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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

Open to Public Inspection

A F	For the	2011 calendar year, or tax year beginning and	ending						
В	Check if applicable	C Name of organization		D Employer identific	eation number				
Г	Addres	HOUSING OPPORTUNITY FOUNDATION							
	Name Change			56-1609175					
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number					
	Termin	1201 GREENWOOD CLIFF, SUITE 200		(704)940-3130				
	Ameno			G Gross receipts \$	301,753.				
	Applic	CHARLOTIE, NC 20204		H(a) Is this a group re	turn				
	pendir	F Name and address of principal officer: ANNE MARIE HOWARD		for affiliates?	Yes X No				
		SAME AS C ABOVE		H(b) Are all affiliates incl	luded? Yes No				
ī	Tax-exe	mpt status. X 501(c)(3)	or 527	If "No," attach a	list (see instructions)				
		e: > WWW.CAROLINAHOME.COM		H(c) Group exemption	n number 🕨				
		organization: X Corporation	L Year	of formation: 1985 N	State of legal domicile: NC				
	art I	Summary							
ø		Briefly describe the organization's mission or most significant activities. ${ t IT} { t Is}$			THE HOUSING				
Governance		OPPORTUNITY FOUNDATION TO PROVIDE SUPPORT	r and	FUNDING ON A	<u>A</u>				
ř	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as					
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	15				
ڻ مح	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	15				
Activities &	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0				
Ϋ́	6	Total number of volunteers (estimate if necessary)		6	700				
ţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
⋖	ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0.				
				Prior Year	Current Year				
đ	8	Contributions and grants (Part VIII, line 1h)		272,999.	289,938.				
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	<u> </u>				
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		17,027.	11,815.				
Œ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		185.	0.				
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		290,211.	301,753.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		34,250.	24,500.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Ģ	ь	Total fundraising expenses (Part IX, column (D), line 25)	<u> 15.</u>						
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		318,966.	258,511.				
, a		Total expenses. Add lines 13-17 (must equal Part IX, column (A),/III = 25)		353,216.	283,011.				
S	19	Revenue less expenses. Subtract line 18 from line 12		-63,005.	18,742.				
Sets of	3	1/01	В	eginning of Current Year	End of Year				
Sets	20	Total assets (Part X, line 16)		539,069.	552,224.				
רי<	21	Total liabilities (Part X, line 26)		20,955.	38,259.				
	22	Net assets or fund balances. Subtract line 21 from @GDEN, UT		518,114.	513,965.				
₹P	art II	Signature Block							
		lties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is				
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich prepare	r has any knowledge.	 -				
•		Chre Marie Howard		11/13/	D				
Sig	jn	Signature of officer		Date					
He	re	ANNE MARIE HOWARD, CEO							
		Type or print name and title		D-1	T DTIN				
		Print/Type preparer's name Preparer's signature		Date Check f	PTIN				
Pai	id	JANICE A. RATICA	we-	11-0-12 self-employ					
Pre	parer	Firm's name CHERRY, BEKAERT & HOLLAND, E.L.		Firm's EIN ▶	56-0574444				
Use	e Only	Firm's address 1111 METROPOLITAN AVENUE, SUITE	1000						
_		CHARLOTTE, NC 28264	_	Phone no. 7	04-377-1678				
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

Citiest i Schedule Contains are sponse to any question in the Part III		4 UL Statement of Program Service Assemblishments
1 Briefly describe the organization's mission. TO POSITION AND EDUCATE REALTORS AS LEADERS, PROMOTE HOMEOWNERSHIP AND PROVIDE FUNDING TO CREATE HOUSING OPPORTUNITIES. 2 Dot the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990 €27 If ves, 'describe these new services on Schedule O. 3 Deterois the organization cease conducting, or make significant changes in how it conducts, any program services, as measured by expenses. 5 Describe the organization of services on Schedule O. 1 Describe the organization of services on Schedule O. 1 Describe the organization of services on Schedule O. 1 Describe the organization of services on Schedule O. 1 Describe the organization of services on Schedule O. 1 Describe the organization of services on Schedule O. 1 Describe the organization of services on Schedule O. 2 Describe the organization of services on Schedule O. 3 Describe the organization of services on Schedule O. 4 Coate (1) (Separess 7 8, 108. Section 9487(s))) furus are required to report the amount of grants and allocations to other, the total expenses, and read program services reported. 4 Coate (1) (Separess 7 8, 108. Section 9487(s)) furus are required to report the amount of grants and allocations to other, the total expenses, and read the service of the section 501(s) and 501(s) for several services of the section 501(s) for several services of s	Par	t III Statement of Program Service Accomplishments
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		ν.	
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
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	4		x
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	5		х
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	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	_	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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	_10_	_X_	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	_		
	as applicable.			ĺ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-		х
L	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ū	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11 <u>e</u>	_X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			l
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	ļ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	_X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	405	v	l
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b 13	X	Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			ĺ
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16_		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	!		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			.
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		_
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990 (2011)

