



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



2011

Open to Public
Inspection

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

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

B Check if applicable

Address change

Name change

Initial return

Terminated

Amended return

Application pending

C Name of organization
MERCY HOUSING INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
1999 BROADWAY SUITE 1000City or town, state or country, and ZIP + 4
DENVER, CO 80202F Name and address of principal officer
steve spears
1999 BROADWAY SUITE 1000
DENVER, CO 80202D Employer identification number
47-0646706E Telephone number
(303) 830-3300

G Gross receipts \$ 17,182,803

I Tax-exempt status 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527H(a) Is this a group return for
affiliates? Yes NoH(b) Are all affiliates included? Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ►

J Website: ► WWW MERCYHOUSING.ORG

K Form of organization Corporation Trust Association Other ►

L Year of formation 1981

M State of legal domicile NE

Part I Summary

1 Briefly describe the organization's mission or most significant activities
To develop, own, and operate LOW-INCOME HOUSING and provide services TO LOW-INCOME FAMILIES, ELDERLY,
HANDICAPPED, HOMELESS, POTENTIALLY HOMELESS, OR OTHERWISE DISADVANTAGED PERSONS

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	3	16
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	415
6 Total number of volunteers (estimate if necessary)	6	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	2,183,495	9,760,218
9 Program service revenue (Part VIII, line 2g)		2,240,104
		6,517,231
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		821,895
		905,354
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
		0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,245,494	17,182,803

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	Current Year
	1,965,878	8,809,842
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,600,652	1,456,159
		0
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ► 367,165		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,879,322	903,601
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	7,445,852	11,169,602
19 Revenue less expenses Subtract line 18 from line 12	-2,200,358	6,013,201

20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	43,281,908	50,830,921
21 Total liabilities (Part X, line 26)		39,864,519
	38,328,707	
22 Net assets or fund balances Subtract line 21 from line 20	4,953,201	10,966,402

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 steve spears chief financial officer Type or print name and title	2012-08-14 Date
-----------	---	--------------------

Paid Preparer's Use Only	Preparer's signature ► KATHY BLACKBURN Firm's name (or yours if self-employed), address, and ZIP + 4 ► REZNICK GROUP PC 525 N TRYON STREET SUITE 1000 CHARLOTTE, NC 28202	Date	Check if self- employed ►	Preparer's taxpayer identification number (see instructions)
				EIN ►
				Phone no ► (704) 332-9100

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III **1 Briefly describe the organization's mission**

THE MISSION AND CHARITABLE PURPOSE OF MERCY HOUSING, INC IS TO MANAGE OR DIRECT ENTITIES WHICH ARE ORGANIZED FOR THE PURPOSE OF CREATING STABLE, VIBRANT AND HEALTHY COMMUNITIES BY DEVELOPING, FINANCING, AND OPERATING AFFORDABLE, PROGRAM-ENRICHED HOUSING FOR FAMILIES, SENIORS, AND PEOPLE WITH SPECIAL NEEDS WHO LACK THE ECONOMIC RESOURCES TO ACCESS QUALITY, SAFE HOUSING OPPORTUNITIES MERCY HOUSING, INC , EITHER DIRECTLY OR INDIRECTLY, WILL SUPPORT OR FOSTER THE DEVELOPMENT, ACQUISITION, FINANCING, OPERATION AND MANAGEMENT OF QUALITY, AFFORDABLE PROGRAM-ENRICHED HOUSING FOR LOW AND MODERATE INCOME PERSONS

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 \$ 9,666,776 including grants of \$ 8,809,842) (Revenue \$ 2,830,270)

Mercy Housing, Inc 's program supports affordable housing and resident services for low and moderate income persons and includes activities of asset management, housing development, consulting services, construction management and financial services specifically related to development of affordable housing

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 \$ 9,666,776

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.

2 Is the organization required to complete Schedule B, *Schedule of Contributors* (see instructions)?

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.

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? If "Yes," complete Schedule C, Part II.

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? If "Yes," complete Schedule C, Part III.

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? If "Yes," complete Schedule D, Part I.

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.

10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.

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? If "Yes," complete Schedule D, Part VI.

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? If "Yes," complete Schedule D, Part VII.

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? If "Yes," complete Schedule D, Part VIII.

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? If "Yes," complete Schedule D, Part IX.

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.

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)? If "Yes," complete Schedule D, Part X.

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.

b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.

14a Did the organization maintain an office, employees, or agents outside of the United States?

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? If "Yes," complete Schedule F, Part I.

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U.S.? If "Yes," complete Schedule F, Part II and IV.

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U.S.? If "Yes," complete Schedule F, Part III and IV.

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.

19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H.

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.

	Yes	No
1	Yes	
2	Yes	
3		No
4	Yes	
5		
6		No
7		No
8		No
9		No
10		No
11a	Yes	
11b		No
11c	Yes	
11d	Yes	
11e	Yes	
11f		No
12a		No
12b	Yes	
13		No
14a		No
14b		No
15		No
16		No
17		No
18		No
19		No
20a		No
20b		

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? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<input checked="" type="checkbox"/>	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? If "Yes," complete Schedule J	<input checked="" type="checkbox"/>	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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25		24a	No	
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
24c	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		
24d	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? If "Yes," complete Schedule L, Part I		25a	No	
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		25b	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? If "Yes," complete Schedule L, Part II		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? If "Yes," complete Schedule L, Part III		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)		28a	No	
28b	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		28b	No	
28c	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		28c	No	
29	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? If "Yes," complete Schedule L, Part IV		29	No	
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		30	No	
31	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		31	No	
32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		32	No	
33	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		33	No	
34	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	<input checked="" type="checkbox"/>	34	Yes	
35a	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	<input checked="" type="checkbox"/>	35a	No	
35b	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?		35b	No	
36	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)? If "Yes," complete Schedule R, Part V, line 2	<input checked="" type="checkbox"/>	36	No	
37	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	<input checked="" type="checkbox"/>	37	No	
38	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	<input checked="" type="checkbox"/>	38	Yes	
	Note. All Form 990 filers are required to complete Schedule O				

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 1,457	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a 415	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b Yes	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a No	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a No	
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b No	
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).	7a No	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c No	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e No	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9a	
9	Sponsoring organizations maintaining donor advised funds.	9b	
a	Did the organization make any taxable distributions under section 4966?	10a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	10b	
10	Section 501(c)(7) organizations. Enter	11a	
a	Initiation fees and capital contributions included on Part VIII, line 12	11b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	12a	
11	Section 501(c)(12) organizations. Enter	12b	
a	Gross income from members or shareholders	13a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	13b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	13c	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	14a No	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	14b	
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	14a No	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	14b	
c	Enter the aggregate amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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	1a	16
b Enter the number of voting members included in line 1a, above, who are independent	1b	16
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6 Did the organization have members or stockholders?	6	Yes
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?	7a	Yes
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	8a	Yes
b Each committee with authority to act on behalf of the governing body?	8b	Yes
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	Yes
b 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?	10b	Yes
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b 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	12a	Yes
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes," to line 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?	16a	Yes
b 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?	16b	Yes

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, 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
 GARY OKONOWSKY
 1999 BROADWAY SUITE 1000
 Denver, CO 80202
 (303) 830-6221

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.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **43**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CIGNA HEALTHCARE 5476 COLLECTION CENTER DRIVE CHICAGO, IL 606930054	health INSURANCE	3,353,276
REZNICK GROUP 525 N TRYON STREET SUITE 1000 CHARLOTTE, NC 28202	audit & tax services	3,400,586
stantec consulting 13980 collections center drive CHICAGO, IL 60693	project consulting	400,195
KAISER PERMANENTE PO BOX 60000 SANFRANCISCO, CA 94160	health insurance	1,165,695
PHILADELPHIA INSURANCE COMPANY PO BOX 70251 PHILADELPHIA, PA 19176	P&L insurance	890,475

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►16

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d	886,758			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8,873,460			
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total. Add lines 1a-1f		9,760,218			
Program Service Revenue	2a DEBT FORGIVENESS - CATHOLIC HEALTHCARE PARTNERS	Business Code				
		531390	5,000,000	5,000,000		
	b DEBT FORGIVENESS - SISTERS OF MERCY HEALTH SYSTEM	531390	515,938	515,938		
	c SERVICE FEES	531390	403,148	403,148		
	d PROJECT COST REIMBURSEMENT - ENTERPRISE	531310	250,000	250,000		
	e BAD DEBT RECOVERY	531390	166,196	166,196		
	f All other program service revenue		181,949	181,949		
	g Total. Add lines 2a-2f		6,517,231			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)					
			905,354		905,354	
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0			
	6a Gross rents	(I) Real	(II) Personal			
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory	(I) Securities	(II) Other				
b Less cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)			0			
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		0				
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		0				
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		0				
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		0				
12 Total revenue. See Instructions		17,182,803	6,517,231		905,354	

