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Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

BUILD AND MAINTAIN HIGH-QUALITY, WELL-MANAGED, SERVICE ENHANCED AFFORDABLE HOUSING COMMUNITIES THAT MEET THE NEEDS OF LOWER INCOME FAMILIES, SENIORS AND PERSONS WITH DISABILITIES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 6,229,250 including grants of \$ 1,230,346) (Revenue \$ 8,671,208)

THE CORPORATION'S EXEMPT PURPOSE IS TO PROVIDE AFFORDABLE HOUSING TO LOW-INCOME FAMILIES EDEN HOUSING IDENTIFIES SITES, ACTS AS THE PRIMARY DEVELOPER OF HOUSING AND RECEIVES FEES AND REVENUES FOR ITS SERVICES DURING THE CURRENT YEAR, THE ORGANIZATION COMPLETED DEVELOPMENT AND/OR REHABILITATION OF SEVERAL AFFORDABLE APARTMENT COMPLEXES IN ITS EFFORTS TO INCREASE AND SUSTAIN AFFORDABLE HOUSING UNITS

4b

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

4c

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

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses ▶ 6,229,250

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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	No
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	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	49	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
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.	28	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	12	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	12	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
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	EDEN HOUSING INC 22645 GRAND STREET HAYWARD, CA (510) 582-1460

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATHLEEN HAMM TREASURER	40 3 60	X		X				0	0	0
(2) TIMOTHY REILLY DIRECTOR	40 3 60	X						0	0	0
(3) CALVIN WHITAKER DIRECTOR	40 3 60	X						0	0	0
(4) ILENE WEINREB DIRECTOR	40 3 60	X						0	0	0
(5) JESUS ARMAS VICE CHAIR	40 3 60	X		X				0	0	0
(6) HENRY DEADRICH DIRECTOR	40 3 60	X						0	0	0
(7) JOHN GAFFNEY CHAIR	40 3 60	X		X				0	0	0
(8) NICHOLAS J RANDALL DIRECTOR	40 3 60	X						0	0	0
(9) TIMOTHY SILVA DIRECTOR	40 3 60	X						0	0	0
(10) WILLIAM G VANDENBURGH DIRECTOR	40 3 60	X						0	0	0
(11) PAULINE WEAVER SECRETARY	40 3 60	X		X				0	0	0
(12) JIM KENNEDY DIRECTOR	40 3 60	X						0	0	0
(13) LINDA MANDOLINI PRESIDENT	35 00 30 30			X				228,547	0	18,032
(14) JAN PETERS VICE PRESIDENT/COO	10 00 44 80			X				199,631	0	16,930
(15) ANTHONY MA CFO	10 00 41 30			X				22,231	0	0
(16) ANDREA PAPANASTASSIOU DIRECTOR OF RE DEVELOPMENT	55 00 0 00					X		137,126	0	14,674
(17) WOODY KARP SR. PROJECT DEVELOPER	55 00 0 00					X		102,472	0	6,519

Part VII

[illegible]

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	796,907	0	62,632

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶5

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BDE ARCHITECTURE 9465 CALIFORNIA STREET STE 1200 SAN FRANCISCO CA 94104	ARCHITECT	536,071
LINDQUIST VON HUSEN & JOYCE LLP 90 NEW MONTGOMERY 11TH FLOOR SAN FRANCISCO CA 94105	AUDIT AND TAX SERVICE	148,350
MOSAIC DEVELOPMENT 1970 BROADWAY STE 250 OAKLAND CA 94612	DEVELOPMENT CONSULTANT	120,056

