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Form **990**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0047
2011
Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CONGREGATIONAL HOME INC	D Employer identification number 39-1167483
	Doing Business As	E Telephone number (262) 781-0550
	Number and street (or P O box if mail is not delivered to street address) Room/suite 3150 LILLY RD	G Gross receipts \$ 15,507,980
	City or town, state or country, and ZIP + 4 BROOKFIELD, WI 53005	
	F Name and address of principal officer CHARLES T NELSON 3150 LILLY RD BROOKFIELD, WI 53005	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ WWW.CONGREGATIONALHOME.COM		

K Form of organization Corporation Trust Association Other ▶ **L** Year of formation 1973 **M** State of legal domicile WI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE CONGREGATIONAL HOME IS AN EXTENSION OF THE MISSION OF FIRST CONGREGATIONAL CHURCH ITS PURPOSE IS TO CREATE AND MAINTAIN A CARING COMMUNITY FOR THE ELDERLY WHICH OFFERS HOUSING, HEALTH CARE AND OTHER SERVICES THE HOME DECLARES IT IMPORTANT TO RESPECT AND HONOR THE DIGNITY OF EACH INDIVIDUAL RESIDENT, TO MAINTAIN SUPERIOR QUALITY FACILITIES AND PROGRAMMING, TO CONSIDER SERVICES THAT CAN BE DELIVERED INTO THE COMMUNITY, AND TO MAINTAIN FINANCIAL STABILITY		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)		
	4 Number of independent voting members of the governing body (Part VI, line 1b)		
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)		
	6 Total number of volunteers (estimate if necessary)		
	7a Total unrelated business revenue from Part VIII, column (C), line 12		
7b Net unrelated business taxable income from Form 990-T, line 34			
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	313,687	38,409
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,296,291	10,325,753
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	180,929	441,468
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,790,907	10,805,630
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,305,266	7,318,642
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ ⁰		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,461,938	2,986,784	
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	8,767,204	10,305,426	
19 Revenue less expenses Subtract line 18 from line 12	1,023,703	500,204	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	21,646,729	21,697,838
	22 Net assets or fund balances Subtract line 21 from line 20	1,954,621	1,763,928

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2012-05-08 Date
	CHARLES T NELSON PRESIDENT Type or print name and title	

Paid Preparer's Use Only	Preparer's signature ▶ DANIEL LIGHTFUSS	Date 2012-05-08	Check if self-employed <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 KOMISAR BRADY & CO LLP 135 SOUTH 84TH ST STE 200 MILWAUKEE, WI 53214			EIN ▶ Phone no ▶ (414) 271-3966

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III Yes No

1 Briefly describe the organization's mission

THE CONGREGATIONAL HOME IS AN EXTENSION OF THE MISSION OF FIRST CONGREGATIONAL CHURCH ITS PURPOSE IS TO CREATE AND MAINTAIN A CARING COMMUNITY FOR THE ELDERLY WHICH OFFERS HOUSING, HEALTH CARE AND OTHER SERVICES THE HOME DECLARES IT IMPORTANT TO RESPECT AND HONOR THE DIGNITY OF EACH INDIVIDUAL RESIDENT, TO MAINTAIN SUPERIOR QUALITY FACILITIES AND PROGRAMMING, TO CONSIDER SERVICES THAT CAN BE DELIVERED INTO THE COMMUNITY, AND TO MAINTAIN FINANCIAL STABILITY

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

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 9,086,889 including grants of \$) (Revenue \$)

THE ORGANIZATION MAINTAINS A CARING COMMUNITY FOR ELDERLY PEOPLE, OFFERING HOUSING, HEALTH CARE, AND QUALITY OF LIFE SERVICES

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 9,086,889

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>		No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i> <input checked="" type="checkbox"/>		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> <input checked="" type="checkbox"/>		No
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> <input checked="" type="checkbox"/>		No
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> <input checked="" type="checkbox"/>	Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> <input checked="" type="checkbox"/>		No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> <input checked="" type="checkbox"/>		No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>	Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>		No
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> <input checked="" type="checkbox"/>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> <input checked="" type="checkbox"/>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i>		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Part II and IV.</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S? <i>If "Yes," complete Schedule F, Part III and IV.</i>		No
17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question number, question text, and Yes/No columns. Includes rows for 1a, 1b, 1c, 2a, 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7, 7a, 7b, 7c, 7d, 7e, 7f, 7g, 7h, 8, 9, 9a, 9b, 10, 10a, 10b, 11, 11a, 11b, 12a, 12b, 13, 13a, 13b, 13c, 14a, 14b.