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	8,809,842	8,809,842		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	639,425	293,175	187,450	158,800
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	577,724	143,015	382,592	52,117
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	23,248	6,213	11,351	5,684
9 Other employee benefits	133,040	39,865	68,692	24,483
10 Payroll taxes	82,722	28,688	40,660	13,374
11 Fees for services (non-employees)				
a Management	51,672	33,722	8,869	9,081
b Legal	23,546	3,801	16,995	2,750
c Accounting	29,068		29,068	
d Lobbying	0			
e Professional fundraising See Part IV, line 17	0			
f Investment management fees	0			
g Other	34,485	1,707	26,815	5,963
12 Advertising and promotion	28,790		23,763	5,027
13 Office expenses	89,325	4,688	77,037	7,600
14 Information technology	50,027	2,604	41,781	5,642
15 Royalties	0			
16 Occupancy	92,354	383	77,684	14,287
17 Travel	131,122	64,552	24,509	42,061
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	10,024	458	1,035	8,531
20 Interest	37,111		37,111	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	29,384		29,384	
23 Insurance	2,795	1,820	975	
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 RESERVE FOR LOAN LOSSES	196,231	196,231		
b RESERVE FOR IMPAIRED ASSETS	26,522	26,522		
c BANK SERVICE FEES	13,912		13,912	
d TEMPORARY CONTRACT LABOR	13,012		13,012	
e				
f All other expenses	44,221	9,490	22,966	11,765
25 Total functional expenses. Add lines 1 through 24f	11,169,602	9,666,776	1,135,661	367,165
26 Joint costs. Check here <input checked="" 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) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	7,350,141	2	13,373,117
	3 Pledges and grants receivable, net	1,835,409	3	812,852
	4 Accounts receivable, net	781,825	4	995,702
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	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	0	6	0
	7 Notes and loans receivable, net	260,468	7	7,422,685
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	181,142	9	236,773
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	4,632,139	10a	
	b Less accumulated depreciation	3,602,663	10b	
		1,218,830	10c	1,029,476
	11 Investments—publicly traded securities	0	11	0
	12 Investments—other securities See Part IV, line 11	0	12	0
	13 Investments—program-related See Part IV, line 11	12,123,141	13	6,636,430
	14 Intangible assets	0	14	32,571
	15 Other assets See Part IV, line 11	19,530,952	15	20,291,315
	16 Total assets. Add lines 1 through 15 (must equal line 34)	43,281,908	16	50,830,921
Liabilities	17 Accounts payable and accrued expenses	3,947,551	17	4,685,869
	18 Grants payable	0	18	0
	19 Deferred revenue	882,948	19	825,130
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	27,330,281	23	22,778,109
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	6,167,927	25	11,575,411
	26 Total liabilities. Add lines 17 through 25	38,328,707	26	39,864,519
Net Assets or Fund Balances	27 Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	28 Unrestricted net assets	2,838,510	27	8,928,717
	29 Temporarily restricted net assets	1,359,691	28	1,282,685
	30 Permanently restricted net assets	755,000	29	755,000
	31 Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	32 Capital stock or trust principal, or current funds	30		
	33 Paid-in or capital surplus, or land, building or equipment fund	31		
	34 Retained earnings, endowment, accumulated income, or other funds	32		
	35 Total net assets or fund balances	4,953,201	33	10,966,402
	36 Total liabilities and net assets/fund balances	43,281,908	34	50,830,921

Part XI Reconciliation of Net AssetsCheck 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	17,182,803
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,169,602
3	Revenue less expenses Subtract line 2 from line 1	3	6,013,201
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,953,201
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
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	10,966,402

Part XII Financial Statements and ReportingCheck 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? . . .	2a	No
2b	Were the organization's financial statements audited by an independent accountant? . . .	2b	Yes
2c	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 . . .	2c	Yes
2d	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? . . .	3a	Yes
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	3b	Yes

2011

Open to Public
Inspection**SCHEDULE A**
(Form 990 or 990EZ)**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Department of the Treasury
Internal Revenue Service
Name of the organization
MERCY HOUSING INC

Employer identification number

47-0646706

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

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	►
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	►
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	►
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	►
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	►

Part 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")	2,696,662	13,402,051	3,379,443	2,183,495	9,760,218	31,421,869
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	3,312,490	3,072,647	1,531,080	2,240,104	6,517,231	16,673,552
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	6,009,152	16,474,698	4,910,523	4,423,599	16,277,449	48,095,421
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	3,746,556	3,155,048	1,668,500	153,500	0	8,723,604
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	127,661	53,913	489,664	1,650,235	5,262,430	7,583,903
c Add lines 7a and 7b	3,874,217	3,208,961	2,158,164	1,803,735	5,262,430	16,307,507
8 Public Support (Subtract line 7c from line 6)						31,787,914

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	6,009,152	16,474,698	4,910,523	4,423,599	16,277,449	48,095,421
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,660,418	2,053,371	962,460	821,895	905,354	7,403,498
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2,660,418	2,053,371	962,460	821,895	905,354	7,403,498
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)	8,669,570	18,528,069	5,872,983	5,245,494	17,182,803	55,498,919

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** **Section C. Computation of Public Support Percentage**

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	57 277 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	51 660 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	13 340 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	16 747 %
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

Additional Data

Software ID:
Software Version:
EIN: 47-0646706
Name: MERCY HOUSING INC

Form 990, Special Condition Description:**Special Condition Description****Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(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			
LARRY DALE VICE CHAIRMAN	10	X					0	0	0
MARK KORELL DIRECTOR	10	X					0	0	0
BARRY ZIGAS DIRECTOR	10	X					0	0	0
SR PAT MCDERMOTT DIRECTOR	10	X					0	0	0
ROGER PASTORE DIRECTOR	10	X					0	0	0
BRAD JAMES CHAIRMAN	10	X					0	0	0
RICH STATUTO DIRECTOR	10	X					0	0	0
LESLIE WITTMANN DIRECTOR	10	X					0	0	0
SR ROSEMARIE JASINSKI DIRECTOR	10	X					0	0	0
SR LINDA WERTHMAN DIRECTOR	10	X					0	0	0
YVONNE CAMACHO DIRECTOR	10	X					0	0	0
ADRIENNE CROWE DIRECTOR	10	X					0	0	0
BARBARA KELLEY DIRECTOR	10	X					0	0	0
BOB SIMPSON DIRECTOR	10	X					0	0	0
SR BARBARA BUSCH DIRECTOR	10	X					0	0	0
SR DIANE HEJNA DIRECTOR	10	X					0	0	0
JULIA GOULD SR VICE PRESIDENT	10		X				196,382	0	11,157
SR LILLIAN MURPHY CEO/PRESIDENT	10		X				0	0	0
CINDY HOLLER VICE PRESIDENT	10		X				167,757	0	8,118
JANE GRAF EXECUTIVE VP/COO	10		X				226,778	0	9,538
JENNIFER ERIXON VICE PRESIDENT	10		X				162,379	0	19,021
CHRISTOPHER SHOTT VICE PRESIDENT	10		X				96,259	0	9,747
BRIAN SHUMAN officer	10		X				319,427	0	17,947
JEFFREY TRUAX VICE PRESIDENT	10		X				104,221	0	8,667
CHERYL O'BRYAN VICE PRESIDENT/president mhm	10		X				0	231,830	15,537

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(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
		Or director	Individual trustee	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	
VINCE DODDS VICE PRESIDENT	1 0			X				155,291	0 16,543
MICHELE MAMET SR VICE PRESIDENT/CAO	1 0			X				185,197	0 8,642
WILLIAM GOLDSMITH VICE PRESIDENT	1 0			X				197,028	0 13,577
ELIZABETH COLDIRON VICE PRESIDENT	1 0			X				119,304	0 9,218
CAROL BRESLAU VICE PRESIDENT	1 0			X				117,173	0 2,381
PATRICIA O'ROARK SECRETARY	1 0			X				61,559	0 11,522
SARA GRIFFIN ASSISTANT SECRETARY	1 0			X				63,569	0 8,920
CHARICE HEYWOOD VICE PRESIDENT	1 0			X				150,000	0 3,940
CHRIS BURCKHARDT SR VICE PRESIDENT/CIO	1 0			X				214,384	0 10,926
BILL RUMPF VICE PRESIDENT	1 0			X				170,484	0 9,155
GARY OKONOWSKY VICE PRESIDENT/CORP CONTROLLER	1 0			X				83,525	0 5,841
JOHN MARCOLINA VICE PRESIDENT	40 0			X				106,526	0 11,822
DOUGLAS SHOEMAKER VICE PRESIDENT	1 0			X				70,206	0 1,470
AMY L ROWLAND EMPLOYEE	40 0				X			132,933	0 13,178
DAVID GRAHAM LYON EMPLOYEE	40 0				X			128,675	0 7,136
LINDA BRACE EMPLOYEE	40 0				X			131,910	0 5,798
RONALD JACKSON employee	40 0				X			123,525	0 7,412
THOMAS LEE employee	40 0				X			127,755	0 6,974

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2011

**Open to Public
Inspection**

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
MERCY HOUSING INC

Employer identification number

47-0646706

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization

1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2 Political expenditures  \$ _____

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3)

1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ _____

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a If zero or less, enter -0-			
i Subtract line 1f from line 1c If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)	
	Yes	No	Amount	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a Volunteers?		No		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No		
c Media advertisements?		No		
d Mailings to members, legislators, or the public?		No		
e Publications, or published or broadcast statements?		No		
f Grants to other organizations for lobbying purposes?	Yes		18,000	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		No		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i Other activities? If "Yes," describe in Part IV				
j Total lines 1c through 1i			18,000	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11. Also, complete this part for any additional information

Identifier	Return Reference	Explanation

SCHEDULE D
(Form 990)**Supplemental Financial Statements****2011****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

► 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.