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►3

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	4,753,097			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	7,747,352			
	g	Noncash contributions included in lines 1a-1f \$		10,320,586			
	h	Total. Add lines 1a-1f		12,500,449			
Program Service Revenue	2a	DEVELOPMENT FEES	Business Code 531390	5,726,800	5,726,800		
	b	RENTAL INCOME	531110	1,345,293	1,345,293		
	c	MANAGEMENT FEES	531390	1,148,448	1,148,448		
	d	DEF GROUND LEASE	531390	409,383	409,383		
	e	MISCELLANEOUS	531390	41,284	41,284		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		8,671,208			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,561,937		1,561,937
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		Gross rents	(i) Real	(ii) Personal			
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss)				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss)		158,828		158,828
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b	Less direct expenses	b			
		c	Net income or (loss) from fundraising events . .				
9a		Gross income from gaming activities See Part IV, line 19	a				
		b	Less direct expenses	b			
		c	Net income or (loss) from gaming activities . .				
10a		Gross sales of inventory, less returns and allowances	a				
		b	Less cost of goods sold	b			
		c	Net income or (loss) from sales of inventory . .				
Miscellaneous Revenue		Business Code					
11a							
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
12	Total revenue. See Instructions			22,892,422	8,671,208	0	1,720,765

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	1,174,176	1,174,176		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	56,170	56,170		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	288,501	205,378	83,123	
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.	1,363,764	971,403	392,361	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	45,399	32,090	13,309	
9	Other employee benefits.	108,420	76,636	31,784	
10	Payroll taxes.	117,409	82,990	34,419	
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.				
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,100,899	891,711	209,188	
12	Advertising and promotion.				
13	Office expenses.				
14	Information technology.				
15	Royalties.				
16	Occupancy.	30,600	30,600		
17	Travel.	44,317	44,317		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.				
20	Interest.	111,756	111,756		
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	659,319	659,319		
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):				
a	MORTGAGE INTEREST AND C	747,549	747,549		
b	NON-RECOVERABLE DEVELOP	705,561	705,561		
c	OFFICE AND MAINTENANCE	670,332	428,418	241,914	
d	WORKERS COMPENSATION	15,811	11,176	4,635	
e	All other expenses	3,656		3,656	
25	Total functional expenses. Add lines 1 through 24e.	7,243,639	6,229,250	1,014,389	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		7,108,548	1	7,299,697
	2	Savings and temporary cash investments		86,726	2	161,585
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		23,797,672	4	25,104,788
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other 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) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		20,982,271	7	29,668,455
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		256,355	9	164,715
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a26,968,738			
	b	Less accumulated depreciation	10b1,796,310	11,944,106	10c	25,172,428
	11	Investments—publicly traded securities		14,969,717	11	17,581,475
	12	Investments—other securities See Part IV, line 11		257,601	12	447,603
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		9,039,823	15	8,263,256
	16	Total assets. Add lines 1 through 15 (must equal line 34)		88,442,819	16	113,864,002
Liabilities	17	Accounts payable and accrued expenses		533,468	17	753,066
	18	Grants payable			18	
	19	Deferred revenue		84,844	19	97,684
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties		19,103,245	23	30,927,838
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		5,115,883	25	2,958,760
	26	Total liabilities. Add lines 17 through 25		24,837,440	26	34,737,348
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		63,605,379	27	79,126,654
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		63,605,379	33	79,126,654
	34	Total liabilities and net assets/fund balances		88,442,819	34	113,864,002

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,892,422
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,243,639
3	Revenue less expenses Subtract line 2 from line 1	3	15,648,783
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	63,605,379
5	Net unrealized gains (losses) on investments	5	-127,508
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	79,126,654

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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

2012

Open to Public Inspection

Name of the organization EDEN HOUSING INC	Employer identification number 23-1716750
--	--

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)
- | | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	1,438,990	2,094,623	13,621,067	3,316,468	12,500,449	32,971,597
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,438,990	2,094,623	13,621,067	3,316,468	12,500,449	32,971,597
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						32,971,597

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	1,438,990	2,094,623	13,621,067	3,316,468	12,500,449	32,971,597
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	442,563	439,375	1,143,001	1,485,771	1,561,937	5,072,647
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						38,044,244
12 Gross receipts from related activities, etc (see instructions)					12	34,142,230
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	86 670 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	72 860 %
16a 33 1/3% support test—2012. 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—2011. 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—2012. 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—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶		

Part IIIPart 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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
EDEN HOUSING INC