2 Dd (the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and if 2 Dd the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and If 2 Dd the organization inserver "yes" to Part IX, lists Schedule II, Parts I and Iff 2 Dd the organization inserver "yes" to Part IX, lists Schedule II, Parts I and Iff 2 Dd the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the lest day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule II "No." go to like programation mirest any proceeds of tax exempt bonds beyond a temporary pend exception? 24a Dd the organization mirest any proceeds of tax exempt bonds beyond a temporary pend exception? 25b Dd the organization mirest any proceeds of tax exempt bonds beyond a temporary pend exception? 25c Dd the organization make an ascrow account other than a refunding secrow at any time during the year? 25d Dd the organization account on the third in a refunding secrow at any time during the year? 25c 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? 25d Dd the organization accounts of the organization organization and the total text that the transaction which a disqualified person out and provide a grant or other assistance to an orticin, director, frustee, key employee, or disqualified person out allowed provides a grant or other assistance to an orticin, director, frustee, key employee, or disqualified person out allowed provides a grant or other assistance to an orticin, director, frustee, key employee, or disqualified person out and the provides and provides and provides and provides and provides				V	
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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), the 27 if Yes, "complete Schedule I, Parts I and III and Ironard Officers, directors, trustees, key employees, and highest compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, "complete Schedule K. If "No", go to Inne 25 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 lines 24b through 24d and complete Schedule K. If "No", go to Inne 25 25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26b Did the organization as an 'on behalf of' issuer for bonds outstanding at any time during the year? 26a Section 50 (E)(3) and 50 (E)(4) organizations. Did the organization engage in an excess benefit transaction with a decigualfied person during the year? If "Yes," complete Schedule L, Part II and the transaction has not or they 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 and the transaction provide a grant or other assistance to an officer, director, trustee, key employee, bighly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II and the year part of the part of the reganization's part of year part of the part IV and the organization receive more than \$25,000 in non-cash contributions of "I" "Yes," complete Schedule L, Part IV and the organization receive more than \$25,000 in non-cash contributions of "I" "Yes," complete Schedule L, Part IV and the organization related to any tax-exempt or tax-exemp			21	y	
column (A), line 27 if "Yes," complete Schedule I, Parts I and III 2 Did the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24 brough 24d and complete Schedule J. If "No", go to line 25 be the organization missal after December 31, 2002? If "Yes," answer lines 24b brough 24d and complete Schedule I, I" "No", go to line 25 be the organization missal and a sa are some account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization missal and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 24d 25d Section 501((3)) and 501((3)) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "Yes," complete Schedule I, Part I b is the organization aware that the regaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization engage in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule I, Part II b is the organization aware that engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization is a xy year? If "Yes," complete Schedule I, Part II b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons of "Yes," complete Schedule I, Part IV and the particular or organization receive contributions of art, historical trassures, or key employee? If "Yes," complete Schedule I,	22	·	-	- 1	
23 Did the organization answer "Yes" to Part VII. Section A. Inie 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. 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year? Did the organization at an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I bis the organization wave that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged in an excess benefit transaction with a disqualified person unaware that it engaged as grain or other engaged in the person outstanding as of the engaged in a person of the organization person of the engaged in a person of		-	22		¥
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Schedule J 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 lines 24b through 24d and complete Schedule K. If "No! go to line 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization ward that it engaged in an excess benefit transaction with a disqualified person unit any time year? Did the organization and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and the organization in the organization of organization for org					
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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 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 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, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **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 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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 X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 7 Х 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? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7c 7d d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7e X 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter. 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2011) HOUSING OPPORTUNITY FOUNDATION 56-1609175 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

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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? 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶NC 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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 during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ HEATHER CHESNUTT - 704-940-3130	b	Other officers or key employees of the organization	15b		X
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State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► HEATHER CHESNUTT − 704−940−3130	19		ı ıırıdı	icial	
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		1201 GREENWOOD CLIFF, SUITE 200, CHARLOTTE, NC 28204			

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HOUSING OPPORTUNITY FOUNDATION

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Page **7**

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. 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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former ,	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CAM BARNETT III	2.00	X						0.	0.	245.
BOARD MEMBER (2) DENNY BOWLER	2.00	Λ		-			_	- 0.	· ·	
BOARD MEMBER	2.00	X						0.	ο.	245.
(3) DANIEL COTTINGHAM JR.	2.00	122			<u> </u>	<u> </u>				
BOARD MEMBER	2.00	x					1	0.	0.	245.
(4) JOHN KINDBOM										
BOARD_MEMBER	2.00	X						0.	0.	245.
(5) MIKE LARUFFA										
BOARD MEMBER	2.00	X						0.	0.	245.
(6) ALISON ROYAL-COMBS										
BOARD MEMBER	2.00	X			<u> </u>			0.	0.	245.
(7) RAINE SPIVEY										
BOARD MEMBER	2.00	X	<u> </u>	ļ	<u> </u>	<u> </u>		0.	0.	245.
(8) KERRY STECHER		ŀ			l					
BOARD MEMBER	2.00	X	<u> </u>		<u> </u>	_		0.	0.	245.
(9) STAN SUTHER										0.45
BOARD_MEMBER	2.00	X		-		├	<u> </u>	0.	0.	245.
(10) DEBBIE WHITE				ļ						245
BOARD MEMBER	2.00	X	├	-		-		0.	0.	245.
(11) JENNIFER FRONTERA	10.00			77				0.	0.	245
PRESIDENT ELECT	10.00	^	┢	X	├	┝				245.
(12) LYN KESSIE	10.00	٠,		x			1	0.	0.	245.
PAST PRESIDENT	10.00	^	┢	^	╁	-		ļ		
(13) LAURIE KNUDSEN	10.00	x	ŀ	х		i		0.	8,700.	245.
PRESIDENT (14) ERIC LOCHER	10.00	^	┢╾	<u> </u>	┢	╁╌	\vdash		0,700.	243.
TREASURER	10.00	X	ļ	x	ļ			0.	0.	245.
(15) JOE REMPSON	1 20.00	1	1		T	T				
SECRETARY	10.00	x	1	x	l		l	0.	0.	245.
(16) ANNE MARIE HOWARD										
CEO	40.00			X	_	$oxed{igspace}$	_	0.	206,606.	9,485.