Name of the organization

MERCY HOUSING INC

Employer identification number

47-0646706

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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 <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> Preservation for future generations	

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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 Yes No

(ii) related organizations Yes No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Yes No

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	855,000				855,000
b Buildings	71,748				71,748
c Leasehold improvements					
d Equipment	3,705,391		3,602,663		102,728
e Other					
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ►					1,029,476

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) INVESTMENTS - PROGRAM RELATED	6,636,430	F

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

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

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

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

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

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
PART X	INCOME TAX PROVISION	MERCY HOUSING, INC (MHI) AND ITS CONSOLIDATED NONPROFIT CORPORATIONS ARE EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND COMPARABLE STATE STATUTES AND DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2011 DUE TO THEIR TAX EXEMPT STATUS, MHI AND THE CONSOLIDATED NONPROFIT CORPORATIONS ARE NOT SUBJECT TO INCOME TAXES MHI AND THE CONSOLIDATED NONPROFIT CORPORATIONS ARE REQUIRED TO FILE TAX RETURNS WITH THE IRS AND OTHER TAXING AUTHORITIES ACCORDINGLY, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR INCOME TAXES AND THERE ARE NO OTHER TAX POSITIONS WHICH MUST BE CONSIDERED FOR DISCLOSURE

**Schedule I
(Form 990)****2011****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
► Attach to Form 990Name of the organization
MERCY HOUSING INCEmployer identification number
47-0646706**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ►

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MERCY HOUSING LAKEFRONT1999 BROADWAY SUITE 1000 DNEVER, CO 80202	36-3453183	501(C)(3)	167,000				LOW-INCOME HOUSING
(2) INTERCOMMUNITY MERCY HOUSING1999 BROADWAY SUITE 1000 DENVER, CO 80202	91-1546525	501(C)(3)	95,750				LOW-INCOME HOUSING
(3) MERCY HOUSING COLORADO1999 BROADWAY SUITE 1000 DENVER, CO 80202	20-1583332	501(C)(3)	71,500				LOW-INCOME HOUSING
(4) MERCY HOUSING CALIFORNIA1999 BROADWAY SUITE 1000 DENVER, CO 80202	94-3081666	501(C)(3)	667,668				LOW-INCOME HOUSING
(5) MERCY HOUSING SOUTHEAST1999 BROADWAY SUITE 1000 DENVER, CO 80202	56-1993872	501(C)(3)	6,173,000				LOW-INCOME HOUSING
(6) NATIONAL LOW INCOME HOUSING COALITION727 15TH ST NW 6TH FLOOR WASHINGTON, DC 20005	52-1089824	501(C)(3)	10,000				CHARITABLE CONTRIBUTION
(7) MERCY PORTFOLIO SERVICES247 S STATE STREET SUITE 810 CHICAGO, IL 60604	26-4002114	501(C)(3)	410,000				CHARITABLE CONTRIBUTION
(8) MERCY HOUSING MIDWEST1999 BROADWAY SUITE 1000 DENVER, CO 80202	47-0772351	501(c)(3)	1,083,136				LOW-INCOME HOUSING
(9) NETWORK25 EAST STREET NW SUITE 200 WASHINGTON, DC 20001			10,000				low-income housing
(10) NATIONAL HOUSING TRUST1101 30TH STREET NW SUITE 400 WASHINGTON, DC 20007			10,000				low-income housing
(11) MERCY LOAN FUND 1999 BROADWAY SUITE 1000 DENVER, CO 80202	84-1559406	501(c)(3)	94,000				low-income housing

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► 9

3 Enter total number of other organizations listed in the line 1 table ► 2

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

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

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

Identifier	Return Reference	Explanation
PART I	PART I # 2	The majority of grants expense represents contributions to affiliated organizations. Donors contribute to the organization for specific capital projects or other restricted operating and program activities and the organization passes the contribution to a related entity in accordance with the donor restriction

Software ID:
Software Version:
EIN: 47-0646706
Name: MERCY HOUSING INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCY HOUSING LAKEFRONT 1999 BROADWAY SUITE 1000 DNEVER, CO 80202	36-3453183	501(C)(3)	167,000				LOW-INCOME HOUSING
INTERCOMMUNITY MERCY HOUSING 1999 BROADWAY SUITE 1000 DENVER, CO 80202	91-1546525	501(C)(3)	95,750				LOW-INCOME HOUSING
MERCY HOUSING COLORADO 1999 BROADWAY SUITE 1000 DENVER, CO 80202	20-1583332	501(C)(3)	71,500				LOW-INCOME HOUSING
MERCY HOUSING CALIFORNIA 1999 BROADWAY SUITE 1000 DENVER, CO 80202	94-3081666	501(C)(3)	667,668				LOW-INCOME HOUSING
MERCY HOUSING SOUTHEAST 1999 BROADWAY SUITE 1000 DENVER, CO 80202	56-1993872	501(C)(3)	6,173,000				LOW-INCOME HOUSING
NATIONAL LOW INCOME HOUSING COALITION 727 15TH ST NW 6TH FLOOR WASHINGTON, DC 20005	52-1089824	501(C)(3)	10,000				CHARITABLE CONTRIBUTION
MERCY PORTFOLIO SERVICES 247 S STATE STREET SUITE 810 CHICAGO, IL 60604	26-4002114	501(C)(3)	410,000				CHARITABLE CONTRIBUTION
MERCY HOUSING MIDWEST 1999 BROADWAY SUITE 1000 DENVER, CO 80202	47-0772351	501(c)(3)	1,083,136				LOW-INCOME HOUSING
NETWORK 25 EAST STREET NW SUITE 200 WASHINGTON, DC 20001			10,000				low-income housing
NATIONAL HOUSING TRUST 1101 30TH STREET NW SUITE 400 WASHINGTON, DC 20007			10,000				low-income housing
MERCY LOAN FUND 1999 BROADWAY SUITE 1000 DENVER, CO 80202	84-1559406	501(c)(3)	94,000				low-income housing

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

2011Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection**Name of the organization**
MERCY HOUSING INC**Employer identification number**

47-0646706

Part I Questions Regarding Compensation

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

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input checked="" type="checkbox"/> Discretionary spending account	<input type="checkbox"/> 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

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> 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	Yes	
2	Yes	
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JULIA GOULD	(i) 196,382 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 5,277 (ii) 0	(i) 5,880 (ii) 0	(i) 207,539 (ii) 0	(i) 0 (ii) 0
(2) CINDY HOLLER	(i) 167,757 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 5,238 (ii) 0	(i) 2,880 (ii) 0	(i) 175,875 (ii) 0	(i) 0 (ii) 0
(3) JANE GRAF	(i) 226,778 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 8,461 (ii) 0	(i) 1,077 (ii) 0	(i) 236,316 (ii) 0	(i) 0 (ii) 0
(4) JENNIFER ERIXON	(i) 162,379 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 5,238 (ii) 0	(i) 13,783 (ii) 0	(i) 181,400 (ii) 0	(i) 0 (ii) 0
(5) BRIAN SHUMAN	(i) 319,427 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 9,004 (ii) 0	(i) 8,943 (ii) 0	(i) 337,374 (ii) 0	(i) 0 (ii) 0
(6) CHERYL O'BRYAN	(i) 0 (ii) 231,830	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 5,616	(i) 0 (ii) 9,921	(i) 0 (ii) 247,367	(i) 0 (ii) 0
(7) VINCE DODDS	(i) 155,291 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 3,769 (ii) 0	(i) 12,774 (ii) 0	(i) 171,834 (ii) 0	(i) 0 (ii) 0
(8) MICHELE MAMET	(i) 185,197 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 3,400 (ii) 0	(i) 5,242 (ii) 0	(i) 193,839 (ii) 0	(i) 0 (ii) 0
(9) WILLIAM GOLDSMITH	(i) 197,028 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 4,807 (ii) 0	(i) 8,770 (ii) 0	(i) 210,605 (ii) 0	(i) 0 (ii) 0
(10) CHARICE HEYWOOD	(i) 150,000 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 2,885 (ii) 0	(i) 1,055 (ii) 0	(i) 153,940 (ii) 0	(i) 0 (ii) 0
(11) CHRIS BURCKHARDT	(i) 214,384 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 4,156 (ii) 0	(i) 6,770 (ii) 0	(i) 225,310 (ii) 0	(i) 0 (ii) 0
(12) BILL RUMPF	(i) 170,484 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 3,240 (ii) 0	(i) 5,915 (ii) 0	(i) 179,639 (ii) 0	(i) 0 (ii) 0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE O
(Form 990 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.

2011**Open to Public
Inspection**Name of the organization
MERCY HOUSING INC**Employer identification number**

47-0646706

Identifier	Return Reference	Explanation
PART VI SECTION A	PART VI SECTION A #1A, #6 AND #7A&B	#1A Mercy housing, inc is co-sponsored by nine congregations of religious women who appoint members to the sponsor council. The sponsor council appoints the corporate member group. The reserved rights held by the corporate member group, include approval of the following activities certain revisions to articles and bylaws, mergers and acquisitions, pledging, mortgaging, or disposing of all or substantially all assets, and appointment or removal of government board members and officers and appointment/termination of the chief executive officer #6 Mercy Housing, Inc , is co-sponsored by nine congregations of women religious orders #7 A & B The board of trustees of Mercy housing, inc has authority in various aspects of operations and management which are set forth in the reserved rights of the bylaws the reserved rights held by the mercy housing, inc board of trustees, many of which have been further delegated to the president and CEO of mercy housing, inc , include approval of the following activities revisions to articles and bylaws, mergers and acquisitions, establishment of subsidiary entities, pledging, mortgaging, or disposing of all or substantially all assets, obligations of new operating and mortgage debt, and, appointment or removal of governing board members and officers

Identifier	Return Reference	Explanation
PART VI SECTION B	PART VI SECTION B #11A, 12C AND 15B	11A Form 990 is presented to all board members and comments and questions are addressed prior to the Form 990 being filed 12C The Audit Committee of Mercy Housing, Inc reviews annually the Conflict of Interest disclosures and determines whether any action is required 15B Periodically the Human Resources Committee within the Mercy Housing, Inc Board of Trustees will review executive salaries to ensure competitiveness with external markets and for internal equity in relation to general employee wages and benefits, individual and organizational performance, and the financial resources of the Organization

Identifier	Return Reference	Explanation
PART VI SECTION C	PART VI SECTION C # 19	Governing documents, conflict of interest policy and financial statements are made available to the public upon request

Identifier	Return Reference	Explanation
PART XII	PART XI #2B, #2C & #3	<p>2B THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES THE AUDITED FINANCIAL STATEMENTS ARE REPORTED WITHIN THE CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION OF MERCY HOUSING, INC 2C RESPONSIBILITY FOR SELECTION OF AN INDEPENDENT ACCOUNTANT AND OVERSIGHT OF THE ANNUAL AUDIT IS RESERVED BY THE MERCY HOUSING, INC BOARD OF TRUSTEES 3 THE ORGANIZATION RECEIVED FEDERAL LOANS OR AWARDS AND ACCORDINGLY WAS INCLUDED IN THE SINGLE AUDIT ACT AND OMB CIRCULAR A-133 AUDIT AS REPORTED WITHIN THE CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION OF MERCY HOUSING, INC</p>

