. STE. 2100 CHICAGO, IL ZIP+4 ▶ 60601			
4.5				TT
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			لـــا
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
10	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		163	X
	, , , , , , , , , , , , , , , , , , , ,	16		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of			
Pai	the foreign country T VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
га			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	NO
та	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	Ì		
		I		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	and death and barrens and a second a second and a second			
	(c) common goods of common to (c) assays them to provide the common pr			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			v
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			Х
_		1c		_^
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	of At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? Yes X No			
	If "Yes," list the years			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		ļ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	Daths (seeds) as both as a COV dead of the control			
3 a	at any time during the year?			
	• • • • • • • • • • • • • • • • • • • •			
D	of "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			v
_	foundation had excess business holdings in 2011)	3 b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	^
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	.		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		X

Form 990-PF (2011)

Form **990-PF** (2011)

Total. Add lines 1 through 3.

Page 8

Pa	rt X	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	n foun	dations,
1	Fair n	narket value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purpo	ses		
а	Avera	ge monthly fair market value of securities	1a	
b	Avera	ge of monthly cash balances	1b	534,104.
С	Fairm	narket value of all other assets (see instructions)	1c	
d	Total	(add lines 1a, b, and c)	1 d	534,104.
е		ction claimed for blockage or other factors reported on lines 1a and		
	1c (at	tach detailed explanation) 1e		
2	Acqui	sition indebtedness applicable to line 1 assets	2	
3			3	534,104.
4	Cash	deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
			4	8,012.
5	Net va	ctions) alue of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	526,092.
6	Minim	num investment return. Enter 5% of line 5	6	26,305.
Pa	rt XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \blacktriangleright \boxed{x} and do not complete this p	art)	
1		num investment return from Part X, line 6	1	
2 a	Tax o	n investment income for 2011 from Part VI, line 5		
b	Incom	ne tax for 2011 (This does not include the tax from Part VI) 2b		
С		nes 2a and 2b	2c	
3	Distrib	outable amount before adjustments Subtract line 2c from line 1	3	
4	Reco	veries of amounts treated as qualifying distributions	4	
5		nes 3 and 4	5	
6	Dedu	ction from distributable amount (see instructions)	6	
7	Distri	ction from distributable amount (see instructions) butable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		···
			7	
Pa		Qualifying Distributions (see instructions)		
1	Amo	unts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,283,717.
þ		ram-related investments - total from Part IX-B	1b	
2		unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
		oses	2	
3	Amo	unts set aside for specific charitable projects that satisfy the		
a		ability test (prior IRS approval required)	3a	
b		n distribution test (attach the required schedule)	3 b	
4	Quali	ifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,283,717.
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
•		r 1% of Part I, line 27b (see instructions)	5	0
6		sted qualifying distributions. Subtract line 5 from line 4	6	2,283,717.
-	Note	e. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal	culating	
		qualifies for the section 4940(e) reduction of tax in those years	• •	

Form 990-PF (2011)

Forn	n 990-PF (2011)				Page 9
Pa	rt XIII Undistributed Income (see instru	ctions)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				
2	Undistributed income, if any, as of the end of 2011				
	Enter amount for 2010 only				
h	Total for pnor years 20 09 ,20 08 ,20 07				
3	Excess distributions carryover, if any, to 2011				
	F 2000				
	From 2006				
٦	From 2008				
· ·	From 2009				
•	From 2010				
	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII, line 4 > \$ 2,283,717.				
а	Applied to 2010, but not more than line 2a	<u> </u>			
b	Applied to undistributed income of prior years (Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				
	Applied to 2011 distributable amount				
е	Remaining amount distributed out of corpus	2,283,717.	· 	-	
5	Excess distributions carryover applied to 2011		<u>-</u>		
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,283,717.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
¢	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount - see instructions				
t	Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2012				
7	Amounts treated as distributions out of corpus			·	
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not				
•	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
J	Subtract lines 7 and 8 from line 6a	2,283,717.			
10	Analysis of line 9			<u> </u>	
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010				
	LAUCOO HUHI ZUTT 2,200, /1/.		l	<u> </u>	_1

Form 990-PF (2011)