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed WI
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization

BETH FIELDS
 3150 LILLY RD
 BROOKFIELD, WI 53005
 (262) 781-0550

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

Check if Schedule O contains a response to any question 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, and **current** key employees 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, or 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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARY J YORK CHAIR	3 00	X		X				0	0	0
(2) LAURA PETRIE ANDERSON VICE CHAIR	1 00	X		X				0	0	0
(3) TOM GALFANO TREASURER	3 00	X		X				0	0	0
(4) ARLETTE R LINDBERGH SECRETARY	1 00	X		X				0	0	0
(5) MARC J BLAZICH TREASURY MOD	1 00	X		X				0	0	0
(6) HON THERESA M ESTNESS BOARD MEMBER	1 00	X						0	0	0
(7) REBECCA A HAEFNER MD BOARD MEMBER	1 00	X						0	0	0
(8) SHARON KOENINGS BOARD MEMBER	1 00	X						0	0	0
(9) MICHAEL D SIMMONS BOARD MEMBER	1 00	X						0	0	0
(10) THOMAS S STACEY BOARD MEMBER	1 00	X						0	0	0
(11) CAROL J WITTIG BOARD MEMBER	1 00	X						0	0	0
(12) REV BARRY W SZYMANSKI BOARD MEMBER	1 00	X						0	0	0
(13) CHARLES T NELSON PRESIDENT	40 00				X			215,198	0	17,841
(14) DARLETTE KLEINMANN NURSING	40 00					X		105,798	0	13,970
(15) SUSAN FALK-FISCHER MARKETING	40 00					X		105,190	0	13,466

Part VIII Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	38,409				
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f ▶	38,409				
Program Service Revenue	2a	GROSS RECEIPTS	10,325,753	10,325,753			
	b	_____					
	c	_____					
	d	_____					
	e	_____					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f ▶	10,325,753				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) ▶	183,379			183,379	
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties ▶					
	6a	Gross rents	(i) Real				
			(ii) Personal				
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) ▶					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	4,960,439			
			(ii) Other				
	b	Less cost or other basis and sales expenses	4,688,901	13,449			
c	Gain or (loss)	271,538	-13,449				
d	Net gain or (loss) ▶	258,089	258,089				
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
b	Less direct expenses b						
c	Net income or (loss) from fundraising events . . ▶						
9a	Gross income from gaming activities See Part IV, line 19 a						
b	Less direct expenses b						
c	Net income or (loss) from gaming activities . . ▶						
10a	Gross sales of inventory, less returns and allowances a						
b	Less cost of goods sold b						
c	Net income or (loss) from sales of inventory . . ▶						
	Miscellaneous Revenue	Business Code					
11a	_____						
b	_____						
c	_____						
d	All other revenue						
e	Total. Add lines 11a-11d ▶						
12	Total revenue. See Instructions ▶		10,805,630	10,583,842		183,379	

Part IX Statement of Functional Expenses

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

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

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	233,039		233,039	
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	5,762,456	5,272,665	489,791	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	113,276	108,397	4,879	
9	Other employee benefits	743,115	662,730	80,385	
10	Payroll taxes	466,756	411,708	55,048	
11	Fees for services (non-employees)				
a	Management				
b	Legal	6,577		6,577	
c	Accounting	32,550		32,550	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	211,287	187,341	23,946	
12	Advertising and promotion	81,290	38,515	42,775	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	402,240	382,128	20,112	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,967	3,188	2,779	
20	Interest	5,500	5,225	275	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	648,520	616,094	32,426	
23	Insurance				
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, list line 24f expenses on Schedule O)				
a	SUPPLIES	651,563	614,221	37,342	
b	REPAIRS & MAINTENANCE	322,221	264,019	58,202	
c	FOOD SUPPLIES	304,596	304,596		
d	CHARITY CARE	140,741	140,741		
e					
f	All other expenses	173,732	75,321	98,411	
25	Total functional expenses. Add lines 1 through 24f	10,305,426	9,086,889	1,218,537	0
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	677,627	1	454,118
	2 Savings and temporary cash investments	812,800	2	974,548
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	193,296	4	610,345
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	38,568	8	42,682
	9 Prepaid expenses and deferred charges	56,000	9	71,957
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	21,498,245		
	b Less accumulated depreciation	11,016,125	10c	10,482,120
	11 Investments—publicly traded securities	9,056,257	11	9,062,068
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	21,646,729	16	21,697,838	
Liabilities	17 Accounts payable and accrued expenses	541,159	17	549,871
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	360,000	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,053,462	25	1,214,057
	26 Total liabilities. Add lines 17 through 25	1,954,621	26	1,763,928
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	15,010,144	27	15,171,502
	28 Temporarily restricted net assets	3,875,913	28	3,956,003
	29 Permanently restricted net assets	806,051	29	806,405
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	19,692,108	33	19,933,910	
34 Total liabilities and net assets/fund balances	21,646,729	34	21,697,838	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,805,630
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,305,426
3	Revenue less expenses Subtract line 2 from line 1	3	500,204
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,692,108
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-258,402
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	19,933,910