Part	VII Section A. Officers, Directors, Tru	ustees, Key Employees, and Highest C							Compensated Employ					
	` (A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	e	Es	timate	ed
		hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensati			nount	of
		week	-	cer ar	lu a u	irecto	or/trus	iee)	from	from relate			other	
		(describe hours for	recto				l		the	organization			pensa	
		related	b or d	異			sated		organization (W-2/1099-MISC)	(W-2/1099-MI	150)		om the	
		organizations	ruste	l trus		, 1	m de l	l	(***271033*****1000)			_	d relat	
		ın Schedule	Individual trustee or director	Institutional trustee	L	Key employee	Highest compensated employee	l					anızatı	
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сТ	otal from continuation sheets to Part V	I, Section A					\triangleright		0.		0.			0.
	otal (add lines 1b and 1c)	•					•		0.	215,3	06.	1	3,1	60.
	otal number of individuals (including but r	ot limited to th	nose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportat	ole			
	ompensation from the organization									•				C
							•			-			Yes	No
3 D	old the organization list any former officer,	director, or tru	uste	e. ke	v er	nolo	vee	or i	highest compensated e	mplovee on				
	ne 1a? If "Yes," complete Schedule J for s			•,	,,		,					3		X
	or any individual listed on line 1a, is the si			omn	anes	atıor	n and	d oti	her compensation from	the organization	,			
	nd related organizations greater than \$15									ano organization		4	x	
	any person listed on line 1a receive or									idual for services			-43	
								Ciat	ed organization of indiv	idual for services	•	5		Х
	endered to the organization? If "Yes," com on B. Independent Contractors	ipiete Scriedui	e J 1	0/ 5	ucn	pers	SOII	_				<u> </u>		Λ
	Complete this table for your five highest co								hat racewad more than	\$100,000 of oo		otion (
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tr	ne organization Report compensation for	the calendar y	ear	enai	ng v	vitri_	or w	ILTUI		ye <u>ar</u>				
	(A) Name and business	address	37/	~377	73			}	(B) Description of s	enuces		Omne	رز nsatıo	n
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2 T	otal number of independent contractors (including but r	ot li	mite	d to	tho	se lu	sted	f above) who received n	nore than				
\$	100,000 of compensation from the organi	zation_					0				<u> </u>			
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1			,			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
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g Total. Add lines 2a:21 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents 6 b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) f Net rental income or (loss) 0 Net rental income or (loss) 0 Net gain or (loss) 1 Net gain or (loss) 1 Net gain or (loss) 2 Net income or (loss) 5 Net income or (loss) 6 Net income or (loss) 7 a Gross income from fundraising events (not including \$ 6,175. of contributions reported on line 1c) See Part IV, line 18 1 Dess: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 1 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 1 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 1 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 1 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 1 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 2 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from gaming activities. See Part IV, line 19 3 Dess: direct expenses b C Net income or (loss) from	_				Business Code				
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	13200	9	rotal revenue. See instructions.			JU1,1JJ.		<u> </u>	

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 respons	se to any question in thi	s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	24,500.	24,500.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	1		1	
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				<u></u>
5	Compensation of current officers, directors,				
	trustees, and key employees				_
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	J			
9	Other employee benefits	-	-	-	
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	175,687.	108,276.	55,319.	12,092.
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	6,948.		6,948.	
g	Other	8,027.		8,027.	
12	Advertising and promotion	592.		592.	
13	Office expenses .	801.		801.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance .				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	RCD MATERIALS	58,639.	58,639.		
b	EDUCATIONAL EVENT EXPEN	7,230.	7,230.		
c	LICENSE & OTHER EXPENSE	423.			423.
d					
	All other expenses	164.	134.	30.	
25	Total functional expenses. Add lines 1 through 24e	283,011.	198,779.	71,717.	12,515.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	j			
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** (B) End of year (A) Beginning of year 31,747. 74,138. Cash - non-interest-bearing 1 1 2 Savings and temporary cash investments 10,000. 22,431 3 Pledges and grants receivable, net 3 1,215 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net Inventories for sale or use 8 8 2,798. 1,364. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation 10c h 11 Investments - publicly traded securities 11 462,659. 480,683. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 195. 2,285. 15 15 Other assets See Part IV, line 11 539,069. 552,224. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 15,000. 17 Accounts payable and accrued expenses 18 18 Grants payable 5,955. 9,000. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of 0 <u>29,259.</u> Schedule D 25 20,955 Total liabilities. Add lines 17 through 25 38,259. Organizations that follow SFAS 117, check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances <u>510,683</u> 508,965. 27 Unrestricted net assets 7,431 5,000. Temporarily restricted net assets 28 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 518,114 33 513,965. Total net assets or fund balances 33 552,224. 539,069 Total liabilities and net assets/fund balances

Form 990 (2011)

<u>-orm</u>	_990 (2011) _ HOUSING OPPORTUNITY FOUNDATION	20-T002	7175	Pad	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	_1			<u>53.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	283	3,0	<u>11.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	18	<u>7, 8</u>	<u>42.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	518	<u>3,1</u>	<u>14.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2:	2,8	<u>91.</u>
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	513	<u>3,9</u>	<u>65.</u>
Pa	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990.				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a_		_X_
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	1 1	ĺ	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.	1		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	a no t			
	separate basis, consolidated basis, or both		1 [ĺ	
	Separate basis Consolidated basis X Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	9 90 (2011)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

HOUSING OPPORTUNITY FOUNDATION

Employer identification number 56-1609175

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st comple	e this part) See inst	tructions					
he organ	ization is not a	private foundation	because it is. (For lines	1 through	11, check	only one b	ox)				_		
1			s, or association of chur					١.					
2	· ·		'0(b)(1)(A)(ii). (Attach Sc				(-/(-/(-/(-/(-/						
з 🗔			tal service organization		ın section	170(h)(1)(Δ\fiii\						
4 🗂	•	•	operated in conjunction					/b\/ 1\/ A\/ ii	ii) Enter th	ne hospital's name			
-	city, and stat	•	oporatos in conjunction	***************************************	pital dood	1000 111 30	00011 170		ii). Ciitoi ti	te neophar s name,			
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governi	mental un	it describe	d in	_		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)										
6 🔲	A federal, sta	te, or local governm	ent or governmental uni	t described	d ın sectio	n 170(b)(1	i)(A)(v).						
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit d	or from the	general p	ublic described in			
	section 170(b)(1)(A)(vi). (Comple	te Part II.)										
8 🖳	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)								
9	•		eives: (1) more than 33						-	•			
			nctions - subject to certa								nt		
	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	-		perated exclusively to te	-	-			-		_			
11			perated exclusively for the										
			ations described in section) See sec	ction 509(a)(3). Che	ck the box that			
			organization and compli						. —				
	a Type I			тур 📖 г						Type III - Other			
e 📖			it the organization is not										
		_	han one or more publicly						9(a)(1) or s	ection 509(a)(2).			
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		٦	_		
	• •	rganization, check th							_	L			
g			organization accepted ar							 	_		
	• •		lirectly controls, either al	one or tog	ether with	persons c	lescribed	in (ii) and ((III) below,		0		
	_		upported organization?							11g(i)	—		
	• •	·	n described in (i) above?							11g(ii)			
	• •	·	person described in (i) o							11g(iii)	—		
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s)								
40. 11			(iii) Type of	Viv.\ Ic the c	organization	(v) Did voi	L notify the	(vi) is	s the	(-11) A			
	of supported	(ii) EIN	organization	sted in your			Lorganizati	on in col. l	(vii) Amount of support				
orga	anization		(described on lines 1-9		document?			(i) organiz U.S	5.?	Support			
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No				
			,,										
								1					
				-									
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		 			 		_	 	 		—		
[ntal													