23-7	058125	Page 10

Pa	rt XIV Private Oper	<u>rating Foundations (S</u>	see instructions and	Part VII-A, question	9)	
1`a	If the foundation has					
	foundation, and the ruling	g is effective for 2011, ent	ter the date of the ruling .		▶ 08/16/1972	
þ	Check box to indicate wh	ether the foundation is a	private operating founda	tion described in section	X 4942(j)(3	3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(0) 1041
	I or the minimum investment return from Part X for each					
	year listed	25,643.	29,037.	17,165.	24,426.	96,271.
ь	85% of line 2a	21,797.	24,681.	14,590.	20,762.	81,830.
٠	XII, line 4 for each year listed .	2,283,717.	31,002.	32,571.	166,191.	2,513,481.
d	Amounts included in line 2c not					
	used directly for active conduct					
	•					
·	directly for active conduct of					
	exempt activities. Subtract line	2 202 717	21 002	22 571	166 101	2 512 401
3		2,203,717.	31,002.	32,3/1.	100,131.	2,513,481.
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets	5,235,251.	7,711,974.	7,659,786.	7,530,196.	28,137,207.
	4942(j)(3)(B)(i)	5,235,251.	7,711,974.	7,659,786.	7,530,196.	28,137,207.
b	"Endowment" alternative test-					
	line 6 for each year listed	17,536.	19,358.	11,443.	19,221.	67,558.
C	"Support" alternative test - enter					
	(1) Total support other than					
	•					
	payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general				*****	
	public and 5 or more			j		
	provided in section 4942					
				+		
	port from an exempt					
					: b-d 65 000 -	i
řē				only if the foundat	ion nad \$5,000 o	r more in assets
-			<u>-</u>			
1	•	•		than 20/ of the total		l by the foundation
а	before the close of any	the foundation who ha	ive contributed more	than 2% of the total of the tot	contributions received esection 507(d)(2))	by the foundation
	•	tax your (out only if the	y nave contributes in	010 (11411 \$0,000) (000	, 5550 557 (47(27)	
			100/			
b						arge portion of the
	ownership or a partner	snip or other entity) or v	which the foundation	nas a 10% or greater in	nerest	
2	Information Regarding	g Contribution, Grant,	Gıft, Loan, Scholarshi	p, etc., Programs:		
	Check here ▶ if t	he foundation only m	akes contributions to	preselected charital	ble organizations and	d does not accept
	unsolicited requests for	or funds. If the foundat	tion makes gifts, gran			
	other conditions, comp	olete items 2a, b, c, and	d			
а	The name, address, a	nd telephone number o	f the person to whom	applications should be	addressed	
	N/A					
b	The form in which appl	a directly for select conduct of the property of the foundation of the foundation had \$5,000 or more at any time during the year - see instructions.) Well support and any time during the year - see instructions. I any managers of the foundation who awe contributed more than \$5,000 (See section \$57(d)(2)) NONE To select the property of the foundation only makes contributions to preselected charitable organizations and does solicited requests for funds if the foundation makes gifts, grants, etc (see instructions) to individuals or organized complete tenses. N/A y restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions. N/A Support in which applications should be submitted and information and materials they should include N/A y restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions. N/A				
	N/A					
		nes	 			·
•	,					
	N/A					
		mitations on awards	such as by geograf	hical areas charitable	e fields kinds of in-	stitutions, or other
-	factors			a.ouo, onamabi	,	
	NI/A					
JSA	-					Form 990-PF (2011)
1F14	90 1 000					220-11 (2011)

Page **11**

Supplementary information (conunuea)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appr	oved for I	Future Payment	
Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	COMMEDIA	
a Paid during the year				
3 mm3 GUVENIE 4 0				
ATTACHMENT 18				
		-		
	E			
Total	ı	<u> </u>		2,252,384.
b Approved for future payment	<u> </u>	<u> </u>		2,232,331.
5 Approved for fatare payment				
				1
]
				1
		}		
	1	•		
Total		· · · · · ·	▶ 3b	

Page **12**

Part XVI	-A Analysis of Income-Produ	cing Activ	vities		•	
Enter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded b	y section 512, 513, or 514	(e)
	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	ATTACHMENT 19					83,940.
а <u>т</u>	HITACIIMENI 15					
c						
				 		· · · · · · · · · · · · · · · · · · ·
e						
f						
q Fees	and contracts from government agencies					
-	ship dues and assessments					
	on savings and temporary cash investments					
4 Dividend	ds and interest from securities			14	2,097.	
5 Net rent	al income or (loss) from real estate					
a Debt	-financed property					
b Not o	debt-financed property					
6 Net renta	il income or (loss) from personal property					
7 Other in	vestment income					
8 Gain or (loss) from sales of assets other than inventory			ļ		
9 Net inco	ome or (loss) from special events			ļ		· · · · · · · · · · · · · · · · · · ·
10 Gross p	rofit or (loss) from sales of inventory			<u> </u>		
11 Other re	venue a					· · · · · · · · · · · · · · · · · · ·
ь		ļ		-		
						<u></u>
e				.	2,097.	83,940.
	Add columns (b), (d), and (e)					0.5 0.0 0
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc			• • • • • •		
Part XVI			complishment of Ex	emnt Purr	noses	
			•			
Line No	Explain below how each activit	•	•			
▼	accomplishment of the foundation	on's exemp	ot purposes (other than i	oy providing	tunas for such purpose	s) (See instructions)
1A	ASSET MANAGEMENT FEES	EARNED	FOR MANAGEMENT	SERVICES	FOR	
	THREE LOW-INOCME HOUS					
1B	MANAGEMENT FEES ARE F	OR SUPE	RVISING THE ON-G	OING OPE	RATIONS	
	OF LOW INCOME HOUSING	DEVELO	PMENTS THAT WE O	WN OR CO	NTROL.	
1C	PROFESSIONAL FEES FOR	CONSUL'	TING SERVICES RE	NDERED I	N	
	CONNECTION WITH DEVEL	OPMENT (OF LOW INCOME HO	USING.		
1D-E	THESE LOSSES REFLECT	THE ORG	ANIZATION'S SHAR	E OF REN	ITAL	
	LOSSES GENERATED BY T	HE PARTI	NERSHIPS WHICH P	ROVIDE S	SAFE	
	AFFORDABLE HOUSING FO	R LOW A	ND MODERATE INCO	ME TENAN	ITS. THE	
	ORGANIZATION HAS ORGA					
	IN THESE DEVELOPMENTS	AND AS	SUCH IS FURTHER	ING ITS	EXEMPT	
	PURPOSE BY ENSURING T			UES TO C	PERATE	<u> </u>
	IN ACCORDANCE WITH IT	S INTEN	DED PURPOSE.		 	
			<u> </u>			
			.			
					- · · · · · · · · · · · · · · · · · · ·	
•						
		 				