Identifier	Return Reference	Explanation
part vii	PART VII SECTION A	<p>Sister Lillian Murphy, RSM, serves as the Chief Executive Officer of Mercy Housing, Inc. The Sisters of Mercy of the Americas West MidWest have entered into a contract whereby Sister Murphy has been assigned to Mercy Housing, Inc. to perform services and provide executive leadership for Mercy Housing, Inc. and its subsidiaries. Sister Murphy is a member of a religious community and has taken a vow of poverty and therefore does not receive any personal income. Sister Murphy is not an employee of Mercy Housing, Inc. Mercy Housing, Inc. makes payments directly to the Sisters of Mercy of the Americas West MidWest for monthly stipend payments and benefits relating to the services performed by Sister Murphy. The Sisters of Mercy of the Americas West MidWest are responsible for providing the living expenses of Sister Murphy. For 2011 Mercy Housing, Inc. paid \$402,770 for the annual stipend fee and benefits equivalent.</p>

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

MERCY HOUSING INC

Employer identification number

47-0646706

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III or IV**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Sale of assets to related organization(s)
- g** Purchase of assets from related organization(s)
- h** Exchange of assets with related organization(s)
- i** Lease of facilities, equipment, or other assets to related organization(s)
- j** Lease of facilities, equipment, or other assets from related organization(s)
- k** Performance of services or membership or fundraising solicitations for related organization(s)
- l** Performance of services or membership or fundraising solicitations by related organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n** Sharing of paid employees with related organization(s)
- o** Reimbursement paid to related organization(s) for expenses
- p** Reimbursement paid by related organization(s) for expenses
- q** Other transfer of cash or property to related organization(s)
- r** Other transfer of cash or property from related organization(s)

	Yes	No
1a	Yes	
1b	Yes	
1c	Yes	
1d	Yes	
1e	Yes	
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o		No
1p		No
1q		No
1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