Employer identification number
23-1716750

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? ☐ Yes☐ No	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

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

	Held at the End of the 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 periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

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

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

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

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (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 XIII, 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 the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶\$ _____

b

Assets included in Form 990, Part X

▶\$ _____

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Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		7,773,570		7,773,570
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		19,195,168	1,796,310	17,398,858
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				25,172,428

Schedule D (Form 990) 2012

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	22,764,914
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-127,508
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-127,508
3	Subtract line 2e from line 1	3	22,892,422
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	22,892,422

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	7,243,639
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	7,243,639
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	7,243,639

Part XIII

Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	EDEN HOUSING INC AND AFFILIATES BELIEVE THAT THEY HAVE APPROPRIATE SUPPORT FOR TAX PROVISIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX PROVISIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. EDEN HOUSING INC AND AFFILIATES' FEDERAL AND STATE INCOME TAX AND INFORMATION RETURNS FOR THE YEARS 2009 THROUGH 2012 ARE SUBJECT TO EXAMINATION BY REGULATORY AGENCIES, GENERALLY FOR THREE YEARS AND FOUR YEARS AFTER THEY WERE FILED FOR FEDERAL AND STATE, RESPECTIVELY.

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

2012

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

■ Attach to Form 990

Employer identification number

23-1716750

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes

No

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

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

[illegible]

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **19**

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

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	31	56,170			

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 EDEN HOUSING INC'S GRANTS ARE GENERALLY TO RELATED ENTITIES THAT ARE CONTROLLED BY THE ORGANIZATION

Software ID:

Software Version:

EIN: 23-1716750

Name: EDEN HOUSING INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A STREET INC22645 GRAND STREET HAYWARD,CA 94541	94-3148163	501(C)(3)	18,647				PROJECT GRANTS
BAYWOOD APARTMENTS INC22645 GRAND STREET HAYWARD,CA 94541	94-3100917	501(C)(3)	5,256				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA PRESERVATION INC22645 GRAND STREET HAYWARD,CA 94541	94-3074042	501(C)(3)	9,521				PROJECT GRANTS
CATALONIA INC22645 GRAND STREET HAYWARD,CA 94541	94-3182019	501(C)(3)	38,727				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHYNOWETH COMMONS COMMERCIAL INC22645 GRAND STREET HAYWARD,CA 94541	94-3385134	501(C)(3)	35,000				PROJECT GRANTS
CHYNOWETH HOUSING INC22645 GRAND STREET HAYWARD,CA 94541	94-3314302	501(C)(3)	8,823				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORONA CRESCENT INC 22645 GRAND STREET HAYWARD,CA 94541	94-3174331	501(C)(3)	10,374				PROJECT GRANTS
CORONA ELY RANCH INC 22645 GRAND STREET HAYWARD,CA 94541	94-3166354	501(C)(3)	513,409				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDEN ALTENHEIM I LLC (WITH EDEN INVESTMENTS INC AS SOLE MEMBER) 22645 GRAND STREET HAYWARD,CA 94541	94-2995223	501(C)(3)	183,874				PROJECT GRANTS
EDEN DEVELOPMENT INC 22645 GRAND STREET HAYWARD,CA 94541	59-3803314	501(C)(3)	60,255				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDEN HOUSING MANAGEMENT INC22645 GRAND STREET HAYWARD,CA 94541	94-2946400	501(C)(3)	29,706				PROJECT GRANTS
EDEN INVESTMENTS INC 22645 GRAND STREET HAYWARD,CA 94541	94-2995223	501(C)(3)	57,283				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDEN PALMS INC22645 GRAND STREET HAYWARD,CA 94541	94-3208984	501(C)(3)	17,790				PROJECT GRANTS
ELLIS LAKE TOWNHOMES INC22645 GRAND STREET HAYWARD,CA 94541	94-3139366	501(C)(3)	7,163				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLEN BERRY INC22645 GRAND STREET HAYWARD,CA 94541	94-3166350	501(C)(3)	11,364				PROJECT GRANTS
RVC INVESTMENTS INC 22645 GRAND STREET HAYWARD,CA 94541	94-3103846	501(C)(3)	12,039				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPM AFFORDABLE HOUSING CORP22645 GRAND STREET HAYWARD,CA 94541	94-3297735	501(C)(3)	44,133				PROJECT GRANTS
STONEY INC22645 GRAND STREET HAYWARD,CA 94541	94-3144297	501(C)(3)	14,579				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA LANE HOUSING INC22645 GRAND STREET HAYWARD,CA 94541	94-3326393	501(C)(3)	9,770				PROJECT GRANTS
WASHINGTON CREEK INC 22645 GRAND STREET HAYWARD,CA 94541	94-3144296	501(C)(3)	28,649				PROJECT GRANTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA HOMELESS AND HOUSING COALITION ACTION FUND900 J STREET2ND FLOOR SACRAMENTO,CA 95814	68-0271073	501(C)(4)	10,000				SUPPORT AFFORDABLE HOUSING