			***************************************			· · · · · · · · · · · · · · · · · · ·
			 -			
	<u> </u>					

PAGE 13

Form 990-PF (2011) TECHNICAL ASSISTANCE CORP. FOR HOUSING Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political a Transfers from the reporting foundation to a noncharitable exempt organization of Х 1a(2) (2) Other assets **b** Other transactions X 1b(1) Х 1b(2) Х 1b(3) Х (4) Reimbursement arrangements Χ (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) Х d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (b) Amount involved N/A N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations Yes X No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (c) Description of relationship (b) Type of organization (a) Name of organization of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true upleten Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Sign
Here

Signature of officer or trustee

						retun	
with	the	pre	oare	er s	hown	belov	٧ [
(see :	nstruc	tions)	12	Х	Yes	N	ю

Paid **Preparer**

Use Only

Print/Type preparer's name Preparer's signature JOHN WOODBURY

P.C

Date 11/12/12

43-00700107-5100

Check self-employed P00132284

Firm's name ► REZNICK GROUP, Firm's EIN ▶ 52-1088612 Firm's address ▶ 200 SOUTH WACKER DRIVE, SUITE 60606 Phone no __312-508-5900 CHICAGO,

Form 990-PF (2011)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of the organization	Employer identification number
TECHNICAL ASSISTANCE CORP. FOR HOUSING	
	23-7058125
Organization type (check one)	
Filers of: Section:	
Form 990 or 990-EZ 501(c)() (enter number) organization	
4947(a)(1) nonexempt charitable trust not treated as a private for	oundation
527 political organization	
Form 990-PF X 501(c)(3) exempt private foundation	
4947(a)(1) nonexempt charitable trust treated as a private found	ation
501(c)(3) taxable private foundation	
Check if your organization is covered by the General Rule or a Special Rule . Note . Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a instructions	Special Rule See
General Rule	
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 property) from any one contributor. Complete Parts I and II	or more (in money or
Special Rules	
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % suppor under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) For Complete Parts I and II	the year, a contribution of
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from during the year, total contributions of more than \$1,000 for use exclusively for religious, chart or educational purposes, or the prevention of cruelty to children or animals Complete Parts I,	table, scientific, literary,
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from during the year, contributions for use exclusively for religious, charitable, etc., purposes, but to not total to more than \$1,000. If this box is checked, enter here the total contributions that we year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts un applies to this organization because it received nonexclusively religious, charitable, etc., confirmore during the year.	hese contributions did ere received during the less the General Rule ributions of \$5,000 or
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990-PF).	H of its Form 990-EZ or on
For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF Schedul	e B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization TECHNICAL ASSISTANCE CORP. FOR HOUSING

Employer identification number

			23-7058125
Part I	Contributors (see instructions) Use duplicate copies of	Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	CITY OF CHICAGO 33 N. LA SALLE ST., ROOM 700 CHICAGO, IL 60602	\$\$20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization TECHNICAL ASSISTANCE CORP. FOR HOUSING

Employer identification number

art II Non	cash Property (see instructions). Use duplicate copies	of Part II if additional space is need	eded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization TECHNICAL ASSISTANCE CORP. FOR HOUSING Employer identification number 23-7058125 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc contributions of \$1,000 or less for the year (Enter this information once See instructions) ▶\$ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

PART I - INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PF,

NET INVESTMENT INCOME	2,095. 2.	2,097.
REVENUE AND EXPENSES PER BOOKS	2,095.	2,097.
		TOTAL
DESCRIPTION	INTEREST INCOME ENTITY ACCOUNTS EVANS LANGLEY L.P. (36-3820679)	

OTHER INCOME

PART I

FORM 990PF,

ATTACHMENT

REVENUE	AND	EXPENSES	PER BOOKS	Q	0	4,619	σ	
		щ	ш,					

ADJUSTED NET INCOME 19,981 4,619 -92 -568

83,940.

TOTALS

FORM 990PE, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	4,486.	4,486.
ADJUSTED NET INCOME	15,903.	15,903.
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	20,389.	20,389.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

- INTEREST EXPENSE PART I FORM 990PF,

CHARITABLE <u>PURPOSES</u>	73.	73.
ADJUSTED NET INCOME	261.	261.
REVENUE AND EXPENSES PER BOOKS	334.	334.
		TOTALS
DESCRIPTION	INTEREST	

TAXES ı PART I FORM 990PE,

AND EXPENSES PER BOOKS REVENUE

5,368.

5,368.

TOTALS

PAYROLL TAXES

DESCRIPTION

ADJUSTED NET INCOME

CHARITABLE PURPOSES

4,187.

1,181.