Schedule A (Form 990 or 990-EZ) 2011 HOUSING OPPORTUNITY FOUNDATION 56-1609175 Page 2

| Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(ii) and 170(b)(1)(A)(ii)

Support Schedule for Organizations Described in Sections 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 (d) 2010 (b) 2008 (c) 2009 (e) 2011 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 319,161. 272,999. 289,938. include any "unusual grants.") 470,030. 324,373. 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 272,999. 470,030. 324,373. 319,161. 289,938. 4 Total. Add lines 1 through 3 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) 1098863. 577,638. 6 Public support. Subtract line 5 from line 4

Section B. Total Support (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Calendar year (or fiscal year beginning in) 272,999. 289,938 1676501. 470,030. 324,373. 319,161 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 16,852 7.983. 9,497. 12,938. 11,815 59,085. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 295 180 185 9,605. 8,945 assets (Explain in Part IV) 1745191. 11 Total support. Add lines 7 through 10 55,803. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)

_	organization, check this box and stop here		<u></u>
Se	ction C. Computation of Public Support Percentage		
14	Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	33.10 %
46	Bublic support paragraphes from 2010 Schodule A. Bart II. line 14	15	34 66 %

15 Public support percentage from 2010 Schedule A, Part II, line 14

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 a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2011

 $\triangleright X$

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	Public Support	siow, picaso comp	siote i art ii j				
Calendar year (c	or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, gran	nts, contributions, and						
membersl	nip fees received. (Do not						
include ar	ny "unusual grants ")				1		
2 Gross rec	eipts from admissions,						
	ise sold or services per-						
	r facilities furnished in						
	ty that is related to the on's tax-exempt purpose					1	
•	eipts from activities that						
	unrelated trade or bus-			-		[
	er section 513			1			
	· · · · · · · · · · · · · · · · · · ·				 -		
	ues levied for the organ-						
	enefit and either paid to			Į.	1		
•	ed on its behalf						
	of services or facilities						
	by a governmental unit to	ļ					
the organ	zation without charge						
6 Total. Add	d lines 1 through 5						
7a Amounts	included on lines 1, 2, and			1]	
3 received	I from disqualified persons						
	uded on lines 2 and 3 received						
	an disqualified persons that				1		
•	reater of \$5,000 or 1% of the ne 13 for the year						
c Add lines	·	·					
	pport (Subtract line 7c from line 6)		-				
	Total Support		<u> </u>			·· ·	
	or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts	· · · · · ·	(a) 2001	(6) 2000	(0) 2000	(4) 2010		
	ome from interest,						
	, payments received on					1	
securities	loans, rents, royalties						
	ne from similar sources				 -	 	
	ousiness taxable income						
	n 511 taxes) from businesses	,					
acquired at	ter June 30, 1975						
c Add lines	10a and 10b			<u> </u>			
	ne from unrelated business						
	not included in line 10b, or not the business is						
regularly o		·			İ		
	ome. Do not include gain		1				
	m the sale of capital						
	(plain in Part IV) Off (Add lines 9, 10c, 11, and 12)				1		
	years. If the Form 990 is for	the organization's	s first second the	rd fourth or fifth t	ax vear as a secti	on 501(c)(3) organiz	ation.
	box and stop here	and organization s	55t, 5000ma, tm	,, 01	, 45 4 50011	c so i (o)(o) organiz	▶ □
	Computation of Publi	c Support Pe	rcentage				
	oport percentage for 2011 (I			column (fl)		15	
•	• • • •		•	COMMIT (I))		15	%
	Computation of Inves					110 1	
	Computation of Inves					T T	
	nt income percentage for 20			ne 13, column (t))		17	%
	nt income percentage from 2					[18]	%
19a 33 1/3% :	support tests - 2011. If the	organization did n	ot check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line 1	7 is not
	33 1/3%, check this box ai						▶└
b 33 1/3%	support tests - 2010. If the	organization did n	ot check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	not more than 33 1/3%, che						
	undation. If the organizatio						<u>_</u> ▶□