Software ID:
Software Version:
EIN: 47-0646706
Name: MERCY HOUSING INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization
Mercy Housing Inc 1999 Broadway Suite 1000 Denver, CO 80202 47-0646706	low-inc hsng	CA	501 (c) (3)	9	NA	No
Mercy Loan Fund 1999 Broadway Suite 1000 Denver, CO 80202 84-1559406	low-inc hsng	CA	501 (c) (3)	9	NA	No
Mercy Portfolio Services 1999 Broadway Suite 1000 Denver, CO 80202 26-4002114	low-inc hsng	CO	501 (c) (3)	9	NA	No
Mercy Housing Properties Inc 1999 Broadway Suite 1000 Denver, CO 80202 84-1262403	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Brook Oaks Senior Residences 1999 Broadway Suite 1000 Denver, CO 80202 20-4295604	low-inc hsng	TX	501 (c) (3)	7	NA	No
Mercy Commercial Finance Properties 1999 Broadway Suite 1000 Denver, CO 80202 84-1164880	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Visitacion Valley Affordable Housing 1999 Broadway Suite 1000 Denver, CO 80202 94-3273336	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Housing Southwest 1999 Broadway Suite 1000 Denver, CO 80202 86-0743192	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Avondale Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 86-0980810	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Camelot Casitas 1999 Broadway Suite 1000 Denver, CO 80202 86-0980809	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Casa de Merced 1999 Broadway Suite 1000 Denver, CO 80202 86-0808941	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Casa de Shanti 1999 Broadway Suite 1000 Denver, CO 80202 86-0728526	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
El Mirage Senior 1999 Broadway Suite 1000 Denver, CO 80202 86-0847975	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Mesa Senior Meadows 1999 Broadway Suite 1000 Denver, CO 80202 86-0897708	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Guadalupe Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 86-0897709	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Peoria Place 1999 Broadway Suite 1000 Denver, CO 80202 86-0980811	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Plazas de Merced 1999 Broadway Suite 1000 Denver, CO 80202 86-0758961	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Vista Alegre 1999 Broadway Suite 1000 Denver, CO 80202 86-0947230	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Decatur Place 1999 Broadway Suite 1000 Denver, CO 80202 84-1062097	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Holly Park East 1999 Broadway Suite 1000 Denver, CO 80202 84-1347445	low-inc hsng	CO	501 (c) (3)	11a	NA	No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization
Willow Street Apartments 1999 Broadway Suite 1000 Denver, CO 80202 84-1334167	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Mercy Properties Arizona 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987	low-inc hsng	AR	501 (c) (3)	11a	NA	No
Los Arcos 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Mercy Court 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Holly Park Community Center LLC 1999 Broadway Suite 1000 Denver, CO 80202 38-3715668	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Homes for Greeley 1999 Broadway Suite 1000 Denver, CO 80202 84-1349918	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Mercy Housing California 1999 Broadway Suite 1000 Denver, CO 80202 94-3081666	low-inc hsng	CA	501 (c) (3)	9	NA	No
All Hallows Community 1999 Broadway Suite 1000 Denver, CO 80202 94-2722870	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Marin Homes for Independent Living 1999 Broadway Suite 1000 Denver, CO 80202 94-2787430	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Cantebria Senior Homes 1999 Broadway Suite 1000 Denver, CO 80202 94-3361794	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Senior Housing Oxnard 1999 Broadway Suite 1000 Denver, CO 80202 94-3224446	low-inc hsng	CA	501 (c) (3)	11a	NA	No
EHCC Housing Corp (Eden House) 1999 Broadway Suite 1000 Denver, CO 80202 94-3234538	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Francis of Assisi Community 1999 Broadway Suite 1000 Denver, CO 80202 94-2366315	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Gault Street Senior 1999 Broadway Suite 1000 Denver, CO 80202 75-2983979	low-inc hsng	CA	501 (c) (3)	11a	NA	No
John W King Senior Community 1999 Broadway Suite 1000 Denver, CO 80202 94-3282891	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Maria B Freitas Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3190261	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Marin Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-1358291	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Gardens 1999 Broadway Suite 1000 Denver, CO 80202 33-0809069	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Notre Dame Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3209503	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Oceana Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3167825	low-inc hsng	CA	501 (c) (3)	11a	NA	No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization
Presentation Senior Community 1999 Broadway Suite 1000 Denver, CO 80202 94-3264209	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Russell Manor 1999 Broadway Suite 1000 Denver, CO 80202 93-1189914	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Tierra Del Sol Inc 1999 Broadway Suite 1000 Denver, CO 80202 75-3004763	low-inc hsng	CA	501 (c) (3)	9	NA	No
St Elizabeth Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-2705149	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Garden Park Apt Community 1999 Broadway Suite 1000 Denver, CO 80202 68-0484147	low-inc hsng	CA	501 (c) (3)	9	NA	No
Mercy Oaks Village 1999 Broadway Suite 1000 Denver, CO 80202 75-3134134	low-inc hsng	CA	501 (c) (3)	7	NA	No
Mercy Properties California 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	9	NA	No
Foster Youth 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
The Haven 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Leland House 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Osocales (McIntosh Mobile Homes) 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Richmond Hills 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Sycamore Center (Red Bluff) 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Sierra Vista 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Magnolia Village LLC 1999 Broadway Suite 1000 Denver, CO 80202 32-0139519	low-inc hsng	GA	501 (c) (3)	11a	NA	No
Eagle Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 03-0410639	low-inc hsng	ID	501 (c) (3)	11a	NA	No
Mercy Southeast Idaho Inc 1999 Broadway Suite 1000 Denver, CO 80202 84-1284293	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Moscow Inc (Hawthorne) 1999 Broadway Suite 1000 Denver, CO 80202 82-0475388	low-inc hsng	ID	501 (c) (3)	11a	NA	No
Mercy Twin Falls Inc (Willswood) 1999 Broadway Suite 1000 Denver, CO 80202 82-0492940	low-inc hsng	ID	501 (c) (3)	11a	NA	No
Mercy Housing Lakefront 1999 Broadway Suite 1000 Denver, CO 80202 36-3453183	low-inc hsng	IL	501 (c) (3)	7	NA	No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization
Laverne Courts LLC 1999 Broadway Suite 1000 Denver, CO 80202 36-4535351	low-inc hsng	IL	501 (c) (3)	11a	NA	No
Washington Courts LLC 1999 Broadway Suite 1000 Denver, CO 80202 32-0084370	low-inc hsng	IL	501 (c) (3)	11a	NA	No
Whitmore Apartments LLC 1999 Broadway Suite 1000 Denver, CO 80202 47-0924267	low-inc hsng	IL	501 (c) (3)	11a	NA	No
Mercy Housing Ohio Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-2373936	low-inc hsng	OH	501 (c) (3)	11a	NA	No
Mercy Properties Inc (MPI) 1999 Broadway Suite 1000 Denver, CO 80202 84-1173689	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Properties II Inc 1999 Broadway Suite 1000 Denver, CO 80202 82-0485862	low-inc hsng	ID	501 (c) (3)	11a	NA	No
Neary Lagoon Inc 1999 Broadway Suite 1000 Denver, CO 80202 77-0214799	low-inc hsng	CA	501 (c) (3)	11a	NA	No
San Juan Housing Corp 1999 Broadway Suite 1000 Denver, CA 80202 68-0378676	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Housing Midwest 1999 Broadway Suite 1000 Denver, CO 80202 47-0772351	low-inc hsng	NE	501 (c) (3)	11a	NA	No
Mercy Crestview Village 1999 Broadway Suite 1000 Denver, CO 80202 47-0785351	low-inc hsng	NE	501 (c) (3)	11a	NA	No
Heartland Housing Initiative (HARP) 1999 Broadway Suite 1000 Denver, CO 80202 42-1359133	low-inc hsng	AZ	501 (c) (3)	11a	NA	No
Mercy House 1999 Broadway Suite 1000 Denver, CO 80202 37-1068780	low-inc hsng	NE	501 (c) (3)	11a	NA	No
Mercy Northglenn 1999 Broadway Suite 1000 Denver, CO 80202 47-0779681	low-inc hsng	NE	501 (c) (3)	11a	NA	No
Mercy Oakwood Gardens 1999 Broadway Suite 1000 Denver, CO 80202 84-1344220	low-inc hsng	AZ	501 (c) (3)	9	NA	No
Mercy Midwest Properties (Ridgeview) 1999 Broadway Suite 1000 Denver, CO 80202 43-1584918	low-inc hsng	MO	501 (c) (3)	11a	NA	No
Mercy Western Manor 1999 Broadway Suite 1000 Denver, CO 80202 47-0785349	low-inc hsng	NE	501 (c) (3)	11a	NA	No
Mercy Village Joplin 1999 Broadway Suite 1000 Denver, CO 80202 37-1459692	low-inc hsng	MO	501 (c) (3)	11a	NA	No
Mercy Housing Southeast 1999 Broadway Suite 1000 Denver, CO 80202 56-1993872	low-inc hsng	NC	501 (c) (3)	11a	NA	No
Mercy Place Belmont Inc 1999 Broadway Suite 1000 Denver, CO 80202 80-0034784	low-inc hsng	NC	501 (c) (3)	11a	NA	No
Mercy Housing Pembroke Inc 1999 Broadway Suite 1000 Denver, CO 80202 13-4224803	low-inc hsng	GA	501 (c) (3)	11a	NA	No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization
Mercy Housing Georgia Holdings LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-1233986	low-inc hsng	GA	501 (c) (3)	11a	NA	No
Marshside Village Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-1910771	low-inc hsng	SC	501 (c) (3)	11a	NA	No
Allegre Point Senior Residences 1999 Broadway Suite 1000 Denver, CO 80202 20-4295472	low-inc hsng	CO	501 (c) (3)	11a	NA	No
Mercy Properties Georgia Inc (MPGI) 1999 Broadway Suite 1000 Denver, CO 80202 58-2425127	low-inc hsng	GA	501 (c) (3)	11a	NA	No
Intercommunity Housing Ferndale 1999 Broadway Suite 1000 Denver, CO 80202 91-1667138	low-inc hsng	WA	501 (c) (3)	11a	NA	No
Sterling Senior Housing 1999 Broadway Suite 1000 Denver, CO 80202 14-1866405	low-inc hsng	WA	501 (c) (3)	11a	NA	No
Mercy Housing 2904 N 45th St Omaha 1999 Broadway Suite 1000 Denver, CO 80202 37-1068780	low-inc hsng	NE	501 (c) (3)	11a	NA	No
Florin Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 68-0336533	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Housing CalWest 1999 Broadway Suite 1000 Denver, CO 80202 94-2963228	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Bond Properties Nebraska I 1999 Broadway Suite 1000 Denver, CO 80202 68-0378674	low-inc hsng	NE	501 (c) (3)	9	NA	No
Mercy Bond Properties Colorado I 1999 Broadway Suite 1000 Denver, CO 80202 94-3286321	low-inc hsng	CO	501 (c) (3)	9	NA	No
Walnut Grove 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Santa Monica 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Acacia Meadows 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Timbercreek LLC 1999 Broadway Suite 1000 Denver, CO 80202 68-0378674	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Franconia LLC 1999 Broadway Suite 1000 Denver, CO 80202 94-3286321	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Padre Apartments Community 1999 Broadway Suite 1000 Denver, CO 80202 84-0789830	low-inc hsng	CA	501 (c) (3)	11a	NA	No
South of Market Mercy 1999 Broadway Suite 1000 Denver, CO 80202 94-3199902	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Visitacion Valley Affordable Housing 1999 Broadway Suite 1000 Denver, CO 80202 94-3273336	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Housing Northwest 1999 Broadway Suite 1000 Denver, CO 80202 91-1546525	low-inc hsng	WA	501 (c) (3)	11a	NA	No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization
Mercy Housing Northwest Idaho Inc 1999 Broadway Suite 1000 Denver, CO 80202 36-3453183	low-inc hsng	ID	501 (c) (3)	11a	NA	No
MERCY HOUSING MANAGEMENT GROUP 1999 Broadway Suite 1000 Denver, CO 80202 82-0376108	low-inc hsng	IL	501 (c) (3)	9	NA	No
MERCY HOUSING MOUNTAIN PLAINS 1999 Broadway Suite 1000 Denver, CO 80202 20-1583332	low-inc hsng	CO	501 (c) (3)	9	NA	No
Independence Hill Inc 1999 Broadway Suite 1000 Denver, CO 80202 72-1545927	low-inc hsng	ID	501 (c) (3)	11a	NA	No
Mercy Housing California Senior Properties 1999 Broadway Suite 1000 Denver, CO 80202 20-3177114	low-inc hsng	IL	501 (c) (3)	11a	NA	No
Dublin Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 02-0655254	low-inc hsng	KY	501 (c) (3)	11a	NA	No
McAuley Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1548500	low-inc hsng	KY	501 (c) (3)	11a	NA	No
Mercy Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 61-1344092	low-inc hsng	TN	501 (c) (3)	11a	NA	No
Riverview - St Mary's Inc (St Mary's 1999 Broadway Suite 1000 Denver, CO 80202 62-1782683	low-inc hsng	TN	501 (c) (3)	11a	NA	No
St Mary's Villa at Riverview II Inc (1999 Broadway Suite 1000 Denver, CO 80202 31-1723287	low-inc hsng	TN	501 (c) (3)	11a	NA	No
St Mary's Villa Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1548512	low-inc hsng	KY	501 (c) (3)	11a	NA	No
Sacred Heart Village I Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1411531	low-inc hsng	KY	501 (c) (3)	11a	NA	No
Sacred Heart Village II Inc 1999 Broadway Suite 1000 Denver, CO 80202 61-1339396	low-inc hsng	KY	501 (c) (3)	11a	NA	No
Sacred Heart Village III Inc 1999 Broadway Suite 1000 Denver, CO 80202 61-1367719	low-inc hsng	OH	501 (c) (3)	11a	NA	No
St Theresa Village Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1411529	low-inc hsng	OH	501 (c) (3)	11a	NA	No
Siena Springs (Siena Springs I) 1999 Broadway Suite 1000 Denver, CO 80202 31-1052772	low-inc hsng	OH	501 (c) (3)	11a	NA	No
Siena Springs II 1999 Broadway Suite 1000 Denver, CO 80202 31-1591780	low-inc hsng	OH	501 (c) (3)	11a	NA	No
Charles Meadows Corporation 1999 Broadway Suite 1000 Denver, CO 80202 34-1552671	low-inc hsng	OH	501 (c) (3)	11a	NA	No
Charles Crest Corporation (Charles Crest 1999 Broadway Suite 1000 Denver, CO 80202 34-1399869	low-inc hsng	OH	501 (c) (3)	11a	NA	No
Charles Crest II Corporation 1999 Broadway Suite 1000 Denver, CO 80202 34-1714407	low-inc hsng	OH	501 (c) (3)	11a	NA	No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	g Section 512 (b)(13) controlled organization
Savannah Gardens Senior Residences Inc 1999 Broadway Suite 1000 Denver, CO 80202 27-3400284	low-inc hsng	GA	501 (c) (3)	11a	NA	No
2101 Telegraph Avenue Inc 1999 Broadway Suite 1000 Denver, CO 80202 94-3222935	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Mercy Housing West 1999 Broadway Suite 1000 Denver, CO 80202 68-0254564	low-inc hsng	CA	501 (c) (3)	11a	NA	No
Commons on Main GP LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-8033652	low-inc hsng	OH	501 (c) (3)	9	NA	No
Marlton Affordable Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 91-2164481	low-inc hsng	CA	501 (c) (3)	11b	NA	No
MHC NSP LLC (NSP MHCL) 1999 Broadway Suite 1000 Denver, CO 80202 94-3081666	low-inc hsng	CA	501 (c) (3)	9	NA	No
Mercy Housing Idaho NSP LLC (NSPID) 1999 Broadway Suite 1000 Denver, CO 80202 27-1039061	low-inc hsng	ID	501 (c) (3)	11a	NA	No
Johnston Center MM LLC 1999 Broadway Suite 1000 Denver, CO 80202 26-1483851	low-inc hsng	WI	501 (c) (3)	7	NA	No
Appian Way Manager LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-8829324	low-inc hsng	WA	501 (c) (3)	9	NA	No
Mercy Place Belmont Inc 1999 Broadway Suite 1000 Denver, CO 80202 80-0034784	low-inc hsng	NC	501 (c) (3)	11c	NA	No
FHD Holdings LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-1356271	low-inc hsng	OH	501 (c) (3)	9	NA	No