1,181.

4,187.

OTHER EXPENSES PART I FORM 990PF,

REVENUE	AND	EXPENSES	PER BOOKS	3,314.	4,318.	6,671.	1,711.	15,962.	3,160.	1,556.	
			DESCRIPTION	INSURANCE-GROUP	INSURANCE	MISCELLANEOUS	TELEPHONE	OFFICE EXPENSES	MEETINGS	TEMPORARY SERVICES	

CHARITABLE	PURPOSES 729	950.	1,468.	376.	3,512.	695.	342.
ADJUSTED NET	INCOME	3,368.	5,203.	1,335.	12,450.	2,465.	1,214.

8,072.

28,620.

36,692.

TOTALS

FORM 990PF, PART II - OTHER NOTES AND LOANS RECEIVABLE

BORROWER: D	UE FROM RELATED PARTIES	
BEGINNING BALANCE DUE		3,171,291.
ENDING BALANCE DUE		3,125,964.
ENDING FAIR MARKET VALUE .		3,125,964.
TOTAL BEGINNING OTHER NOT	ES AND LOANS RECEIVABLE	3,171,291.
TOTAL ENDING BOOK - OTHER	NOTES AND LOANS RECEIVABLE	3,125,964.
TOTAL ENDING FMV - OTHER	NOTES AND LOANS RECEIVABLE	3,125,964.

FORM 990PF, PART II - PREPAID EXPENSES AND DEFERRED CHARGES

ENDING <u>FMV</u>	1,424.
ENDING BOOK VALUE	1,424.
BEGINNING BOOK VALUE	1,396.
	TOTALS
DESCRIPTION	PREPAID EXPENSES

2		
3		

	ATTACHMENT 9	ACCUMULATED DEPRECIATION DETAIL	ENDING	ADDITIONS DISPOSALS BALANCE	1,845	1,845.
		ACCUMULATE	NING	BALANCE ADDIT	1,845	845
VESTMENT			BEGINNING	BALA	1,1	1,845.
LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT			ENDING	BALANCE	1,845	1,845
S, FOULDMENT N	FIXED ASSET DETAIL		ADDITIONS DISPOSALS BALANCE			
LAND, RUITIDING		FIXED AS		ADDITIONS		
711			BEGINNING	BALANCE	1,845	1,845.
			METHOD/	CLASS	SL	
				ASSET DESCRIPTION	COMPUTER EQUIPMENT	TOTALS

ATTACHMENT 9 PAGE 27

v 11-6 1

79710P 746P 11/12/2012

43-00700107-5100

FORM 990PF, PART II - OTHER ASSETS

ENDING <u>FMV</u>	1,569,659.	1,569,889.
ENDING BOOK VALUE	1,569,659.	1,569,889.
BEGINNING BOOK VALUE	1,654,464. 229. 2,200,847. 150,000.	4,005,940.
DESCRIPTION	INVESTMENT IN NORTH CENTER SEN ESCROW DEPOSITS DEVELOPMENT COSTS DEVELOPER FEE RECEIVABLE ADVANCE TO AFFILIATES	TOTALS

FORM 990PF, PART II - MORTGAGES AND OTHER NOTES PAYABLE

SOUTH SHORE BANK OF CHICAGO LENDER:

INTEREST RATE: 6.250000

DATE OF NOTE:

07/21/1997

MATURITY DATE:

06/01/2010

REPAYMENT TERMS:

NOTE EXTENDED EVERY YEAR

BEGINNING BALANCE DUE

8,144.

NONE

LENDER: DEPARTMENT OF HOUSING - CITY CHICAGO

ENDING BALANCE DUE

ORIGINAL AMOUNT:

2,491,223.

INTEREST RATE:

3.000000 10/05/1996

DATE OF NOTE: MATURITY DATE:

10/01/2044

ENDING BALANCE DUE 2,431,361.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE

2,477,136.

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE

2,431,361.

TECHNICAL ASSISTANCE CORP. FOR HOUSING

23-7058125

ATTACHMENT 12

FORM 990PF, PART II - OTHER LIABILITIES

DESCRIPTION

BEGINNING BOOK VALUE

DEVELOPER FEE PAYABLE

150,000.

TOTALS

150,000.

TECHNICAL ASSISTANCE CORP. FOR HOUSING

23-7058125

ATTACHMENT 13

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

GAAP/TAX DIFFERENCE FROM PASS THROUGH

ENTITIES

658.

TOTAL

658.

FORM 990PE,

23-7058125

ATTACHMENT 14

LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS PART VII-A,

NAME AND ADDRESS

DATE

07/29/2011

GOVERNMENT GRANTS

20,000.

TOTAL CONTRIBUTION AMOUNTS

CITY OF CHICAGO 33 N. LA SALLE ST., ROOM 700 CHICAGO, IL 60602

20,000.

FORM 990PF, PART VII-A, LINE 11A-TRANSFERS FROM CONT. ENT. STATEMENT

CONTROLLED ENTITY'S NAME:

TACH NORTHCENTER DEVELOPMENT CORPORATION

CONTROLLED ENTITY'S ADDRESS: 200 E. RANDOLPH-SUITE 2100

CITY, STATE & ZIP:

CHICAGO, IL 60601

EIN:

36-4539877

TRANSFER AMOUNT:

34,695.