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Name of the organization

HOUSTING OPPORTUNITY FOINDATION

Employer identification number 56-1609175

organization answered "Yes" to Form 990, Part IV, line 6. 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (fuung year) 4 Aggregate value at end of year 5 Did the organization inform all denors and donor advisors in writing that the assets held in donor advised funds are the organization inform all denors and donor advisors in writing that the assets held in donor advised funds are the organization inform all dinors and donor advisors in writing that the assets held in donor advised funds are the organization inform all granties, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for haritable purposes and not for the benefit of the donor of donor advisors in writing that grant funds can be used only for haritable purposes benefit? Part II Consorvation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. line 7. 1 Purpose(s) of conservation easements held by the organization of an instoncially important land area Preservation of a native property subject to granting the grant Preservation of a certified historic structure 1 Preservation of a certified historic structure 2	Part I	Organizations Maintaining Donor Advise		r Accounts. Complete if the
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 informal it donors and donor advisors in writing that the assets held in donor advised funds are the organization informal it donors and donor advisors in writing that the assets held in donor advised funds are the organization informal if grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purvate benefits by the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation assements bet by the organization of education) Preservation of an Instoncially important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of a conservation easement on the last Preservation of a conservation easement on the last Preservation of a conservation easement on the last Preservation of conservation easements Preservation of a conservation easement on the last Preservation easement Preservation easement Preservation Preser				Accounts. Complete if the
1 Total number at end of year 2 Aggregate grants from (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization's property, subject to the organization's exclusive legal control? 6 Did the organization's property, subject to the organization's exclusive legal control? 7 Did the organization form all grantees, 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? 8 Did the organization organization and grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 930, Part IV, line 7. 1 Purpose(s) of conservation easements. Complete if the organization answered "Yes" to Form 930, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply) 1 Preservation of and for public use (e.g., recreation or education) 2 Preservation of a conservation easement is not a qualified conservation contribution in the form of a conservation easement or the last day of the tax year. 2 Total number of conservation easements 3 Total number of conservation easements 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 5 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 8 Number of states where property subject to conservation easement is located 9 Number of states where property subject to conservation easements in the revenue and expenses attement, and balance sheet, and include, a papicable, the text of the Control to the organization and enforcing conservation easements during the year 9 Number of states where property subject to conservation easements in its revenue and expenses statement, an		Organization answered Tes to Form 330, Fart IV, iii		(b) Funds and other accounts
2 Aggregate contributions to (during year) 3 Aggregate contributions to (during year) 4 Aggregate value at end of year 5 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all denors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring incorrensible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring incorrensible private benefit? Part III Conservation Easements. Complete if the organization (check all that apply)	1 Tc	stal number at and of year	(a) Berior advised laries	(b) i chas and sinci accounts
A 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? 9 Did the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 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 education) Preservation of an instoncially important land area Protection or natural habitat Protection of natural habitat Preservation of public use (e.g., recreation or education) Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2 Total number of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection of conservation easements Protection Prot		•		
A 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 inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantalish purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an histonically important land area Protection of natural habitat Preservation or advisor Preservation of a certified historic structure Preservation of open space 2 Complete lines 2 at through 2 if the organization held a qualified conservation contribution in the form of a conservation easement in the last day of the tax year. a Total number of conservation easements Held at the End of the Tax Year 2 a Number of conservation easements on a certified historic structure included in (a) 2 a Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d Number of states where property subject to conservation easements located 2d Number of states where property subject to conservation easements located 2d Number of states where property subject to conservation easements is located 2d Number of states where property subject to conservation easements of section 170(h)(4)(B)(0) Yes No No Part XIV, describe how the organization reports conservation easements that descri	-	· · · · · · · · · · · · · · · · ·		
S Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? 8 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable private benefit? Part III Conservation Easements. Complete if the organization answered "Ves" 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 education) Preservation of an historically important land area Preservation of natural habitat Preservation of a conservation easement in the last day of the tax year. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 4 Total number of conservation easements 5 Total answer of conservation easements included in (a) acquired after 8717706, and not on a historic structure listed in the National Register 4 Number of conservation easements included in (a) acquired after 8717706, and not on a historic structure ad last was a written policy regarding the penode montoring, inspection, and in the National Register 4 Number of states where property subject to conservation easement is located National Property and the Property subject to conservation easements during the year Shapping and section 170(h)(4)(B)(0) Preservation easements of the conservation easements of section 170(h)(4)(B)(0) Preservation easements of the conservation easements of the conservation easements of section 170(h)(4)(B)(0) Preservation easements in the formote to the organization's accounting for conservation easements in the formote to the organization sewered by the formote of the propert in its revenue and expense st	-			
are the organization's property, subject to the organization's exclusive legal control? Did the organization informal grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of open space Preservation open space Preservation of open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation open space Preservation				6 d -
6 Dut the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II				
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Inne 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2 at through 2 dif the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.				 : : :
Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Inne 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of open space Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements Protection of conservation easements Total acreage restricted by conservation easements Total acreage restricted by conservation easements Conservation easements Conservation easements Conservation easements Conservation easements Conservation easements Conservation easements Conservation easements Conservation easements Conservation easements Conservation Co		• • • • • • • • • • • • • • • • • • • •	5 5	*
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 education) □ Preservation of an historically important land area □ Protection of natural habitat □ Preservation of an earth organization held a qualified conservation of a certified historic structure □ Preservation of a certified historic structure □ Preservation of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the penodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 5 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 5 Does seach conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(h) and section 170(h)(4)(B)(h)? 9 In Part XIV, describe how the organization reports conservation easements that describes the organizations accounting for conservation easements. The organization is accounting for conservation easements. The organization is accounting for conservation easements that describes the organization 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			or donor advisor, or for any other purpose con	
Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements Held at the End of the Tax Year 2a End of the Tax Y			contration answered "Vee" to Form 200. Port	
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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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide			morro manda diatemente mai decembre mo	organization o accounting for
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If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	L		•	
historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	1a lf '		·	t and balance sheet works of art,
the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide		•		
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1		•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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				d balance sheet works of art, historical
relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide				
(i) Revenues included in Form 990, Part VIII, line 1		•	,	
(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	m	<u>-</u>		> \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	(1)	· · · · · · · · · · · · · · · · · · ·		*
•	(i) (ii)			• •
	• •	•	asures, or other similar assets for financial oa	
a Revenues included in Form 990, Part VIII, line 1	2 lf 1	the organization received or held works of art, historical tre		
b Assets included in Form 990, Part X \$	2 lf i	the organization received or held works of art, historical tre e following amounts required to be reported under SFAS 1		

		OPPORTUNI			ou Cinali		091/5	
3	Using the organization's acquisition, accessi	ion, and other record	is, check any of the	following that are a	significant	use of its	collection	items
	(check all that apply).		┌ ┐.					
а	Public exhibition	d		hange programs				
ь	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co					ose in Par	t XIV	
5	During the year, did the organization solicit of				ar assets	_	_	
г 	to be sold to raise funds rather than to be m						_ Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the organizatio	n answered "Yes" to	Form 990), Part IV,	lıne 9, or	
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	s or other assets no	t included			
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table.					
							Amount	
С	Beginning balance				1c_			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				_ 1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				Yes	☐ No
_ b_	If "Yes," explain the arrangement in Part XIV							
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 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	480,683.	428,964.	351,496,				
b	Contributions		·					
С	Net investment earnings, gains, and losses	-18,024.	51,719.	77,468,				
d	Grants or scholarships							
е	Other expenditures for facilities		1					
	and programs						L	
f	Administrative expenses			<u></u> _				
g	End of year balance	462,659.	480,683,	428,964,				
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	ı)) held as.				
а	Board designated or quasi-endowment	100.00	_%					
b	Permanent endowment ▶	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.						
За	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the organi	zation	_	
	pà.							Yes No
	(i) unrelated organizations						3a(ı)	<u> </u>
	(ii) related organizations						3a(iı)	X
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Schedule R?				_3b	
4	Describe in Part XIV the intended uses of the							
Par	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X, line 10.	- 				
	Description of property	(a) Cost or o			Accumulate		(d) Book	value
		basis (investr	nent) basis	(other) de	preciation			<u> </u>
	Land							
	Buildings .							
C	Leasehold improvements						<u>-</u>	
d	Equipment							
<u>e</u>	Other	L						
Tatal	Add lines 1a through 1a (Column (d) must a	aual Form 900 Part	Y column (R) line 1	0(c))				Λ

(1) Federal income taxes
(2) DUE TO AFFILIATE ORGANIZATION 29,259.
(3)
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 29,259.
FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organ

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

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 15. FIN 48 (ASC 740).