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY FAMILY PLAZA LP 1999 Broadway Suite 1000 Denver, CO 80202 94-3094867	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Bennett House LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308081	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Dorothy Day Community LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308078	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Junipero Serra LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308082	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Monsignor Lyne LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308080	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
St Andrew Community LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308080	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Villa Columba Mercy Riverside LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1308076	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California XL 1999 Broadway Suite 1000 Denver, CO 80202 26-1398920	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California XXXVIII 1999 Broadway Suite 1000 Denver, CO 80202 33-1153406	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
365 Fulton LP (Parcel G) 1999 Broadway Suite 1000 Denver, CO 80202 26-1539223	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California XLII 1999 Broadway Suite 1000 Denver, CO 80202 26-2575525	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California XLIV 1999 Broadway Suite 1000 Denver, CO 80202 26-3583090	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California XLIII 1999 Broadway Suite 1000 Denver, CO 80202 26-2553554	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Community Housing Georgia (MHCGa) 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689	low-inc hsng	GA	na	RELATED	0	0	No			No		0 %
Mercy Housing Georgia I 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689	low-inc hsng	GA	na	RELATED	0	0	No			No		0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?	(k) Percentage ownership
							Yes	No			
Mercy Housing Georgia IV 1999 Broadway Suite 1000 Denver, CO 80202 56-2328730	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Mercy Housing Georgia V LP 1999 Broadway Suite 1000 Denver, CO 80202 90-0284434	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Mercy Housing Georgia VI LP 1999 Broadway Suite 1000 Denver, CO 80202 20-4466474	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Acquisition Properties Georgia I 1999 Broadway Suite 1000 Denver, CO 80202 20-4465851	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Mercy Housing Georgia VIII LP 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Acquisition Properties Georgia II 1999 Broadway Suite 1000 Denver, CO 80202 20-4465972	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Mercy Properties Washington 1999 Broadway Suite 1000 Denver, CO 80202 91-1903782	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Intercommunity Mercy Washington I 1999 Broadway Suite 1000 Denver, CO 80202 91-1584665	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Intercommunity Mercy Washington II 1999 Broadway Suite 1000 Denver, CO 80202 91-1572690	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Mercy Housing Washington VIII 1999 Broadway Suite 1000 Denver, CO 80202 91-2124779	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Mercy Housing Washington VI 1999 Broadway Suite 1000 Denver, CO 80202 84-1459924	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Mercy Housing Washington V 1999 Broadway Suite 1000 Denver, CO 80202 84-1457612	low-inc hsng	OR	na	RELATED	0	0	No			No	0 %
Mercy Housing Washington VII 1999 Broadway Suite 1000 Denver, CO 80202 91-2038920	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Mercy Housing Washington IX LP 1999 Broadway Suite 1000 Denver, CO 80202 65-1186086	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %
Mercy Housing Washington X LLC 1999 Broadway Suite 1000 Denver, CO 80202 55-0887839	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Mercy Properties Washington III LLC 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Pilchuck 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Woodlake Manor II 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Woodlake Manor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Villa Kathleen 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Skagit Village 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Oak Harbor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Olympic 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Monroe Villa 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Lake Village East 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Lake Stevens 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Fircrest 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Ferndale Villa 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Evergreen Manor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Cedarwood I 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Cedarwood IV 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Cascade Apartments 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Boundary Village 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Mercy Properties Washington II 1999 Broadway Suite 1000 Denver, CO 80202 30-0117515	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Mercy Properties Washington I LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Bayshore Court 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Cambridge Apartments 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Cascade Village 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Cheney Gardens 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Mabton Gardens 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Moses Lake Estates 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Pine Road Village 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Rock Creek Terrace 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Sandstone 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	
Silvercrest 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No	0 %	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Wapato Gardens 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %
Washington Square 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %
111 Jones Street Assoc (111 Jones St) 1999 Broadway Suite 1000 Denver, CO 80202 94-3142765	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Britton Street Assoc(Britton Court) 1999 Broadway Suite 1000 Denver, CO 80202 94-3300509	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing Nebraska I 1999 Broadway Suite 1000 Denver, CO 80202 84-1449163	low-inc hsng	NE	na	RELATED	0	0	No			No		0 %
Mercy Housing California VII 1999 Broadway Suite 1000 Denver, CO 80202 94-3229540	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Somerset Senior Hsg 1999 Broadway Suite 1000 Denver, CO 80202 74-2765568	low-inc hsng	TX	na	RELATED	0	0	No			No		0 %
Mercy Housing California II 1999 Broadway Suite 1000 Denver, CO 80202 94-3187825	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado VIII 1999 Broadway Suite 1000 Denver, CO 80202 93-1190349	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado-I LTD (Grace) 1999 Broadway Suite 1000 Denver, CO 80202 84-1176712	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing California XI 1999 Broadway Suite 1000 Denver, CO 80202 94-3244521	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Marleton Affordable Hsg Assoc 1999 Broadway Suite 1000 Denver, CO 80202 04-3594636	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mason Apartments (Mason School Apts) 1999 Broadway Suite 1000 Denver, CO 80202 42-1301449	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing California V 1999 Broadway Suite 1000 Denver, CO 80202 94-3229051	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Park Terrace Apts (Park Terrace Apts) 1999 Broadway Suite 1000 Denver, CO 80202 94-3332881	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Quinn Cottages LP (Quinn Cottages) 1999 Broadway Suite 1000 Denver, CO 80202 65-0367005	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California X (The Rose) 1999 Broadway Suite 1000 Denver, CO 80202 94-3232501	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
San Felipe Homes (San Felipe Homes) 1999 Broadway Suite 1000 Denver, CO 80202 95-4384732	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
2220 10th Avenue Assoc (Santana Apts) 1999 Broadway Suite 1000 Denver, CO 80202 94-3140163	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California VIII 1999 Broadway Suite 1000 Denver, CO 80202 94-3229541	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing Iowa II LP 1999 Broadway Suite 1000 Denver, CO 80202 84-1284752	low-inc hsng	IA	na	RELATED	0	0	No			No		0 %
Mercy Housing California I 1999 Broadway Suite 1000 Denver, CO 80202 84-1210914	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing Arizona I 1999 Broadway Suite 1000 Denver, CO 80202 86-0791473	low-inc hsng	AZ	na	RELATED	0	0	No			No		0 %
Mercy Housing Georgia II 1999 Broadway Suite 1000 Denver, CO 80202 58-2621798	low-inc hsng	GA	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado-IX 1999 Broadway Suite 1000 Denver, CO 80202 87-0706258	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Arizona II (Page Commons) 1999 Broadway Suite 1000 Denver, CO 80202 33-1075152	low-inc hsng	AZ	na	RELATED	0	0	No			No		0 %
Parkside Terrace Apt LLC 1999 Broadway Suite 1000 Denver, CO 80202 36-3914505	low-inc hsng	IL	na	RELATED	0	0	No			No		0 %
Parkside Terrace LP 1999 Broadway Suite 1000 Denver, CO 80202 36-3914505	low-inc hsng	IL	na	RELATED	0	0	No			No		0 %
Mercy Housing South Carolina I 1999 Broadway Suite 1000 Denver, CO 80202 59-3767323	low-inc hsng	SC	na	RELATED	0	0	No			No		0 %
Mercy Housing Georgia III 1999 Broadway Suite 1000 Denver, CO 80202 43-1954812	low-inc hsng	GA	na	RELATED	0	0	No			No		0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Mercy Housing South Dakota I LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-2830331	low-inc hsng	SD	na	RELATED	0	0	No			No		0 %
Mercy Housing South Dakota II LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-2830356	low-inc hsng	SD	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado XI LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-5331841	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Commons on Main LP 1999 Broadway Suite 1000 Denver, CO 80202 20-8033896	low-inc hsng	OH	na	RELATED	0	0	No			No		0 %
Aromor Mercy LLC (Aromor Apartments) 1999 Broadway Suite 1000 Denver, CO 80202 30-0296042	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Galewood SLF Associates LP 1999 Broadway Suite 1000 Denver, CO 80202 20-1882654	low-inc hsng	IL	na	RELATED	0	0	No			No		0 %
Mercy Alston Lake LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-2948887	low-inc hsng	SC	na	RELATED	0	0	No			No		0 %
Franciscan Homes III LP 1999 Broadway Suite 1000 Denver, CO 80202 31-1394513	low-inc hsng	OH	na	RELATED	0	0	No			No		0 %
Franciscan Homes IV LP 1999 Broadway Suite 1000 Denver, CO 80202 31-1463371	low-inc hsng	OH	na	RELATED	0	0	No			No		0 %
Mercy Housing Utah I 1999 Broadway Suite 1000 Denver, CO 80202 02-0564555	low-inc hsng	UT	na	RELATED	0	0	No			No		0 %
Mercy Housing Idaho IV 1999 Broadway Suite 1000 Denver, CO 80202 82-0487654	low-inc hsng	ID	na	RELATED	0	0	No			No		0 %
Mercy Housing Idaho V (Sisters Villa) 1999 Broadway Suite 1000 Denver, CO 80202 04-3624359	low-inc hsng	ID	na	RELATED	0	0	No			No		0 %
2101 Telegraph Avenue Assoc 1999 Broadway Suite 1000 Denver, CO 80202 94-3222935	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Bishops Block (Bishops Block) 1999 Broadway Suite 1000 Denver, CO 80202 01-0477157	low-inc hsng	IA	na	RELATED	0	0	No			No		0 %
1028 Howard St Associates 1999 Broadway Suite 1000 Denver, CO 80202 94-3160742	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?	(k) Percentage ownership
							Yes	No			
1101 Howard St Associates	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3160341	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California VI	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3224528	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1475 167th Avenue Assoc	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3249328	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Centro Partners	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 77-0295344	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
La Playa Residential	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 77-0278613	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
West 28th Street	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 95-4550003	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
16th & Church Street Assoc	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3135262	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California III	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3187826	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California IX	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3230471	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California IV	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3210969	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Visitation Valley Fam Hsg Assoc	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3275566	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Neary Lagoon Partners	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 77-0256317	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XIV	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3377941	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XV	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3379316	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XVII	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
1999 Broadway Suite 1000 Denver, CO 80202 94-3400496	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Mercy Housing California XXIV 1999 Broadway Suite 1000 Denver, CO 80202 74-3052786	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XVIII 1999 Broadway Suite 1000 Denver, CO 80202 03-0376881	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XIII 1999 Broadway Suite 1000 Denver, CO 80202 94-3377935	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XX 1999 Broadway Suite 1000 Denver, CO 80202 36-4497277	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XVI 1999 Broadway Suite 1000 Denver, CO 80202 94-3381170	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XXIII 1999 Broadway Suite 1000 Denver, CO 80202 82-0560494	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XII 1999 Broadway Suite 1000 Denver, CO 80202 94-3366333	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Village Park Housing Associates 1999 Broadway Suite 1000 Denver, CO 80202 68-0254566	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XXI 1999 Broadway Suite 1000 Denver, CO 80202 48-1259652	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XIX 1999 Broadway Suite 1000 Denver, CO 80202 01-0716135	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XXV 1999 Broadway Suite 1000 Denver, CO 80202 81-0564415	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Pinewood Court Apartments 1999 Broadway Suite 1000 Denver, CO 80202 68-0435836	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XXII 1999 Broadway Suite 1000 Denver, CO 80202 35-2172040	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XXVI 1999 Broadway Suite 1000 Denver, CO 80202 58-2679059	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Mercy Housing California XLI 1999 Broadway Suite 1000 Denver, CO 80202 26-2350027	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?	(k) Percentage ownership
							Yes	No			
Mercy Housing California XIV 1999 Broadway Suite 1000 Denver, CO 80202 94-3377941	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXVII 1999 Broadway Suite 1000 Denver, CO 80202 65-1207291	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXVIII 1999 Broadway Suite 1000 Denver, CO 80202 73-1721242	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXIX 1999 Broadway Suite 1000 Denver, CO 80202 73-1729092	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXX 1999 Broadway Suite 1000 Denver, CO 80202 61-1488186	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
New Dana Strand Townhomes 1999 Broadway Suite 1000 Denver, CO 80202 51-0524022	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXXII 1999 Broadway Suite 1000 Denver, CO 80202 87-0756940	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXXVI 1999 Broadway Suite 1000 Denver, CO 80202 56-2568833	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXXI 1999 Broadway Suite 1000 Denver, CO 80202 87-0756700	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXXV 1999 Broadway Suite 1000 Denver, CO 80202 76-0827799	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing Ca XXXIII 1999 Broadway Suite 1000 Denver, CO 80202 43-2100410	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing Ca XXXVII 1999 Broadway Suite 1000 Denver, CO 80202 68-0631916	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Colonia San Martin Associates LP 1999 Broadway Suite 1000 Denver, CO 80202 83-0481233	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XXXIX 1999 Broadway Suite 1000 Denver, CO 80202 01-0885277	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Kennedy Estates Hsg Assoc 1999 Broadway Suite 1000 Denver, CO 80202 68-0355465	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Tahoe Valley Townhomes Assoc 1999 Broadway Suite 1000 Denver, CO 80202 94-3298324	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Florin Wood Assoc 1999 Broadway Suite 1000 Denver, CO 80202 68-0318012	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing Idaho II 1999 Broadway Suite 1000 Denver, CO 80202 84-1212029	low-inc hsng	ID	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado VII 1999 Broadway Suite 1000 Denver, CO 80202 84-1473883	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado-II Ltd 1999 Broadway Suite 1000 Denver, CO 80202 84-1176713	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Iowa I (Lawlor Garvey) 1999 Broadway Suite 1000 Denver, CO 80202 84-1178412	low-inc hsng	IA	na	RELATED	0	0	No			No		0 %
Mercy Housing Washington IV 1999 Broadway Suite 1000 Denver, CO 80202 91-1717799	low-inc hsng	MO	na	RELATED	0	0	No			No		0 %
Mercy Housing Missouri-I LP 1999 Broadway Suite 1000 Denver, CO 80202 84-1176358	low-inc hsng	MO	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado VI 1999 Broadway Suite 1000 Denver, CO 80202 84-1361296	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Idaho III 1999 Broadway Suite 1000 Denver, CO 80202 84-1251391	low-inc hsng	ID	na	RELATED	0	0	No			No		0 %
Mercy Housing Idaho I 1999 Broadway Suite 1000 Denver, CO 80202 84-1212028	low-inc hsng	ID	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado V 1999 Broadway Suite 1000 Denver, CO 80202 84-1318329	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Missouri II 1999 Broadway Suite 1000 Denver, CO 80202 84-1201811	low-inc hsng	MO	na	RELATED	0	0	No			No		0 %
Mercy Housing Colorado III 1999 Broadway Suite 1000 Denver, CO 80202 84-1292696	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Mercy Housing Washington III 1999 Broadway Suite 1000 Denver, CO 80202 91-1676111	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Mercy Housing Colorado IV 1999 Broadway Suite 1000 Denver, CO 80202 84-1284749	low-inc hsng	CO	na	RELATED	0	0	No			No	0 %	
Brentwood Green Valley Apts 1999 Broadway Suite 1000 Denver, CO 80202 94-3135990	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
New Dana Strand Partners I LP 1999 Broadway Suite 1000 Denver, CO 80202 51-0524022	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
Magnolia Limited Partnership 1999 Broadway Suite 1000 Denver, CO 80202 36-3822288	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
Red Door Limited Partnership 1999 Broadway Suite 1000 Denver, CO 80202 36-3915050	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
4707 Malden Ltd Partnership 1999 Broadway Suite 1000 Denver, CO 80202 36-3762788	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
Malden Limited Partnership II 1999 Broadway Suite 1000 Denver, CO 80202 20-8746121	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
MPI Highland Place Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %	
2220 Tenth Ave 1999 Broadway Suite 1000 Denver, CO 80202 94-3140163	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %	
South Loop Apartments 1999 Broadway Suite 1000 Denver, CO 80202 36-4027476	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
5042 Winthrop Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 36-3855358	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
Near North Partnership 1999 Broadway Suite 1000 Denver, CO 80202 32-0143113	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
Mercy Housing S Carolina 1999 Broadway Suite 1000 Denver, CO 80202 59-3767323	low-inc hsng	SC	na	RELATED	0	0	No			No	0 %	
Wentworth Commons 1999 Broadway Suite 1000 Denver, CO 80202 30-0082553	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	
901 West 63rd LP (Englewood Apartments) 1999 Broadway Suite 1000 Denver, CO 80202 26-1233617	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?	(k) Percentage ownership
							Yes	No			
Mercy Housing Georgia IX LP 1999 Broadway Suite 1000 Denver, CO 80202 20-8829418	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Roseland Limited Partnership 1999 Broadway Suite 1000 Denver, CO 80202 36-4304416	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %
Belray Apartments 1999 Broadway Suite 1000 Denver, CO 80202 36-4027474	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %
Harold Washington Apartments 1999 Broadway Suite 1000 Denver, CO 80202 36-3556291	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %
Bluff Mercy LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-0954394	low-inc hsng	CO	na	RELATED	0	0	No			No	0 %
Mercy Housing Senior Properties LLC 1999 Broadway Suite 1000 Denver, CO 80202 94-3081666	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Villa Columbia Mercy Riverside LP (Merc 1999 Broadway Suite 1000 Denver, CO 80202 36-4304416	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Mercy Housing California XLV (Washington 1999 Broadway Suite 1000 Denver, CO 80202 65-1308076	low-inc hsng	CA	na	RELATED	0	0	No			No	0 %
Boise Senior 202 Owner LP 1999 Broadway Suite 1000 Denver, CO 80202 27-0992784	low-inc hsng	ID	na	RELATED	0	0	No			No	0 %
Mercy Housing Idaho NSP LLC (NSPID) 1999 Broadway Suite 1000 Denver, CO 80202 27-1039061	low-inc hsng	ID	na	RELATED	0	0	No			No	0 %
CountrySide Senior Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 26-1483851	low-inc hsng	IL	na	RELATED	0	0	No			No	0 %
Johnston Center Outlots LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-0162550	low-inc hsng	WI	na	RELATED	0	0	No			No	0 %
Reynoldstown Senior Apts (Renoldstown) 1999 Broadway Suite 1000 Denver, CO 80202 27-0162550	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
Mercy Housing Georgia X (Savannah Garden 1999 Broadway Suite 1000 Denver, CO 80202 27-0162550	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %
MHSE Adamsville Green Senior Partners LL 1999 Broadway Suite 1000 Denver, CO 80202 26-2523190	low-inc hsng	GA	na	RELATED	0	0	No			No	0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Appian Way Mercy LLC 1999 Broadway Suite 1000 Denver, CO 80202 91-1546525	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %
New Tacoma Senior Housing Phase I 1999 Broadway Suite 1000 Denver, CO 80202 91-1546525	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %
New Tacoma Phase II Mercy LLC 1999 Broadway Suite 1000 Denver, CO 80202 26-4569392	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %
Northglenn LP 1999 Broadway Suite 1000 Denver, CO 80202 32-0139512	low-inc hsng	NE	na	RELATED	0	0	No			No		0 %
Mercy Crestview Village Housing LP 1999 Broadway Suite 1000 Denver, CO 80202 26-4578510	low-inc hsng	NE	na	RELATED	0	0	No			No		0 %
Western Manor LP 1999 Broadway Suite 1000 Denver, CO 80202 26-4578652	low-inc hsng	NE	na	RELATED	0	0	No			No		0 %
Alston Lake Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 26-4578402	low-inc hsng	SC	na	RELATED	0	0	No			No		0 %
Mercy Housing California XXXIV LP 1999 Broadway Suite 1000 Denver, CO 80202 51-0594948	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
Mercy Housing California XLVII 1999 Broadway Suite 1000 Denver, CO 80202 27-2930358	low-inc hsng	CA	na	RELATED	0	0	No			No		0 %
HWA-850 EASTWOOD LP 1999 Broadway Suite 1000 Denver, CO 80202 27-1257130	low-inc hsng	IL	na	RELATED	0	0	No			No		0 %
grayslake senior housing 1999 Broadway Suite 1000 Denver, CO 80202 26-3800351	low-inc hsng	IL	na	RELATED	0	0	No			No		0 %
mercy housing midwest nebraska llc 1999 Broadway Suite 1000 Denver, CO 80202 20-1583332	low-inc hsng	NE	na	RELATED	0	0	No			No		0 %
MERCY HOUSING COLORADO I LTD 1999 Broadway Suite 1000 Denver, CO 80203 84-1176712	low-inc hsng	CO	na	RELATED	0	0	No			No		0 %
Evergreen Vista 1 Owner LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-4160484	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %
Rainer Vista Block 43 Owner LP(Columbia 1999 Broadway Suite 1000 Denver, CO 80202 27-3221112	low-inc hsng	WA	na	RELATED	0	0	No			No		0 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income (\$)	(g) Share of end-of- year assets (\$)	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K- 1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
Mercy Housing California 51 LP (200 6th 1999 Broadway Suite 1000 Denver, CO 80202 94-2963228	low-inc hsng	CA	na	RELATED	0	0		No		No		0 %
Mercy Housing California 53 LP (Madonna 1999 Broadway Suite 1000 Denver, CO 80202 45-2050339	low-inc hsng	CA	na	RELATED	0	0		No		No		0 %
104th Street LP 1999 Broadway Suite 1000 Denver, CO 80202 27-2755027	low-inc hsng	IL	na	RELATED	0	0		No		No		0 %
Mercy Housing Georgia XI LP (Etowah Ter 1999 Broadway Suite 1000 Denver, CO 80202 26-2523190	low-inc hsng	GA	na	RELATED	0	0		No		No		0 %
Mercy Housing Georgia 12 LP (Savannah G 1999 Broadway Suite 1000 Denver, CO 80202 27-2987561	low-inc hsng	GA	na	RELATED	0	0		No		No		0 %
Mercy Housing California 50 LP (St Anth 1999 Broadway Suite 1000 Denver, CO 80202 27-3381997	low-inc hsng	CA	na	RELATED	0	0		No		No		0 %
Antioch Villas LP 1999 Broadway Suite 1000 Denver, CO 80202 27-0194197	low-inc hsng	GA	na	RELATED	0	0		No		No		0 %
MERCY HOUSING COLORADO I LTD 1999 Broadway suite 1000 denver, CO 80202 84-1176712	low-inc	CO	low-inc hsng					No				