EXPLANATION OF TRANSFER FROM CONTROLLED ENTITY:

TACH NORTH CENTER DEVELPMENT CORPORATION REPAID PAST ADVANCES FROM TACH

FORM 990PF, PART VII-A, LINE 11A-TRANSFERS TO CONT. ENT. STATEMENT

CONTROLLED ENTITY'S NAME: TACH WILLARD SQUARE DEVELOPMENT CORP.

CONTROLLED ENTITY'S ADDRESS: 200 EAST RANDOLPH-SUITE 2100

CITY, STATE & ZIP:

CHICAGO, IL 60601

EIN:

36-4019554

TRANSFER AMOUNT:

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

N/A

CONTROLLED ENTITY'S NAME: TACH CORNERSTONE DEVELOPMENT CORP.

CONTROLLED ENTITY'S ADDRESS: 200 EAST RANDOLPH-SUITE 2100

CITY, STATE & ZIP:

CHICAGO, IL 60601

EIN:

36-4036192

TRANSFER AMOUNT:

8,960.

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

TACH PAID EXPENSES ON BEHALF OF THE ENTITY.

CONTROLLED ENTITY'S NAME: TACH EVANS DEVELOPMENT CORPORATION

CONTROLLED ENTITY'S ADDRESS: 200 EAST RANDOLPH-SUITE 2100

CITY, STATE & ZIP:

CHICAGO, IL 60601

EIN:

36-3794898

TRANSFER AMOUNT:

13,550.

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

TACH ADVANCED FUNDS TO THE ENTITY FOR OPERATIONS

CONTROLLED ENTITY'S NAME: TACH NORTHCENTER DEVELOPMENT CORP.

CONTROLLED ENTITY'S ADDRESS: 200 E. RANDOLPH-SUITE 2100

CITY, STATE & ZIP: CHICAGO, IL 60601

EIN:

36-4539877

TRANSFER AMOUNT:

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

N/A

TECHNICAL ASSISTANCE CORP FOR HOUSING

- GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR FORM 990PF, PART XV RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

2,252,384

AMOUNT

ATTACHMENT 18

CITY OF CHICAGO, ILLINOIS 121 N LASALLE STREET

CHICAGO, 1L 60602

RECIPIENT NAME AND ADDRESS

MUNICIPAL CORPORATION

THE CITY OF CHICAGO PROVIDED FUNDS TO THE PURPOSE OF GRANT OR CONTRIBUTION

PUBLIC USE PARKS ON LAND ADJACENT TO THE HOUSING USED THE FUNDS TO DEVELOP AFFORDABLE HOUSING AND CHICAGO (AS ORIGINALLY PLANNED) WHILE CONTINUING TO MAINTAIN THE PROPERTY FOR THE BENEFIT OF THE CONVEYED THE DEVELOPED PARK BACK TO THE CITY OF GENERAL PUBLIC AND THE RESIDENTS OF THE HOUSING HOUSING AND COMMUNITY PARKS THE ORGANIZATION DEVELOPMENT SUBSEQUENTLY THE ORGANIZATION ORGANIZATION FOR THE PURPOSE OF DEVELOPING DEVELOPMENT 2,252,384

TOTAL CONTRIBUTIONS PAID

PAGE 36 ATTACHMENT 18

V 11-6 1

43-00700107-5100

79710P 746P 11/12/2012

V 11-6.1

RELATED OR EXEMPT	FUNCTION INCOME
	AMOUNT
EXCLUSION	CODE
	AMOUNT
BUSINESS	CODE
	DESCRIPTION

60,000. 19,981. 4,619.

-92. -568. 83,940.

- 1A ASSET MANAGEMENT SERVICES 1B MANAGEMENT FEES

- 1C PROFESSIONAL FEES 1D LOSS FROM CORNERSTONE LP 1E LOSS FROM EVANS LANGLEY LP

TOTALS

ATTACHMENT 19 PAGE 37

79710P 746P 11/12/2012 4:01:26 PM

ı

23-7058125

2011

TECHNICAL ASSISTANCE CORP. FOR HOUSING

Current-year depreciation Current-year amortization Current-year 179 expense MA CRS class ACRS class Life 5 000 Accumulated Accumulated Medepreciation depreciation thod Conv Accumulated Accumulated amortization amortization code 1,845 1,845 1,845 1,845 1,845 1,845 1,845 Basis for depreciation 1,845 1,845 Basis Reduction 179 exp reduction in basis 100 000 8us Unadjusted Cost or basis 1,845 1,845 1,845 Cost or basis Date placed in service Subtotals TOTALS.....AMORTIZATION Date placed in service Less Retired Assets 12/30/2004 Less Retired Assets Asset description Asset description Description of Property COMPUTER EQUIPMENT DEPRECIATION Listed Property TOTALS. . .