		(Form 990) 2011		OPPORTUNIT						609175	Page 4
Pai	t XI	Reconciliation o			Form 990 to	Audit	ed Financia	State	ment		
1		revenue (Form 990, Par					1				753.
2	Total	expenses (Form 990, P	art IX, column (A)	, line 25)			_ 2	:			011.
3	Exces	s or (deficit) for the yea	r. Subtract line 2	from line 1			_ 3	<u> </u>	_		742.
4	Net ur	nrealized gains (losses)	on investments				4			-22	<u>891.</u>
5	Donat	ed services and use of	facilities				5	_			
6	Invest	ment expenses					6				
7	Prior p	period adjustments					7				
8	Other	(Describe in Part XIV)					_8	-			
9		adjustments (net). Add	•				9				891.
10 Dar		s or (deficit) for the yea Reconciliation o					ith Poyonus		oturn		149.
						113 11	itii Nevellue	pern	Luiti	211	699.
1		revenue, gains, and oth			ments				1	<u> </u>	099.
2		nts included on line 1 b		90, Part VIII, line 12		ا مما	_ 22	Q Q 1			
a		nrealized gains on inves ed services and use of	•			2a 2b		891. 785.			
b		ed services and use of veries of prior year gran				20 2c		705.			
C		. , .	เร								
d		(Describe in Part XIV)				2d_			0-	16	001
		nes 2a through 2d							2e		894.
3		act line 2e from line 1	000 D-+1/III l	40 1					3	494	605.
4		nts included on Form 9				ا م ا	· ·	948.			
а		ment expenses not inc	luaea on Form 9:	90, Part VIII, line 7b		4a	_ 0,	740.	-		
b		(Describe in Part XIV)				4b		-		c	0.4.0
_		nes 4a and 4b							4c	<u> </u>	948. 753.
5 Da	<u>lotali</u> + VIII	revenue Add lines 3 and Reconciliation of	f Expanses p	equal Form 990, Part or Audited Final	ncial Stateme	nte V	Vith Evnens	es ner	5 Retur		155.
					ilciai Staterile	iilo v	VIIII Expens	es per	netui		0.4.0
1		expenses and losses p							1	315	848.
2		nts included on line 1 b		90, Part IX, line 25		1	1 20	705			
а	•	ed services and use of	facilities			2a	39,	<u>785.</u>			
b		ear adjustments				2b_					
С		losses				2c					
d		(Describe in Part XIV)				_2d				2.0	505
е		nes 2a through 2d							2e		785.
3		act line 2e from line 1							3	276	063.
4		nts included on Form 9					ے ا	0.40			
а	Invest	ment expenses not inc	luded on Form 9	90, Part VIII, line 7b		<u>4a</u>	6,	948.			
þ	Other	(Describe in Part XIV)				4b				_	- 4 -
		nes 4a and 4b							4c		948.
		expenses Add lines 3 a		t equal Form 990, Pa	art I, line 18)				5	283	011.
		Supplemental In									
		ns part to provide the d	•								4; Part
		rt XI, line 8, Part XII, line									
PAI	RT V	, LINE 4: T	HE ENDOWM	IENT FUNDS	ARE DESIG	NA'I'	ED TO BE	USE	D FC	R THE	
്വ	ነጥ ፐ እ ነ	UED USE OF '	THE FOUNT	ATTON'S OP	ERATTONS.						
		022 02									
					-					<u> </u>	
PAI	RT X	, LINE 2: T	HE FOUNDA	TION FOLLO	WS FINANC	CIAL	ACCOUNT	ING	STAN	DARDS	
BO!	<u>IRD</u>	("FASB") GU	IDANCE ON	ACCOUNTIN	G FOR UNC	ERT	AINTY IN	INC	OME	TAXES.	
THE	E FO	UNDATION'S	POLICY IS	TO RECORD	A LIABII	YTI	FOR ANY	TAX	POS	ITION	
TAI	<u>KEN</u>	THAT IS BEN	EFICIAL T	O THE FOUN	DATION, I	NCL	UDING AN	Y RE	LATE	D INTER	REST
<u>ANI</u>) PE	NALTIES, WH	EN IT IS	MORE LIKEL	Y THAN NO	<u>T T</u>	HE POSIT				
									Schedu	ıle D (Form 9	90) 2011

132054 01-23-12

Schedule D (Form 990) 2011 HOUSING OPPORTUNITY FOUNDATION Part XIV Supplemental Information (continued)	56-1609175 Page 5
MANAGEMENT WITH RESPECT TO A TRANSACTION OR CLASS OF TRANS	ACTIONS WILL BE
OVERTURNED BY A TAXING AUTHORITY UPON EXAMINATION. MANAGE	MENT BELIEVES
THERE ARE NO SUCH POSITIONS AS OF DECEMBER 31, 2011 AND 20	10 AND.
	10 1110
ACCORDINGLY, NO LIABILITY HAS BEEN ACCRUED.	
	
	

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

2011
Open to Public Inspection

≗ Schedule I (Form 990) (2011) Employer identification number 56-1609175 Inspection (h) Purpose of grant or assistance X Yes 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. Part II can be duplicated if additional space is needed 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table HOUSING OPPORTUNITY FOUNDATION (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service Part Part II

Schedule I (Form 990) (2011)

132102 01-27-12

Page 2

56-1609175

HOUSING OPPORTUNITY FOUNDATION

Schedule I (Form 990) (2011)

SCHEDULE J (Form 990)

Compensation Information

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Attach to Form 990. See separate instructions.