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership
Belray Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-4027474	management	IL	na	c corp	0	0	0 %
Harold Washington Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-3556291	management	IL	na	c corp	0	0	0 %
Roseland Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-4304417	management	IL	na	c corp	0	0	0 %
South Loop Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-4027475	management	IL	na	c corp	0	0	0 %
Winthrop Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-3855355	management	IL	na	c corp	0	0	0 %
Near North Apartments Corp NF 1999 Broadway Suite 1000 Denver, CO 80202 36-4570431	management	IL	na	c corp	0	0	0 %
MCHG Partners Inc (MCHG) 1999 Broadway Suite 1000 Denver, CO 80202 20-8824753	management	GA	na	c corp	0	0	0 %
Mercy Lithonia Park View Inc (MLithPV) 1999 Broadway Suite 1000 Denver, CO 80202 20-8829364	management	GA	na	c corp	0	0	0 %
Malden Arms Corp II NFP 1999 Broadway Suite 1000 Denver, CO 80202 36-3815990	management	CA	na	c corp	0	0	0 %
Mercy Galewood SLF Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-5825081	management	IL	na	c corp	0	0	0 %
McDermott Place 1999 Broadway Suite 1000 Denver, CO 80202 47-0779682	management	IA	na	c corp	0	0	0 %
Mercy Affordable Housing Inc (MAHI) 1999 Broadway Suite 1000 Denver, CO 80202 82-0489878	management	ID	na	c corp	0	0	0 %
Affordable Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 84-1173690	management	CA	na	c corp	0	0	0 %
Affordable Housing Initiative (AHI) 1999 Broadway Suite 1000 Denver, CO 80202 94-3096988	management	CA	na	c corp	0	0	0 %
Englewood Apartments NFP 1999 Broadway Suite 1000 Denver, CO 80202 26-1233523	management	IL	na	c corp	0	0	0 %
Mercy Park View Partners Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-8829242	management	GA	na	c corp	0	0	0 %
111th & Wentworth Apartments Corp 1999 Broadway Suite 1000 Denver, CO 80202 38-3648994	management	IL	na	c corp	0	0	0 %
Mercy Commercial California 1999 Broadway Suite 1000 Denver, CO 80202 94-3382154	management	CA	na	c corp	0	0	0 %
Commercial - 10th and Mission 1999 Broadway Suite 1000 Denver, CO 80202 94-3382155	management	CA	na	c corp	0	0	0 %
Commercial - Derek Silva 1999 Broadway Suite 1000 Denver, CO 80202 94-3382156	management	CA	na	c corp	0	0	0 %