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

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

2011

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
CONGREGATIONAL HOME INC

Employer identification number

39-1167483

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

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

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

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

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

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV.) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	149,441	228,915	117,837	313,687	38,409	848,289
2 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	9,019,203	9,249,813	8,984,987	9,296,291	10,325,753	46,876,047
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 furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	9,168,644	9,478,728	9,102,824	9,609,978	10,364,162	47,724,336
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	26,426	24,602	25,187			76,215
c Add lines 7a and 7b	26,426	24,602	25,187			76,215
8 Public Support (Subtract line 7c from line 6)						47,648,121

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	9,168,644	9,478,728	9,102,824	9,609,978	10,364,162	47,724,336
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	310,806	272,473	275,974	107,621	183,379	1,150,253
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	310,806	272,473	275,974	107,621	183,379	1,150,253
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)	9,479,450	9,751,201	9,378,798	9,717,599	10,547,541	48,874,589
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	97.490 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	97.210 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	2.000 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	3.000 %

- 19a 33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2011

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization CONGREGATIONAL HOME INC

Employer identification number 39-1167483

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

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

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

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

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

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)	<input type="checkbox"/>	<input type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		781,044		781,044
b Buildings		15,329,127	6,893,462	8,435,665
c Leasehold improvements				
d Equipment		4,878,298	3,706,492	1,171,806
e Other		509,776	416,171	93,605
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				10,482,120

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,805,630
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	10,305,426
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	500,204
4	Net unrealized gains (losses) on investments	4	-258,402
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-258,402
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	241,802

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	10,560,677
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-258,402
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	13,449
e	Add lines 2a through 2d	2e	-244,953
3	Subtract line 2e from line 1	3	10,805,630
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	10,805,630

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	10,318,875
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	13,449
e	Add lines 2a through 2d	2e	13,449
3	Subtract line 2e from line 1	3	10,305,426
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	10,305,426

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
RECONCILIATION OF CHANGES - OTHER	SCHEDULE D, PAGE 4, PART XI, LINE 8	GAIN ON SALE OF ASSETS 13,449 GAIN ON SALE OF ASSETS -13,449
REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	GAIN ON SALE OF ASSETS 13,449
EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XIII, LINE 2D	GAIN ON SALE OF ASSETS 13,449
SUPPLEMENTAL FINANCIAL INFORMATION	SCHEDULE D, PAGE 4, PART XIV	THE LOSS OF 13,449 ON THE DISPOSAL OF ASSETS IS RECORDED AS AN EXPENSE ON THE FINANCIAL STATEMENTS, BUT OFFSETS REVENUE ON LINE 71A OF PART VIII OF THE TAX RETURN

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
CONGREGATIONAL HOME INC

Employer identification number

39-1167483

Part I Questions Regarding Compensation

Yes No

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items

- First-class or charter travel
- Travel for companions
- Tax idemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (e g , maid, chauffeur, chef)

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a	Yes	
5b		No
6a		No
6b		No
7		No
8		No
9		

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
COMPENSATION CONTINGENT UPON REVENUES OF ORGANIZATION	SCHEDULE J, PAGE 1, PART I, LINE 5A	THE BONUS POOL IS PROVIDED IF OPERATING REVENUE IS EQUAL TO OR GREATER THAN THE BUDGETED AMOUNT AND IF NET INCOME FROM OPERATIONS EXCEEDS THE BUDGET. THE MAXIMUM BONUS POOL IS LIMITED TO 0.008 OF REVENUE IF NET OPERATING INCOME EXCEEDS BUDGET BY 100%. THE COO RECEIVES 20% OF THE AVAILABLE BUDGET POOL. THE REMAINING 80% OF THE AVAILABLE BONUS POOL IS DISTRIBUTED TO 9 DEPARTMENT HEADS BASED ON MERIT.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization
CONGREGATIONAL HOME INC