HOUSING OPPORTUNITY FOUNDATION

Employer identification number 56-1609175

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
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?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III		-	,
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations 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:			
	Receive a severance payment or change-of-control payment?	<u>4a</u>		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations 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:			۱
а	The organization?	5a		X
þ	Any related organization?	<u>5b</u>		X
	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			
а	The organization?	6a		X
b	Any related organization?	6b		X_
	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	_		v
	not described in lines 5 and 6? If "Yes," describe in Part III	7	-	X
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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Pegulations section 53 4958-6(c)?	9	ı	I

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

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	8	0	0	0.	0	0	0.	0
1 ANNE MARIE HOWARD	3	206,606.	0	0.	0	9,485.	216,091.	
	Ξ.							
2	3 3							
3) (E							
	Ξ				_			
4								
Ľ	3 3							
	9							
9	Ξ							
	Ξ							
7	(E)							
	Ξ							
8	⊜							
	Ξ							
6	9							
	Ξ							
10	⊞							
	Ξ							
11	3							
	Ξ							
12	₿							
	Ξ							
13	9							
	Ξ							
14	∄							
	Ξ							
15	(3)							
	Ξ							
16	∄							
							Schedul	Schedule J (Form 990) 2011

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

HOUSING OPPORTUNITY FOUNDATION

Employer identification number 56-1609175

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CHARITABLE AND/OR EDUCATIONAL BASIS FOR AFFORDABLE HOUSING
OPPORTUNITIES IN AND AROUND THE CHARLOTTE, NC AREA.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
THE ANNUAL FAIR AND SHOWCASE IS HELD WITH THE INTENT OF INTRODUCING
REALTOR MEMBERS TO AFFORDABLE HOUSING OPTIONS / NEIGHBORHOODS, ALLOWING
FOR MEET & GREET OPPORTUNITIES WITH LOCAL LENDERS, AND PROVIDING
LEARNING INFORMATION ON DOWN-PAYMENT ASSISTANCE AND NETWORKING WITH
INDUSTRY LEADERS. THIS PROGRAM IS TARGETED TOWARDS REALTORS INVOLVED
IN THE WORKFORCE HOUSING CERTIFICATE PROGRAM AS WELL AS LOCAL HOUSING
PARTNERS; AND (3) WORKFORCE HOUSING FORUM: THE FORUM IS HELD IN JUNE
OF EVERY YEAR TO RECOGNIZE NATIONAL HOMEOWNERSHIP MONTH. IT SERVES TO
ALLOW REALTOR MEMBERS, HOUSING PARTNERS AND THE COMMUNITY AT-LARGE TO
HAVE SIGNIFICANT CONVERSATION ABOUT THE LOCAL HOUSING ISSUES AND
PROVIDES AN OPPORTUNITY TO IDENTIFY SOLUTIONS. IN ADDITION, THE
FOUNDATION USES THIS EVENT TO RECOGNIZE THE GRADUATES OF THE WORKFORCE
HOUSING CERTIFICATE PROGRAM.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
BEHALF OF ADULTS AND CHILDREN IN NEED.
FORM 990, PART VI, SECTION A, LINE 7A: THE FOUNDATION AND THE CHARLOTTE
REGIONAL REALTOR(R) ASSOCIATION SHARE THE SAME BOARD OF DIRECTORS. THE
ASSOCIATION'S BOARD IS ELECTED BY ITS MEMBERS.

O-b	
Schedule O (Form 990 or 990-EZ) (2011) Name of the organization HOUSING OPPORTUNITY FOUNDATION	Page 2 Employer identification number 56-1609175
FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PO	STED TO AN
INTERNAL WEBSITE FOR THE BOARD TO REVIEW PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C: COMPLIANCE WITH T	HE CONFLICT OF
INTEREST POLICY IS REVIEWED AT THE BOARD MEETING ON AN AN	NUAL BASIS.
LEADERS WITH ACTUAL OR POTENTIAL CONFLICTS OF INTEREST MU	ST IMMEDIATELY
DISCLOSE ALL FACTS MATERIAL TO THE ACTUAL OR POTENTIAL CO	NFLICT OF INTEREST
AT THE OUTSET OF ANY DISCUSSIONS BY THE FOUNDATION PERTAI	NING TO THE
BUSINESS. THE LEADER SHALL IMMEDIATELY REFRAIN FROM ANY	ACTION THAT MAY
AFFECT THE FOUNDATION'S DECISION TO PARTICIPATE WITH THE	BUSINESS. SUCH
LEADERS SHALL BE EXCUSED FROM SUCH DISCUSSIONS UNLESS OTH	ERWISE REQUESTED
BY THE BOARD OF DIRECTORS AND SHALL RESPOND TO ALL QUESTI	ONS ASKED OF THEM.
THEY SHALL NOT VOTE, PARTICIPATE IN OR BE PERMITTED TO HE	AR THE DISCUSSION
OF THE MATTER EXCEPT TO DISCLOSE ALL FACTS AND RESPOND TO	QUESTIONS.
FORM 990, PART VI, SECTION B, LINE 15A: THE FOUNDATION HA	S NO EMPLOYEES BUT
INSTEAD PAYS THE CHARLOTTE REGIONAL REALTOR (R) ASSOCIATI	ON A MANAGEMENT
FEE WHICH IS TO APPROXIMATE THE ARMS-LENGTH FAIR MARKET V	ALUE OF THE
SERVICES PROVIDED BASED ON THE AGREEMENT BETWEEN THE TWO	PARTIES. THUS THE
CEO IS COMPENSATED BY THE ASSOCIATION AND SUBJECT TO ITS	COMPENSATION
POLICIES.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S	
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STA	TEMENTS ARE
AVAILABLE TO THE PUBLIC UPON REQUEST.	

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS: 1322 12 01-23-12

<u>-22,891.</u>

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization HOUSING OPPORTUNITY FOUNDATION	Employer identification number 56-1609175
•	
FORM 990, PART XII, LINE 2C	·
THE AUDIT, BUDGET & FINANCE COMMITTEE IS CHARGED WITH OVE	ERSIGHT OF THE
ANNUAL EXTERNAL AUDIT AND SELECTION OF THE INDEPENDENT AU	JDITORS. THE
	NG THE CURRENT
TREASURER WHO SERVES AS THE COMMITTEE CHAIR.	
THE CONTENT WILL BUILTING CONTENTS	
•	
	-

Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990.