*Assets Retired JSA 1X9024 1 000

4 01 26 PM 79710P 746P 11/12/2012

43-00700107-5100

PAGE 38

SUPPLEMENTAL INFORMATION FOR PART VIII, LINE 1 THE CORPORATION PURCHASES DIRECTORS AND OFFICERS LIABILITY INSURANCE THAT PROVIDES COVERAGE TO BOTH THE CORPORATION AND ITS DIRECTORS AND OFFICERS. WHILE A PORTION OF THE PREMIUM MAY BE CONSIDERED COMPENSATION TO DIRECTORS AND OFFICERS, THE COMPENSATORY PORTION ALLOCABLE TO ANY ONE INDIVIDUAL IS DE MINIMIS.

SUPPLEMENTAL INFORMATION FOR PART IX-A TACH SUMMARY OF DIRECT CHARITABLE ACTIVITIES FOR THE TWELVE MONTHS ENDING 12/31/11

- DIRECTING OPERATIONS AT CORNERSTONE APARTMENTS, A LOW INCOME RENTAL APARTMENT DEVELOPMENT FOR FAMILIES, PART OF THE REBUILDING OF THE NORTH WASHINGTON PARK NEIGHBORHOOD OF CHICAGO. WORK ON BUDGETING, MARKETING, AUDIT, TAX RETURN, SECTION 42 LOW INCOME HOUSING TAX CREDIT COMPLIANCE AND CLASS 9 ASSESSMENT COMPLIANCE. ACTIVITIES INCLUDED ARRANGEMENTS TO HOUSE RELOCATES DISPLACED FROM REHABILITATION OF OTHER LOW INCOME BUILDINGS; NEGOTIATION AND LETTING OF CONTRACT TO REPLACE FRONT ENTRANCE DOORS AT EVANS BUILDING; LETTING CONTRACT FOR ENVIRONMENTAL STUDIES OF BOTH BUILDINGS. INITIAL EFFORTS TO PRESERVE CORNERSTONE APARTMENTS AS LOW INCOME HOUSING OVER THE LONG TERM BY MAKING ARRANGEMENTS FOR THE SALE OF THE DEVELOPMENT TO THE COMMUNITY BUILDERS, AN EXPERIENCED NON-PROFIT HOUSING DEVELOPMENT ORGANIZATION THAT WILL ACQUIRE, REHABILITATE, OPERATE AND PRESERVE THE BUILDINGS FOR CONTINUED LOW INCOME OCCUPANCY. WORK ON SALE ISSUES INCLUDING TITLE ISSUES, PARTNERSHIP ISSUES, AND TAX ISSUES, AND ASSIST THE NON-PROFIT BUYER IN OBTAINING PUBLIC FINANCING TO SUPPORT THE UNDERTAKING.
- DIRECTING OPERATIONS AT WILLARD SQUARE APARTMENTS ("WSQ APTS"), A LOW INCOME RENTAL APARTMENT COMPLEX (100 UNITS) FOR FAMILIES, INCLUDING ANNUAL REOUISITION OF TAX INCREMENT FINANCING FUNDS, SECTION 42 LOW INCOME HOUSING TAX CREDIT COMPLIANCE, REVIEW AND PARTICIPATION IN BUDGETING, MARKETING, OPERATIONS AND FINANCES. NEGOTIATE CONTRACTS WITH ENGINEER AND GENERAL CONTRACTOR TO REBUILD REAR PORCHES ON THREE-UNIT BUILDINGS, NEGOTIATE WITH CABLE PROVIDER REGARDING EASEMENT RIGHTS TO SERVE WSQ APTS. NEGOTIATE WITH NATIONAL EOUITY FUND ("NEF") TO EXERCISE TACH'S OPTION TO ACQUIRE NEF'S 99% LIMITED PARTNERSHIP INTEREST IN WSQ APTS, INCLUDING PLANNING AND STRATEGY MEETINGS WITH ATTORNEYS AND ACCOUNTANTS, VALUATION DISCUSSIONS, AND CONTRACTING FOR CAPITAL NEEDS STUDY TO UNDERSTAND THE PHYSICAL CONDITION OF THE DEVELOPMENT.

SUPPLEMENTAL INFORMATION FOR PART IX-A TACH (CONTINUED) SUMMARY OF DIRECT CHARITABLE ACTIVITIES FOR THE TWELVE MONTHS ENDING 12/31/11