Employer identification number

39-1167483

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	THE CONGREGATIONAL HOME IS AN EXTENSION OF THE MISSION OF FIRST CONGREGATIONAL CHURCH ITS PURPOSE IS TO CREATE AND MAINTAIN A CARING COMMUNITY FOR THE ELDERLY WHICH OFFERS HOUSING, HEALTH CARE AND OTHER SERVICES THE HOME DECLARES IT IMPORTANT TO RESPECT AND HONOR THE DIGNITY OF EACH INDIVIDUAL RESIDENT, TO MAINTAIN SUPERIOR QUALITY FACILITIES AND PROGRAMMING, TO CONSIDER SERVICES THAT CAN BE DELIVERED INTO THE COMMUNITY, AND TO MAINTAIN FINANCIAL STABILITY
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	NO REVIEW WAS OR WILL BE CONDUCTED
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE CONFLICT OF INTEREST POLICY IS MONITORED AND ENFORCED BY THE BOARD OF DIRECTORS IF THE BOARD REASONABLY BELIEVES THAT A DIRECTOR OR OFFICER HAS FAILED TO DISCLOSE EITHER AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, OR ALL MATERIAL FACTS SURROUNDING AN ACTUAL OR POSSIBLE CONFLICT AS REQUIRED, THE DIRECTOR OR OFFICER WILL BE GIVEN AN OPPORTUNITY TO EXPLAIN SUCH ALLEGED FAILURE TO DISCLOSE AFTER HEARING THE RESPONSE THE BOARD WILL CONDUCT SUCH ADDITIONAL INVESTIGATION AS MAY BE APPROPRIATE IF THE BOARD DETERMINES THAT THE DIRECTOR OR OFFICER HAS FAILED THE REQUIREMENTS TO DISCLOSE, THE BOARD SHALL TAKE APPROPRIATE DISCIPLINARY OR CORRECTIVE ACTION
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD HAS A COMPENSATION COMMITTEE THAT REVIEWS AND APPROVES THE COMPENSATION FOR THE PRESIDENT
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE BOARD MAKES COPIES OF ITS AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST
OTHER CHANGES IN NET ASSETS EXPLANATION	FORM 990, PART XI, LINE 5	CHANGE IN NET ASSETS OF 258,402 IS DUE TO UNREALIZED LOSSES

Form **4562**

**Depreciation and Amortization
(Including Information on Listed Property)**

OMB No 1545-0172

2011

Attachment
Sequence No **179**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return CONGREGATIONAL HOME INC	Business or activity to which this form relates CONGREGATIONAL HOME	Identifying number 39-1167483
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Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7		8
9 Tentative deduction Enter the smaller of line 5 or line 8		9
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562		10
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)		11
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11		12
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	633,471
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		14,990	3 0	HY	S/L	2,102
b 5-year property		26,020	5 0	HY	S/L	3,125
c 7-year property		6,886	7 0	HY	S/L	984
d 10-year property		216,485	10 0	HY	S/L	5,467
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			27 5 yrs	MM	S/L	
			39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year		63,461	12 yrs	HY	S/L	3,371
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	648,520
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

26 Property used more than 50% in a qualified business use

27 Property used 50% or less in a qualified business use

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows include 30-33 (miles driven) and 34-36 (availability and use questions).

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for Section C with questions 37-41 and Yes/No columns. Includes a Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for Section VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2011 tax year (see instructions)

43 Amortization of costs that began before your 2011 tax year **43**

44 Total. Add amounts in column (f) See the instructions for where to report **44**



CONGREGATIONAL HOME INV AGY – MAIN

**Account Number:
Statement Period:**

**61-0693-00-4
01/01/11 – 12/31/11**

Sale Activity

Date

Proceeds

Realized Gain/Loss

Common Stocks

Artisan Mid Cap Value Fund – Inv
#1464
Sold 1113 089 Shs 07/07/11
@ 22.46
Long Term Capital Gains Dist
of \$ 1.122 Per Sh on 9,108 Sh

07/08/11

25,000.00

9,884.25

12/19/11

10,227.81

10,227 81

CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity

	Date	Proceeds	Realized Gain/Loss
Davis N Y Venture Fd Inc Cl Y #909			
Sold 1375 894 Shs 07/07/11 @ 36 34	07/08/11	50,000 00	10,838 02
Sold 11475 505 Shs 09/30/11 @ 29 8	10/03/11	341,970 05	56,496 32
FMI Large Cap Fund #133 Long Term Capital Gains Dist of \$ 338 Per Sh on 22,711 Sh	11/03/11	7,687 58	7,687 58
Goldman Sachs Small Cap Value Fd Inst #651			
Sold 547 765 Shs 07/07/11 @ 45 64	07/08/11	25,000.00	10,719 72
Long Term Capital Gains Dist of \$ 671 Per Sh on 5,047 Sh	12/09/11	3,389 59	3,389.59
Goldman Sachs Large Cap Value Fund I #1216			
Sold 30715 408 Shs 08/22/11 @ 9 88	08/23/11	303,468 23	48,468.23
Marshall Small Cap Growth Fd #612			
Sold 1194.458 Shs 07/07/11 @ 20 93	07/08/11	25,000 00	5,133.40
Sold 1546 073 Shs 08/23/11 @ 16.17	08/24/11	25,000 00	839 18
Long Term Capital Gains Dist of \$ 1 105 Per Sh on 10,844 Sh	12/08/11	11,983.40	11,983.40
Vanguard Mid Cap Index Fd Cl I #864			
Sold 1104 240 Shs 07/07/11 @ 22 64	07/08/11	25,000 00	10,459.02
Wells Fargo Advantage Discovery Cl Adm #3703			
Sold 905 141 Shs 07/07/11 @ 27 62	07/08/11	25,000 00	3,385 24
Sold 1173 709 Shs 08/23/11 @ 21.3	08/24/11	25,000 00	-3,028.17
Long Term Capital Gains Dist of \$ 990 Per Sh on 8,195 Sh	12/13/11	8,116 04	8,116 04
Fixed Income			
Amgen Inc Sr NT 4 10% Dtd 06/30/2011 Due 06/15/2021 Callable			
Sold 30000 10/25/11 To Goldman Sachs & Co @ 108 019	10/28/11	32,405 70	2,483 10