OMB No 1545-0047

HOUSING OPPORTUNITY FOUNDATION

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

Part

Employer identification number 56-16091752011 Open to Public Inspection

(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
		-				
Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	itions (Complete if the organization a	nswered "Yes" to Form 990,	Part IV, line 34 beca	ause it had one o	more related tax-exem	pt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(bX13) controlled entity?
CHARLOTTE REGIONAL REALTOR(R) ASSOCIATION - 56-0174058, 1201 GREENWOOD CLIFF, SUITE 200, CHARLOTTE, NC 28204	REALTOR ASSOCIATION	NORTH CAROLINA	501(C)(6)	N/A	N/A	
		-				
					;	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	is for Form 990.	-			Schedule R (I	Schedule R (Form 990) 2011

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

Schedule R (Form 990) 2011

Part III

Page 2

56-1609175

General or Percentage managing ownership pariner? Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related 3 9 Code V-UBI amount in box 120 of Schedule – K-1 (Form 1065) Ξ ate allocations? Disproportion-Yes No Ξ Share of end-of-year assets 9 Share of total income $\boldsymbol{\varepsilon}$ Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** (d)
| Direct controlling entity (c)
Legal
domicile
(state or
foreign
country) Primary activity Name, address, and EIN of related organization Part IV

organizations treated as a corporation or trust during the tax year)	/ear)						
(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	tegal domicile Direct controlling Type of entity (State or entity foreign or factor)	(e) Type of entity (C corp, S corp,	(f) Share of total income	(g) Share of end-of-year	(h) Percentage ownership
CAROLINA MULTIPLE LISTING SERVICES INC 56-1731051		country)	CHARLOTTE	(issue to			
1 [MULTIPLE LISTING		REGIONAL				
	SERVICE	NC	REALTOR(R)	C CORP	0.	0	\$00°

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2011

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Yes

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Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36) Part V

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? Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

- a Receipt of (i) interest (ii) annuities (iii) royalties or (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)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- i Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- Performance of services or membership or fundraising solicitations by related organization(s)
- Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)

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- r Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	ns line, including covered r	elationships and transaction thresholds
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) CHARLOTTE REGIONAL REALTOR(R) ASSOCIATION	υ	79,950.	
(2) CAROLINA MULTIPLE LISTING SERVICES, INC	U	109,145.	
(3) CHARLOTTE REGIONAL REALTOR(R) ASSOCIATION	0	175,687.	
(4)			
(9)			
(9)			

Schedule R (Form 990) 2011

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Page 4

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

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

(k) centage nership) 2011
Perc					990
(j) General or managing partner? Yes No		 			Forn
Ye Bar	:	 		 	le R
(h) (i) (i) (j) (k) Dispropor- Bronding amount in box 20 managing ownership of Schedule K-1 partner? Ves No (Form 1065) ves No					Schedule R (Form 990) 2011
No Sport	 				
(h) Disproportionate allocations?					
(g) Share of end-of-year assets					
(f) Share of · total ıncome		:	-		
(e) Are all partners sec 501(c)(3) 0095? 4) Yes No					
yes of Yes	 			 	
(d) Predominant income paralleled, unrelated, excluded from tax under section 512-514) y					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

Part VII Supplemental Information	ATION	56-160	9175 Page 5
Complete this part to provide additional information for responses to question	is on Schedule R (see ii	nstructions)	
PART IV, IDENTIFICATION OF RELATED ORGANIZATION	ONS TAXABLE	AS CORP O	R TRUST:
NAME OF RELATED ORGANIZATION:			
CAROLINA MULTIPLE LISTING SERVICES, INC.			···
DIRECT CONTROLLING ENTITY: CHARLOTTE REGIONAL	REALTOR(R)	ASSOCIATION	ON
		 	
	 -		
		 	
		<u> </u>	·
			<u></u>
		1	
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Form 886	68 (Rev 1·2012)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	s box		► X
Note. Or	nly complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	led Form	8868.	
If you	are filing for an Automatic 3-Month Extension, comple					
Part I	Additional (Not Automatic) 3-Month E	xten <u>sio</u>	n of Time. Only file the orig	ginal (n	o copies i	needed).
	·		Enter filer's	identifyi	ng number, s	see instructions
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identificatio	n number (EIN) or
print	TOTAL CONTROL TOTAL			العقا	F.C. 1.C.	00175
File by the	HOUSING OPPORTUNITY FOUNDAT			X	56-16	
due date for filing your	Number, street, and room of suite no. If a P.O. box, s		tions.	Social se	ecunty number	er (SSN)
return See instructions	1201 GREENWOOD CLIFF, SUITE			لا		
	City, town or post office, state, and ZIP code. For a for CHARLOTTE, NC 28204	oreign add	aress, see instructions.			
	CHARLOTTE, NC 20204	·				
Enter the	Return code for the return that this application is for (file	a a conara	te application for each return)			0 1
Litter the	The turn code for the return that this application is for the	s a separa	tte application for each return)			الغالثا
Applicat	ion	Return	Application			Return
Is For		Code	Is For			Code
Form 990)	01				
Form 990-BL			Form 1041-A			08
Form 990-EZ			Form 4720			09
Form 990-PF			Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069			11
Form 990-T (trust other than above)			Form 8870			12
STOP! D	o not complete Part II if you were not already granted ANNE MARIE HOW		matic 3-month extension on a prev	iously file	ed Form 8868	3
• Th. b	ooks are in the care of 1201 GREENWOOD		F SUITE 200 - CHA	פד.טייים	F NC 1	28204
	hone No. \triangleright 704-940-3167	CHILI	FAX No. ►	КЦОТТ	E, NC 4	10204
•	organization does not have an office or place of business	s in the Un				▶ □
	is for a Group Return, enter the organization's four digit			f this is fo	r the whole a	roup, check this
box ▶	. If it is for part of the group, check this box	•	ach a list with the names and EINs of			
			BER 15, 2012.			
	r calendar year 2011 , or other tax year beginning		, and ending	9		
	he tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final ı	return	
	Change in accounting period					
	ate in detail why you need the extension					
	DDITIONAL TIME IS REQUIRED IN			NFORM	ATION F	REQUIRED
. <u>TC</u>	FILE A COMPLETE AND ACCURAT	re Re	rurn.			
0 161			AAb. A. A.A.A. A I	- [1	
	his application is for Form 990·BL, 990·PF, 990·T, 4720, on Prefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any	8a	\$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credite and estimated	- Oa	3	
	payments made. Include any prior year overpayment all	=				
	eviously with Form 8868.		2 orodic and any amount paid	8b	s	0.
	lance due. Subtract line 8b from line 8a. Include your pa	yment wit	h this form, if required, by using	1 3	<u> </u>	
	TPS (Electronic Federal Tax Payment System). See Instru	•	, , , , , , , , , , , , , , , , , ,	8c	\$	0.
			st be completed for Part II o	nly.		
Under pen	alties of perjury, I declare that I have examined this form, includ	ing accomp	panying schedules and statements, and to	the best o	f my knowledg	e and belief,
it is true, c	corrept, and complete, and that I am authorized to prepare this fo				0	> 1 >
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Form 8868 (Rev. 1-2012)