Schedule J

(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
EDEN HOUSING INC

Employer identification number

23-1716750

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
	1b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all 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	Yes
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, but explain in Part III. ☐ Compensation committee ☒ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
	4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4a	No
		4b	No
		4c	No
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.	5a	No
		5b	No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III.	6a	No
		6b	No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
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	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)LINDA MANDOLINI PRESIDENT	(i)	228,547	0	0	10,541	7,491	246,579	0
	(ii)	0	0	0	0	0	0	0
(2)JAN PETERS VICE PRESIDENT/COO	(i)	199,631	0	0	9,439	7,491	216,561	0
	(ii)	0	0	0	0	0	0	0
(3)ANDREA PAPANASTASSIOU DIRECTOR OF RE DEVELOPMENT	(i)	137,126	0	0	7,183	7,491	151,800	0
	(ii)	0	0	0	0	0	0	0

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
EDEN HOUSING INC

Employer identification number
23-1716750

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
ASSIGNMENT OF RIGHTS ON NOTES				
25 Other ► (RECEIVABLE)	X	6	10,320,586	LOAN BALANCE
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2012**Open to Public
Inspection**Name of the organization
EDEN HOUSING INC**Employer identification number**

23-1716750

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	
	FORM 990, PART VI, SECTION B, LINE 12C	EACH BOARD MEMBER IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE QUESTIONNAIRE ANNUALLY IF A BOARD MEMBER HAS ANY CONFLICT OF INTEREST, THE BOARD MEMBER WOULD NEED TO RECUSE HIMSELF FROM ANY DECISIONS REGARDING A CONFLICT AREA
	FORM 990, PART VI, SECTION B, LINE 15	INDEPENDENT COMPENSATION CONSULTANT, COMPENSATION SURVEY OR STUDY, AND FORM 990 OF OTHER ORGANIZATIONS WERE USED TO ESTABLISH THE COMPENSATION OF ORGANIZATION'S CEO/CFO, OFFICERS AND KEY EMPLOYEES BOARD OR COMPENSATION COMMITTEE'S APPROVAL IS ALSO REQUIRED
	FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS AVAILABLE UPON REQUEST
OTHER FEES	FORM 990, PART IX, LINE 11G	PROFESSIONAL SERVICES PROGRAM SERVICE EXPENSES 891,711 MANAGEMENT AND GENERAL EXPENSES 209,188 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 1,100,899
	FORM 990, PART XII, LINE 2C	NO CHANGES IN THE PROCESS FROM THE PRIOR YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
EDEN HOUSING INC

Employer identification number
23-1716750

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)					
(a) Name, address, and EIN (if applicable) 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
See Additional Data Table					

Part II 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.)							
(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	(g) Section 512(b)(13) controlled entity?	
						Yes	No
See Additional Data Table							

Part III

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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
See Additional Data Table												

Part IV

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 organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) CHYNOWETH COMMONS COMMERCIAL INC 22645 GRAND ST HAYWARD, CA 94541 94-3385134	MANAGES COMMERCIAL SPACE	CA	EDEN HOUSING INC	C				Yes	
(2) LIGHT TREE HOUSING CORPORATION 22645 GRAND ST HAYWARD, CA 94541 94-3322099	PROVIDE AFFORDABLE LOW-INCOME HOUSING	CA	EDEN HOUSING INC	C				Yes	

Part V

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties 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)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

Yes

No

1a

No

1b

Yes

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

Yes

1k

No

1l

No

1m

No

1n

Yes

1o

Yes

1p

No

1q

No

1r

No

1s

No

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

Schedule R (Form 990) 2012

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.