CONGREGATIONAL HOME INV AGY - MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 - 12/31/11

Sale Activity			
	Date	Proceeds	Realized Gain/Loss
Amvescap PLC Sr NT 5 625% Dtd 04/17/2007 Due 04/17/2012 Callable Sold 50000 07/28/11 To Jefferies & Co Bonds Direct Div @ 103.316	08/02/11	51,658 00	579 94
BB&T Corp Sr Medium Term Nts 3 85% Dtd 07/27/2009 Due 07/27/2012 Sold 50000 04/26/11 To Goldman Sachs & Co @ 103.514	04/28/11	51,757 00	1,259 19
Bnp Paribas Bnp Paribas US Var Rate Dtd 01/10/2011 Due 01/10/2014 Non-Callable Sold 30000 10/28/11 To Bnp Paribas Securities Bonds @ 96 052	11/02/11	28,815.60	-1,209 60
Bank N S Halifax Sr NT 2 90% Dtd 03/29/2011 Due 03/29/2016 Sold 18000 11/09/11 To Deutsche Bank Securities Inc @ 104.132	11/10/11	18,743 76	773 64
Sold 22000 11/09/11 To HSBC Securities Inc @ 103.905	11/10/11	22,859 10	895 62
Bear Stearns Cos Inc Global NT 5 30% Dtd 10/31/2005 Due 10/30/2015 Sold 35000 11/04/11 To Ftn Financial Securities Corp @ 108.499	11/09/11	37,974 65	5,215.00
Bear Stearns Cos Inc Sr NT 5 35% Dtd 01/25/2007 Due 02/01/2012 Sold 35000 06/22/11 To Jefferies & Co Bonds Direct Div @ 102 91	06/27/11	36,018 50	1,064.70
Berkshire Hathaway Inc Del Sr NT Fltg Rate Dtd 02/11/2010 Due 02/11/2013 Sold 35000 04/20/11 To BNY Capital Markets Inc @ 100.5841	04/26/11	35,204 44	163.04

CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity

	Date	Proceeds	Realized Gain/Loss
Best Buy Inc NT 5 50% Dtd 03/11/2011 Due 03/15/2021 Putable Callable Sold 30000 10/24/11 To Bnp Paribas Securities Bonds @ 94 376	10/27/11	28,312 80	1,573 20
Boeing Cap Corp Sr NT 3.25% Dtd 10/27/2009 Due 10/27/2014 Callable Sold 35000 09/14/11 To US Bancorp Investments Inc @ 107 193	09/19/11	37,517 55	1,532 46
Caterpillar Finl Svcs Corp Medium Term Nts Tranche # Tr 00819 6 20% Dtd 09/26/2008 Due 09/30/2013 Sold 35000 09/14/11 To US Bancorp Investments Inc @ 110 492	09/19/11	38,672 20	3,709 65
Caterpillar Finl Svcs Mtns Sr NT 1 375% Dtd 05/20/2011 Due 05/20/2014 Non-Callable Sold 45000 11/29/11 To US Bancorp Investments Inc @ 101.073	12/02/11	45,482 85	506.70
Cooperatieve Centrale Raiffeisen Boerenleenbank B A Structured Structured Utrecht Brh Tranche # Tr 00035 2 125% Dtd 10/13/2010 Due 10/13/2015 Sold 25000 10/31/11 To RBC Cap Mkts (Dain Rauscher) @ 100.517	11/03/11	25,129 25	190 50
Countrywide Finl Corp MTN Bk Var Rate Dtd 06/07/2007 Due 05/07/2012 Non-Callable Sold 35000 01/28/11 To Banc of Amer Secs LLC Montgomer @ 99 4645	01/31/11	34,812 58	6,106 98
Credit Suisse First Boston USA Inc NT 6 125% Dtd 11/06/2001 Due 11/15/2011 Callable Recd Proceeds on Maturity of 35,000 Par Value	11/15/11	35,000 00	



CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity

	Date	Proceeds	Realized Gain/Loss
Danaher Corp Del Sr NT 1 30% Dtd 06/23/2011 Due 06/23/2014 Callable Sold 30000 09/14/11 To US Bancorp Investments Inc @ 101.662	09/19/11	30,498 60	523 20
Discovery Communications LLC Sr NT 3.70% Dtd 06/03/2010 Due 06/01/2015 Callable Sold 40000 06/20/11 To Citadel Securities LLC @ 105.757	06/23/11	42,302 80	2,362 40
Eog Res Inc Sr NT 2 50% Dtd 11/23/2010 Due 02/01/2016 Callable Sold 40000 04/21/11 To Wachovia Securities Capital Mar @ 98.248	04/27/11	39,299.20	-595.20
Enterprise Prods Oper LLC 5 20% Dtd 05/20/2010 Due 09/01/2020 Callable Sold 40000 05/24/11 To RBC Cap Mkts (Dain Rauscher) @ 106.089	05/27/11	42,435 60	2,555 20
Federal Home Ln Mtg Corp Partn Gold Group #J03500 6 000% Dtd 09/01/06 Due 10/01/2021 IPD14			
Prin Pmt For December 2010	01/18/11	180.98	
Prin Pmt For January 2011	02/15/11	174 74	
Prin Pmt For February 2011	03/15/11	1,404 33	
Prin Pmt For March 2011	04/15/11	811.32	
Prin Pmt For April 2011	05/16/11	162.52	
Prin Pmt For May 2011	06/15/11	137 48	
Prin Pmt For June 2011	07/15/11	724 16	
Prin Pmt For July 2011	08/15/11	168 08	
Prin Pmt For August 2011	09/15/11	156 45	
Prin Pmt For September 2011	10/17/11	654 68	
Prin Pmt For October 2011	11/15/11	199 77	
Prin Pmt For November 2011	12/15/11	132.23	
Federal Home Ln Mtg Corp Partn Gold Group #C46769 7 000% Dtd 01/01/01 Due 01/01/2031 IPD14			
Prin Pmt For December 2010	01/18/11	1.46	
Prin Pmt For January 2011	02/15/11	1 47	
Prin Pmt For February 2011	03/15/11	1.48	
Prin Pmt For March 2011	04/15/11	1 49	
Prin Pmt For April 2011	05/16/11	1 50	
Prin Pmt For May 2011	06/15/11	3 17	

CONGREGATIONAL HOME INV AGY - MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 - 12/31/11

Sale Activity

	Date	Proceeds	Realized Gain/Loss
Prin Pmt For June 2011	07/15/11	1 53	
Prin Pmt For July 2011	08/15/11	1.54	
Prin Pmt For August 2011	09/15/11	1 55	
Prin Pmt For September 2011	10/17/11	1 56	
Prin Pmt For October 2011	11/15/11	239 80	
Prin Pmt For November 2011	12/15/11	0 71	
Federal Home Ln Mtg Corp Deb 6.00% Dtd 06/15/2001 Due 06/15/2011			
Recd Proceeds on Maturity of 45,000 Par Value	06/15/11	45,000 00	-1,688 85
Federal Natl Mtg Assn 4 50% Dtd 01/20/2006 Due 02/15/2011			
Recd Proceeds on Maturity of 70,000 Par Value	02/15/11	70,000 00	
Federal Natl Mtg Assn Nts 5 50% Dtd 03/26/2001 Due 03/15/2011			
Recd Proceeds on Maturity of 95,000 Par Value	03/15/11	95,000 00	2,349 02
Federal Natl Mtg Assn 5 00% Dtd 10/19/2006 Due 10/15/2011			
Recd Proceeds on Maturity of 50,000 Par Value	10/17/11	50,000 00	307.00
Federal Natl Mtg Assn Gtd Passthru CTF Pool #545968 5 500% Dtd 09/01/02 Due 10/01/2017 IPD24			
Prin Pmt For December 2010	01/25/11	254 65	
Prin Pmt For January 2011	02/25/11	210 48	
Prin Pmt For February 2011	03/25/11	242.17	
Sold 6612 640 04/15/11 To Nomura Securities Intl	04/18/11	7,158 18	-1,018 51
Prin Pmt For March 2011	04/25/11	170 25	
Federal Home Ln Mtg Corp Multiclass Mtg Partn Ctfs Gtd Ser 2745 Cl Ay 5 00% Dtd 02/01/2004 Due 10/15/2029 IPD14			
Prin Pmt For 01/01/11	01/18/11	5,314 92	
Prin Pmt For 02/01/11	02/15/11	2,849 32	
Prin Pmt For 03/01/11	03/15/11	2,172 91	
Prin Pmt For 04/01/11	04/15/11	2,376 48	
Prin Pmt For 05/01/11	05/16/11	1,925 31	
Prin Pmt For 06/01/11	06/15/11	1,769 96	
Recd Proceeds on Final Paydown of 84 040 Par Value	07/15/11	84 04	-437 50



CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity

	Date	Proceeds	Realized Gain/Loss
Fiserv Inc Sr NT 6.125% Dtd 11/20/2007 Due 11/20/2012 Callable Tendered 22000 Par 06/14/2011 @ 1077.93 Per 1000 Princ AMT	06/14/11	23,714.46	4,235.88
GNMA Gtd Pass Thru CTF Pool #474779 6 500% Dtd 04/01/01 Due 04/15/2031 Prin Pmt For December 2010 Prin Pmt For January 2011 Prin Pmt For February 2011 Prin Pmt For March 2011 Prin Pmt For April 2011 Sold 2757.880 04/25/11 To Citigroup Global Markets Inc Original Face Value 75,000 @ 113	01/18/11 02/15/11 03/15/11 04/15/11 05/16/11 05/18/11	7 49 404.63 7.75 6 89 360 11 3,116 40	522.58
GNMA Gtd Pass Thru CTF Pool #511734 7.500% Dtd 10/01/00 Due 10/15/2030 Prin Pmt For December 2010 Prin Pmt For January 2011 Prin Pmt For February 2011 Prin Pmt For March 2011 Prin Pmt For April 2011 Prin Pmt For May 2011 Prin Pmt For June 2011 Prin Pmt For July 2011 Prin Pmt For August 2011 Prin Pmt For September 2011 Prin Pmt For October 2011 Prin Pmt For November 2011	01/18/11 02/15/11 03/15/11 04/15/11 05/16/11 06/15/11 07/15/11 08/15/11 09/15/11 10/17/11 11/15/11 12/15/11	0.91 0 91 0 92 0.93 0.93 0 94 0.94 0.95 0 96 0.96 0.97 0 98	
Goldman Sachs Group Inc Medium Term Nts Tranche # Tr 00580 5.375% Dtd 03/08/2010 Due 03/15/2020 Sold 20000 07/25/11 To Wachovia Securities Capital Mar @ 102 766	07/27/11	20,553.20	1,980 40
Goldman Sachs Group Inc Sr Gbl 5 25% Dtd 07/27/2011 Due 07/27/2021 Non-Callable Sold 60000 10/04/11 To Morgan Stanley & Co Inc @ 94 662	10/07/11	56,797.20	-3,170 40
ITT Corp 4 90% Dtd 05/01/2009 Due 05/01/2014 Callable Full Call @ 109 8161 on 10/20/2011 of 45,000 Par Value	10/20/11	49,417.24	4,034.04

CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity

	Date	Proceeds	Realized Gain/Loss
Intel Corp Sr NT 1 95% Dtd 09/19/2011 Due 10/01/2016 Callable Sold 45000 10/17/11 To Morgan Stanley & Co Inc @ 101.481	10/20/11	45,666 45	735 30
J P Morgan Chase & Co Medium Term Sr Nts Tranche # Sr 00192 4 85% Dtd 06/16/2008 Due 06/16/2011 Recd Proceeds on Maturity of 35,000 Par Value	06/16/11	35,000 00	11 55
Keycorp Medium Term Nts Sr NT 5 10% Dtd 03/24/2011 Due 03/24/2021 Non-Callable Sold 40000 11/03/11 To Citigroup Global Markets Inc @ 104 966	11/08/11	41,986 40	2,023 60
Merrill Lynch & Co Inc Medium Term Nts Tranche # Tr 00677 6 875% Dtd 04/25/2008 Due 04/25/2018 Sold 35000 11/04/11 To Citadel Securities LLC @ 102 441	11/09/11	35,854 35	884 45
Morgan Stanley Sr NT 5.50% Dtd 07/28/2011 Due 07/28/2021 Sold 60000 10/19/11 To Chase Secs @ 94 815	10/24/11	56,889 00	5,721 60
PepsiAmericas Inc NT 4 375% Dtd 02/12/2009 Due 02/15/2014 Callable Sold 60000 08/10/11 To Dain Rauscher Incorporated @ 109.097	08/15/11	65,458 20	4,003 80
Prologis NT 6 25% Dtd 03/16/2010 Due 03/15/2017 Callable Sold 40000 03/04/11 To Dain Rauscher Incorporated @ 109.296	03/09/11	43,718 40	3,863 60
Santander Hldgs USA Inc Sr NT 4 625% Dtd 04/19/2011 Due 04/19/2016 Non-Callable Sold 30000 04/18/11 To Citigroup Global Markets Inc @ 101 321	04/21/11	30,396 30	528 60



CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity			
	Date	Proceeds	Realized Gain/Loss
Telecom Italia Cap Gtd Sr NT Ser B 5.25% Dtd 05/15/2004 Due 11/15/2013 Callable Sold 40000 11/15/11 To Bnp Paribas Securities Bonds @ 97 641	11/18/11	39,056.40	1,433.60
US Treasury Note 4.500% Dtd 02/28/06 Due 02/28/2011 Recd Proceeds on Maturity of 30,000 Par Value	02/28/11	30,000 00	458 20
US Treasury Note 2.625% Dtd 08/15/2010 Due 08/15/2020 Sold 55000 01/14/11 To Barclays Capital Inc Fixed Inc @ 95 14413125	01/18/11	52,329 27	-2,615 09
Sold 55000 03/16/11 To Citigroup Global Markets Inc @ 95.796475	03/17/11	52,688 06	-35 01
US Treasury Note 3 625% Dtd 02/15/2011 Due 02/15/2021 Sold 40000 03/21/11 To RBS Securities Inc. @ 102 6167875	03/22/11	41,046 71	71 55
US Treasury Note 3.125% Dtd 05/15/2011 Due 05/15/2021 Sold 45000 07/22/11 To RBS Securities Inc. @ 101 3824125	07/25/11	45,622 09	217.85
Sold 60000 08/19/11 To HSBC Securities Inc @ 109 5621	08/22/11	65,737 26	277.31
US Treasury Note 2 125% Dtd 08/15/2011 Due 08/15/2021 Sold 60000 11/01/11 To Deutsche Bank Securities Inc @ 100 9371	11/02/11	60,562.26	1,101.08
Sold 60000 11/09/11 To Deutsche Bank Securities Inc @ 101 59335	11/10/11	60,956.01	266 71
US Treasury Note 1.00% Dtd 09/30/2011 Due 09/30/2016 Sold 50000 10/18/11 To Barclays Capital Inc Fixed Inc @ 99 8356025	10/20/11	49,917.80	69 98

CONGREGATIONAL HOME INV AGY – MAINAccount Number:
Statement Period:**61-0693-00-4**
01/01/11 – 12/31/11**Sale Activity**

	Date	Proceeds	Realized Gain/Loss
Verizon Communications Inc NT 4 60% Dtd 03/28/2011 Due 04/01/2021 Callable Sold 30000 10/18/11 To Wachovia Securities Capital Mar @ 111 626	10/21/11	33,487 80	3,744 30
Viacom Inc New Sr NT 4 375% Dtd 08/26/2009 Due 09/15/2014 Callable Sold 55000 03/28/11 To Wachovia Securities Capital Mar @ 106 761	03/29/11	58,718.55	4,108.50
Wachovia Corp New Sub NT 5 30% Dtd 10/23/2006 Due 10/15/2011 Sold 55000 03/24/11 To Citigroup Global Markets Inc @ 102 669	03/28/11	56,467 95	1,372 01
Wells Fargo Co MTN Sr NT 3 75% Dtd 10/01/2009 Due 10/01/2014 Non-Callable Sold 30000 09/13/11 To Wachovia Securities Capital Mar @ 106 278	09/16/11	31,883 40	1,932 30
Wells Fargo & Co New Sr Unsecd NT 5 625% Dtd 12/10/2007 Due 12/11/2017 Sold 45000 03/23/11 To BNY Capital Markets Inc @ 110 498	03/28/11	49,724 10	2,855 45
Westpac Bkg Corp Sr NT 4 20% Dtd 08/27/2009 Due 02/27/2015 Non-Callable Sold 35000 10/18/11 To RBC Cap Mkts (Dain Rauscher) @ 104.889	10/21/11	36,711 15	1,746 85
XTO Energy Inc Sr NT 5 75% Dtd 08/07/2008 Due 12/15/2013 Callable Sold 40000 02/17/11 To Dain Rauscher Incorporated @ 112 198	02/23/11	44,879 20	4,906 80



CONGREGATIONAL HOME INV AGY – MAIN

Account Number:
Statement Period:

61-0693-00-4
01/01/11 – 12/31/11

Sale Activity			
	Date	Proceeds	Realized Gain/Loss
Convertible Securities			
Nabors Inds Inc Sr NT Conv 0.94% Dtd 05/23/2006 Due 05/15/2011 Non-Callable			
Recd Proceeds on Maturity of 40,000 Par Value	05/16/11	40,000.00	450 00
Cash & Equivalents			
Marshall Prime Money Market Cl Y Sales (62) 01/01/11 To 12/31/11			
	12/31/11	1,684,849 61	
Total Sales		\$ 4,960,438.94	\$ 271,537.90

Additional Data

Software ID:

Software Version:

EIN: 39-1167483

Name: CONGREGATIONAL HOME INC

Form 990, Special Condition Description:

Special Condition Description