- 3. SERVICE AS "MASTER DEVELOPER" OF THE NORTH CENTER SENIOR CAMPUS, A 5 ACRE CAMPUS IN CHICAGO WHICH CONTAINS THREE HOUSING DEVELOPMENTS FOR SENIOR CITIZENS, TOTALING 282 APARTMENT AND TWO PUBLIC PARKS. THE GOAL OF THE MASTER DEVELOPER IS TO PROVIDE A BALANCED PROGRAM OF AFFORDABLE RENTAL AND HOMEOWNERSHIP (CONDOMINIUM) HOUSING FOR LOW INCOME SENIORS, ON A SENIOR HOUSING CAMPUS THAT PROVIDES URGENTLY NEEDED HOUSING RESOURCES TO AVOID DISPLACEMENT OF LONG TERM SENIOR RESIDENTS OF A RAPIDLY GENTRIFYING COMMUNITY. THIS YEAR'S ACTIVITIES INCLUDE I.) NEGOTIATION OF GRANT AGREEMENT WITH CITY OF CHICAGO FOR SUPPLEMENTAL FUNDS FOR INSTALLATION OF SECURITY CAMERAS, INCLUDING NEGOTIATION OF ACCESS AGREEMENT, II.) PREPARATION OF DOCUMENTATION FOR FINAL CLOSING, III.) OBTAINING OF ADDITIONAL CERTIFICATES OF COMPLETION FROM THE CITY, IV.) CLOSING OF TITLE, DEEDING COMPLETED PARKS TO THE CITY FOR PUBLIC PARK USE, V.) FORMAL NOTIFICATION TO ALL SURROUNDING SENIOR BUILDING OWNERS THAT PARKS HAVE BEEN FORMALLY TURNED OVER TO THE NON-PROFIT CENTRAL GREEN CORPORATION FOR MAINTENANCE AND OPERATION IN PERPETUITY.
- PROVIDING ASSET MANAGEMENT SERVICES AT GREENWOOD PARK AND LAKE VILLAGE EAST, 340 RENTAL APARTMENTS FOR LOW AND MODERATE INCOME FAMILIES AND THE ELDERLY LOCATED IN THE SOUTH KENWOOD NEIGHBORHOOD OF CHICAGO. AT GREENWOOD PARK: I.) PLANNING FOR MORTGAGE MATURITY IN 2011 INCLUDING CONSIDERATION OF REFINANCING AND BUILDING REHABILITATION ISSUES, II.) CONTRACTING FOR AND PARTICIPATION IN CAPITAL NEEDS STUDY, III.) WORKING ON SITE SECURITY ISSUES WITH STAFF AND SECURITY EQUIPMENT VENDORS, IV.) ARRANGING FOR ENERGY CONSUMPTION AUDIT, V.) REVIEW AND PARTICIPATION IN BUDGETING, AUDIT, TAX RETURN AND REAL ESTATE TAX APPEAL PROCESS. AT LAKE VILLAGE EAST, I.) WORKING ON ARRANGEMENTS FOR ELEVATOR MOTOR REBUILDING, II.) CONTINUING WORK ON WATER INFILTRATION PROBLEMS, III.) REVIEW AND PARTICIPATION IN BUDGETING, AUDIT, TAX RETURN AND REAL ESTATE TAX APPEAL PROCESS.

THIS TAX RETURN INCLUDES THE ACTIVITY FOR TACH DEVELOPMENT COMPANY LLC, EIN #87-0728951, AN ENTITY DISREGARDED FOR TAX PURPOSES. TECHNICAL ASSISTANCE CORPORATION FOR HOUSING IS THE SOLE MEMBER OF TACH DEVELOPMENT COMPANY LLC.

Form 8868

(Rev. January 2012)

Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return Department of the Treasury

File a separate application for each return

OMB No 1545-1709

THE THAT IND VEHICLE						. []
	filing for an Automatic 3-Month Extension, co filing for an Additional (Not Automatic) 3-Mon					. ▶ 🗓
Do not com	olete Part II unles s ou have already been gran	ted an auto	matic 3-month extension	on a previously filed For	m 8868	
Electronic fil	ling (e-file) You can electronically file Form in required to file Form 990-T), or an addition	8868 if you	u need a 3-month auto omatic) 3-month extens	matic extension of time sion of time	to file (6 r ectronically	file Form
8868 to reg	uest an extension of time to file any of the	forms listé	d in Part I or Part II wi	th the exception of Form	m 8870, Ir	nformation
Return for 1	Fransfers Associated With Certain Personal For more details on the electronic filing of the	il Benefit (Contracts, which must	be sent to the IRS If dick on e-file for Charit	n paper io ies & Nono	rolits
	tomatic 3-Month Extension of Time. Or					-
	required to file Form 990-T and requesting an				_ 	
•						▶ □
All other corn	porations (including 1120-C filers), paitnerships	REMICS	and trusts must use For	m 7004 to request an ext	ension of ti	me
to file income		,,		Enter filer's identifying		
•	Name of exempt organization or other filer, see ins	tructions		Employer identification		
Type or	-					
print	TECHNICAL ASSISTANCE CORP. FO	R HOUSI	IG	Z3-7058125		
File by the	Number, street and room or suite no. If a P.O. box	, see instruc	tions	Social security numb	er (SSN)	
due date for filing your	200 E. RANDOLPH STREET					
retum, See instructions	City town or post office, state, and ZIP code. For a	loreign add	ress see instructions	7 S.		
	CHICAGO, IL 606C1					
Enter the Re	turn code for the return that this application is t	for (file a se		ich.ge(urn)		. <u>[] i</u>
Application		Return	Application	` ,		Return
ls For		Code	Is For		·	Code
Form 990		01	Form 990-T (corporation	on) 1/4		07
Form 990-BL		02	Form 1041-A			08
Form 990-E2	······································	01	Form 4720			\$` 09
Form 990-PF		04	Form 5227	500	<u> </u>	10
	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-1	(trust other than above)	06	Form 8870			112
	s are in the care of ► RALPH BROWN e No ► 312 345-3205		FAX No ▶ 312 726	5-009i		
•	enization does not have an office or place of b					▶ □
•	or a Group Return, enter the organization's fou				If the	is is
			rt of the group, check the		and atta	ach
	names and EINs of all members the extension	n is for	<u>-</u> .			
	st an automatic 3-month (6 months for a corpo		ired to file Form 990-T)	extension of time		
until	08/15 , 20 12 to file the	exempt org	anization return for the c	organization named above	The exte	nsion is
for the	organization's return for					
▶ ≾	calendar year 20 11 or					
▶∐	tax year beginning	20 _	, and ending		20	
	ax year entered in line 1 is for less than 12 moi Change in accounting period	nths, check	reason. Initial re	eturn Final return		
3a If this	application is for Form 990-BL, 990-PF, 9	90-T. 4720	or 6069, enter the	tentative tax, less any	П	
nonrefundable credits. See instructions 3a \$						
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					3b \$	
	ce due. Subtract line 3b from line 3a Include				¢t•	0 . 0 (
(Electr	onic Federal Tax Payment System). See instru	uctions			3c \$ 40	0 . 0 (
Caution. If	you are going to make an electronic fund	withdrawal	with this Form 8868,	see Form 8453-EO ar	nd Form 8	879-EO for
payment ins						
_	ct and Paperwork Reduction Act Notice, see Instru	uctions			Farm 8868	(Rev 1-2012)
JSA 2054 4 000						