[illegible]

Software ID:

Software Version:

EIN: 23-1716750

Name: EDEN HOUSING INC

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
RELATED ORGANIZATIONS TAXABLE AS A CORPORATION	SCHEDULE R PART IV	CHYNOWETH COMMONS COMMERCIAL INC AND LIGHT TREE HOUSING CORPORATION ARE ALL ORGANIZED UNDER CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION LAW THERE ARE NO SHAREHOLDERS IN THESE CORPORATIONS THE AFFAIRS AND ACTIVITIES OF EACH CORPORATION ARE MANAGED BY ITS BOARD OF DIRECTORS WHO ARE ALSO DIRECTORS OF EDEN HOUSING, INC

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(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
ANTIOCH EDEN RIVERTOWN LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
BRENTWOOD SENIOR LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
CHARLOTTE DRIVE APARTMENTS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
DOWNTOWN RIVER LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
DUBLIN SENIOR LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN 819 NORTH RENGSTORFF STUDIOS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN ALTENHEIM I LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN ARROYO VISTA LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN BAYWOOD APARTMENTS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN BROOKWOOD LLC 22645 GRAND ST HAYWARD, CA 94541	CO-MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN CRIL LLC 22645 GRAND ST HAYWARD, CA 94541 46-1524624	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN DEL NIDO LLC 22645 GRAND ST HAYWARD, CA 94541 45-5492079	PROVIDE AFFORDABLE LOW INCOME HOUSING	DE	1,140,759	17,746,605	EDEN HOUSING INC
EDEN DOUGHERTY LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN EASTBLUFF LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN LAS PALMAS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN LODGE LLC 22645 GRAND ST HAYWARD, CA 94541 27-4034872	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN ORVIETO LLC 22645 GRAND ST HAYWARD, CA 94541	CO-MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN SERENO LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN SURF LLC 22645 GRAND ST HAYWARD, CA 94541 45-4018980	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
EDEN SYCAMORE LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(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
EDEN WINDSCAPE LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
GLEN BERRY LLC 22645 GRAND ST HAYWARD, CA 94541 45-5102306	PROVIDE AFFORDABLE LOW INCOME HOUSING	CA			EDEN INVESTMENTS INC
GLEN EDEN LLC 22645 GRAND ST HAYWARD, CA 94541 54-5102346	PROVIDE AFFORDABLE LOW INCOME HOUSING	CA			EDEN INVESTMENTS INC
GRAND C LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
HEALDSBURG FAMILY LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
IRWIN WAY LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN DEVELOPMENT INC
EDEN FORD ROAD FAMILY LLC 22645 GRAND ST HAYWARD, CA 94541 90-0749593	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
LEIDIG COURT LLC 22645 GRAND ST HAYWARD, CA 94541 45-3274365	PROVIDE AFFORDABLE LOW INCOME HOUSING	CA			EDEN INVESTMENTS INC
MONTGOMERY PLAZA LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN DEVELOPMENT INC
PERALTA SENIORS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN DEVELOPMENT INC
SAKLAN AVENUE LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
SARA CONNER LLC 22645 GRAND ST HAYWARD, CA 94541 77-0654104	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
TENNYSON GARDENS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC
VILLA SPRINGS LLC 22645 GRAND ST HAYWARD, CA 94541	MANAGING GP OF PARTNERSHIP	CA			EDEN INVESTMENTS INC