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership
Commercial - Polk St 1999 Broadway Suite 1000 Denver, CO 80202 94-3382157	management	CA	na	c corp	0	0	0 %
Commercial - Dudley 1999 Broadway Suite 1000 Denver, CO 80202 94-3382158	management	CA	na	c corp	0	0	0 %
HWA 850 ENGLEWOOD GP 1999 Broadway Suite 1000 Denver, CO 80202 27-1257072	management	IL	na	c corp	0	0	0 %
Countryside Seniors LLC 1999 Broadway Suite 1000 Denver, CO 80202 26-1483851	management	IL	na	c corp	0	0	0 %
Antioch II LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-3209358	management	GA	na	c corp	0	0	0 %
104th street mm llc 1999 Broadway Suite 1000 Denver, CO 80202 27-2754418	management	IL	na	c corp	0	0	0 %
Belvidere Place Corp I NFP 1999 Broadway Suite 1000 Denver, CO 80202 26-3800299	low-inc hsng	KY	na	c corp	0	0	0 %
Savannah Rose of Sharon LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-3591948	low-inc hsng	GA	na	c corp	0	0	0 %
Boise Senior 202 GP LLC 1999 Broadway Suite 1000 Denver, CO 80202 26-3841013	low-inc hsng	ID	na	c corp	0	0	0 %
MPI Highland Place LLC 1999 Broadway Suite 1000 Denver, CO 80202 26-2380898	low-inc hsng	GA	na	c corp	0	0	0 %

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(1) NORTHSIDE NAMPA	(A)	74,307	
(2) MERCY HOUSING CALIFORNIA	(A)	108,468	
(3) PADRE PALOU	(A)	68,686	
(4) MERCY PROPERTIES CALIFORNIA	(A)	185,000	
(5) DRIFTWOOD ESTATES	(A)	73,302	
(6) NORTHERN HEIGHTS	(A)	54,624	
(7) MERCY HOUSING CALIFORNIA	(B)	677,668	
(8) INTERCOMMUNITY MERCY HOUSING	(B)	95,750	
(9) MERCY HOUSING COLORADO	(B)	70,000	
(10) MERCY HOUSING LAKEFRONT	(B)	167,000	
(11) MERCY HOUSING MIDWEST	(B)	1,083,136	
(12) MERCY HOUSING SOUTHEAST	(B)	6,173,000	
(13) MERCY PORTFOLIO SERVICES	(B)	410,000	
(14) MERCY LOAN FUND	(B)	94,000	
(15) MASON SCHOOL	(C)	735,000	
(16) MERCY PROPERTIES INC	(C)	131,758	
(17) MERCY LOAN FUND	(D)	1,842,014	
(18) MERCY HOUSING CALIFORNIA PREDEVELOPMENT	(D)	3,952,552	
(19) MERCY HOUSING CALIFORNIA	(D)	464,136	
(20) GRACE APTS	(D)	1,030,000	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(21) NORTHSIDE NAMPA	(D)	314,787	
(22) NORTHERN HEIGHTS	(D)	987,517	
(23) MERCY HOUSING COLORADO OPERATING LOC	(D)	5,410,082	
(24) NORTHGLEN	(D)	442,316	
(25) CRESTVIEW VILLAGE	(D)	944,148	
(26) WESTERN MANOR	(D)	569,613	
(27) INTERCOMMUNITY MERCY HOUSING PREDEV & CONST L	(D)	348,634	
(28) MERCY HOUSING OHIO PREDEVELOPMENT LOC	(D)	194,588	
(29) MERCY HOUSING LAKEFRONT PREDEV & CONST LOC	(D)	2,568,838	
(30) MERCY HOUSING IDAHO OPERATING LOC	(D)	1,605,937	
(31) MERCY HOUSING SOUTHEAST PREDEV & CONST LOC	(D)	227,053	
(32) MERCY HOUSING SOUTHWEST OPERATING LOC	(D)	1,187,744	
(33) MERCY PROPERTIES CALIFORNIA	(D)	3,563,212	
(34) VALLE DE MERCED	(D)	497,050	
(35) EVERGREEN VISTA	(D)	411,469	
(36) HOLLY PARK WEST	(D)	69,089	
(37) MERCED DE LAS ANIMAS	(D)	91,709	
(38) NEW HOPE APTS	(D)	73,694	
(39) PADRE PALOU	(D)	496,582	
(40) PLAZA ON PLATTE	(D)	111,376	

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved (\$)	(d) Method of determining amount involved
(41) SPRINGFIELD COURT	(D)	324,000	
(42) DRIFTWOOD ESTATES	(D)	1,271,688	
(43) MERCY SERVICES CORPORATION OPERATING LOC	(D)	6,892,634	
(44) MERCY HOUSING SOUTHEAST OPERATING LOC	(D)	7,518,338	
(45) MERCY HOUSING OHIO OPERATING LOC	(D)	1,503,934	
(46) SHERWOOD PLACE	(D)	91,002	
(47) TIMBERCREEK	(D)	146,371	
(48) MERCY COURT	(D)	735,000	
(49) WAPITI MEADOWS	(D)	110,000	
(50) MERCY LOAN FUND	(E)	10,681,741	
(51) MERCY HOUSING IDAHO	(E)	750,000	