Form 8868 (Re	v 1-2012)				Page 2
 If you are 	filing for an Additional (Not Automatic) 3-Me	onth Exten	sion, complete only Part I	and check this box	▶[X
	complete Part II if you have already been gra				
	filing for an Automatic 3-Month Extension,			•	
Part II	Additional (Not Automatic) 3-Month Ex			inal (no copies needed)	
				nter filer's identifying number, se	a instructions
	Name of exempt organization or other filer, see instructions			Employer identification number (EIN) or	
Type or					(, -
print	TECHNICAL ASSISTANCE CORP FO Number, street, and room or suite no If a P O bo	R HOUST		Social security number (SSN	
File by the	1	X SEE INSIDE	trons	Social security number 1951	'7
due date for	200 E. RANDOLPH STREET				
filing your return See	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions		
instructions	CHICAGO, IL 60601				
Enter the Re	aturn code for the return that this application	is for (file a	separate application for ea	ach return)	. 0 4
Application		Return	Application		Return
ls For		Code	Is For		Code
Form 990		01			1
Form 990-B	1	02	Form 1041-A		08
Form 990-E		01	Form 4720		09
Form 990-PI		04	Form 5227		10
		 	·		
	(sec_401(a) or 408(a) trust)	0.5	Form 6069		11
	(trust other than above)	06	Form 8870		12
	ot complete Part II if you were not already	granted ar	automatic 3-month exter	ision on a previously filed Fol	m 8868
	s are in the care of RALPH BROWN				
	e No ▶ 312 345-3205			0091	
 If the org; 	anization does not have an office or place of	business in	i the United States, check t	his box \dots , \dots , \dots , \dots	. ▶ 📖
 If this is fe 	or a Group Return enter the organization's fo	ur digit Gro	up Exemption Number (GE	N) If t	his is
for the whol	e group, check this box	fit is for pa	irt of the group, check this	box ▶ 🔲 and a	tach a
list with the	names and EINs of all members the extensio	n is for			
4 I reque	est an additional 3-month extension of time u	ntil	1	1/15 20 12	
-	lendar year 2011, or other tax year beginn		, 20 , ar	nd ending	20
	ax year entered in line 5 is for less than 12 m			1	
	Change in accounting period				
	in detail why you need the extension INFOR	иоттом	FROM A THIRD PARTY	HAS NOT BEEN	
	EVED. THIS INFORMATION IS NECES				
		DIEL TI	ORDER TO THE A C	ONE BETT AND	
VICCOR	VATE PETURN				
0 . 16 05 -		00 T 4700	2020	**************************************	
	application is for Form 990-BL 990-PF, 99	90-1 4/20	, or 6069, enter the ten	* * 1	
	undable credits. See instructions	~ ~~		,8a \$	
	application is for Form 990-PF, 990-T			1 1	
estima	ited tax payments made. Include any pr	nor year c	overpayment allowed as	a credit and any	
amour	nt paid previously with Form 8868			8b \$	
c Baland	ce Due. Subtract line 8b from line 8a Include	your paym	ent with this form, if requi	red by using EFTPS	
(Electr	ronic Federal Tax Payment System). See instru	ictions		8c \$	
	Signature and Verific	ation mu	st be completed for F	Part II only.	
Under penaltier	s of perjury I declare that I have examined this form		•	•	dne and belief
	and complete, and that I am authorized to prepare this for	-	Companying solicodies and State	name and to the pest of the month	ogo and benon
	, ,,				
s >	107111111111111111111111111111111111111	OVICE	Title ► CPA	Date ► ¶	la
Signature >	SE CONTRACTOR SE	7410-	Tale > CPN	Data 2	2112
	INTERIVAL RED ASSISTAN W. 8.1 - FIELD ASSISTAN W. 8.1 - FIELD ARK, IL. 60 SCHILL	1476		Form 886	8 (Rev 1 2012)
	W&I-FBBARK IL OI	, , , , ,			
	SCHILT TO THE STATE OF THE STAT				
	AUG U 7 2012				
	HUU o ,	۸.			
	RECEIVED)			
	スモンラスイ				
	24304				