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
819 NORTH RENGSTORFF STUDIO APARTMENTS LP 22645 GRAND ST HAYWARD, CA 94541 46-2929523	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN 819 NORTH RENGSTORFF STUDIOS LLC	RELATED				No			No	
ANTIOCH EDEN RIVERTOWN LP 22645 GRAND ST HAYWARD, CA 94541 68-0632311	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	ANTIOCH EDEN RIVERTOWN LLC	RELATED				No			No	
ASHLAND VILLAGE APARTMENTS LP 22645 GRAND ST HAYWARD, CA 94541 26-2203610	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
B GRAND LP 22645 GRAND ST HAYWARD, CA 94541 45-5177304	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN DEVELOPMENT INC	RELATED	-8	-8		No			No	1 000 %
BERRY AVENUE ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3166352	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	GLEN BERRY INC	RELATED				No			No	
BRENTWOOD SENIOR COMMONS LP 22645 GRAND ST HAYWARD, CA 94541 71-0987758	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	BRENTWOOD SR LLC	RELATED				No			No	
BROOKWOOD TERRACE FAMILY APARTMENTS LP 22645 GRAND ST HAYWARD, CA 94541 26-4491862	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN BROOKWOOD LLC ROEM BROOKWOOD FAMILY TERRACE LLC CO-MGPS	RELATED				No			No	
CGA ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3174520	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED	-16,085	3,108,115		No			No	98 990 %
CATALONIA ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3191094	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN DEVELOPMENT INC	RELATED				No			No	
CHARLOTTE DRIVE APARTMENTS LLC 22645 GRAND ST HAYWARD, CA 94541 94-2995223	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
CHESLEY AVENUE LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 57-1176147	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	CHESLEY AVE LLC	RELATED				No			No	
CHESLEY AVENUE LLC 22645 GRAND ST HAYWARD, CA 94541 01-0838609	MANAGING GP OF PARTNERSHIP	CA	EDEN HOUSING INC	RELATED	11,505	95,711		No		Yes		50 000 %
CHYNOWETH HOUSING ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3314303	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	CHYNOWETH HOUSING INC	RELATED				No			No	
CORONA-ELY RANCH ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3166355	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	CORONA-ELY RANCH INC	RELATED				No			No	
DOWNTOWN RIVER ASSOCIATES LP 22645 GRAND ST HAYWARD, CA 94541 48-1292072	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	DOWNTOWN RIVER LLC	RELATED				No			No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
DUBLIN SENIOR LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 77-0617949	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	DUBLIN SENIOR LLC	RELATED				No			No	
EAST BLUFF ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 68-0396181	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN EASTBLUFF LLC	RELATED				No			No	
EDEN ARROYO VISTA ASSOCIATES LP 22645 GRAND ST HAYWARD, CA 94541 27-3546015	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN ARROYO VISTA LLC	RELATED				No			No	
EDEN BAYWOOD APARTMENTS LP 22645 GRAND ST HAYWARD, CA 94541 30-0324752	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN BAYWOOD LLC	RELATED				No			No	
EDEN DOUGHERTY LP 22645 GRAND ST HAYWARD, CA 94541 27-1801458	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN DOUGHERTY LLC	RELATED				No			No	
EDEN LODGE LP 22645 GRAND ST HAYWARD, CA 94541 27-3454190	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN LODGE LLC	RELATED				No			No	
EDEN PALMS ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3208982	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN PALMS INC	RELATED				No			No	
EDEN RIVERTOWN LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 94-3362651	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
EDEN SOUTH HAYWARD LP 22645 GRAND ST HAYWARD, CA 94541 46-2444399	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
EDEN SURF ASSOCIATES LP 22645 GRAND ST HAYWARD, CA 94541 45-3483479	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN SURF LLC	RELATED				No			No	
EDEN SYCAMORE LP 22645 GRAND ST HAYWARD, CA 94541 34-2003989	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN SYCAMORE LLC	RELATED				No			No	
EDEN VICTORIA LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 47-0867697	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
EDEN WOODSIDE COURT LP 22645 GRAND ST HAYWARD, CA 94541 46-2851527	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
EHP EC MAGNOLIA LP 22645 GRAND ST HAYWARD, CA 94541 46-1487548	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN CRIL LLC	RELATED				No			No	
EHP ISSEI TERRACE LP 22645 GRAND ST HAYWARD, CA 94541 46-0689478	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproporionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
EHP FULLER LODGE LP 22645 GRAND ST HAYWARD, CA 94541 45-5475786	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	1 000 %
EHP OLIVE TREE PLAZA LP 22645 GRAND ST HAYWARD, CA 94541 46-1499634	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN CRIL LLC	RELATED				No			No	
EHP REDWOOD LODGE 22645 GRAND ST HAYWARD, CA 94541 46-1481526	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN CRIL LLC	RELATED				No			No	
EHP SEQUOIA MANOR LP 22645 GRAND ST HAYWARD, CA 94541 45-5481596	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	1 000 %
ESTABROOK SENIOR HOUSING LP 22645 GRAND ST HAYWARD, CA 94541 68-0657314	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN DEVELOPMENT INC	RELATED				No			No	
FIRESIDE AFFORDABLE HOUSING 22645 GRAND ST HAYWARD, CA 94541 54-2131633	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
FORD ROAD FAMILY HOUSING LP 22645 GRAND ST HAYWARD, CA 94541 45-4586546	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN FORD FAMILY LLC	RELATED				No			No	1 000 %
GLEN EDEN ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3200524	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	A STREET INC	RELATED				No			No	
GRAND C LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 14-1979640	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	GRAND C LLC	RELATED				No			No	
HARRIS COURT ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3306837	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	ELLIS LAKE TOWNHOMES INC	RELATED				No			No	
HEALDSBURG FAMILY LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 26-2621118	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	HEALDSBURG FAMILY LLC	RELATED				No			No	
HILLVIEW GLEN LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 77-0345387	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN DEVELOPMENT INC	RELATED				No			No	
HISTORIC ALTENHEIM PARTNERS 22645 GRAND ST HAYWARD, CA 94541 71-0988012	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	EDEN ALTENHEIM LLC	RELATED				No			No	
HUNTWOOD COMMONS ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3138438	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	BAYWOOD APARTMENTS INC	RELATED		71,625		No			No	1 000 %
IRWIN WAY LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 45-5530504	OWN AND MANAGE AFFORDABLE LOW- INCOME APARTMENTS COMPLEX	CA	IRWIN WAY LLC	RELATED				No			No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Dispropportionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
JOSEPHINE LUM LODGE LP 22645 GRAND ST HAYWARD, CA 94541 05-0608727	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	CALIFORNIA PRESERVATION INC	RELATED				No			No	
LAFAYETTE SENIOR LP 22645 GRAND ST HAYWARD, CA 94541 27-0395689	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENT INC	RELATED				No			No	
LAS PALMAS DEVELOPMENT PARTNERS 22645 GRAND ST HAYWARD, CA 94541 94-3346633	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN LAS PALMAS LLC	RELATED				No			No	
LIGHT TREE HOUSING PARTNERS 22645 GRAND ST HAYWARD, CA 94541 94-3322121	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	LIGHT TREE HOUSING CORP	RELATED				No			No	
LIGHT TREE LAND LLC 22645 GRAND ST HAYWARD, CA 94541 94-3346132	OWN AND LEASE LAND FOR AFFORDABLE HOUSING	CA	EDEN HOUSING INC	RELATED	-1,674	1,332,366		No		Yes		60 000 %
LIVERMORE HOUSING ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3290814	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	BAYWOOD APARTMENTS INC	RELATED				No			No	
MONTGOMERY PLAZA LP 22645 GRAND ST HAYWARD, CA 94541 46-1961571	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	MONTGOMERY PLAZA LLC	RELATED				No			No	
NEW ALTENHEIM PARTNERS LP 22645 GRAND ST HAYWARD, CA 94541 34-2055561	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
NUGENT SQUARE LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 51-0461381	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	NUGENT SQUARE LLC	RELATED				No			No	
NUGENT SQUARE LLC 22645 GRAND ST HAYWARD, CA 94541 16-1724089	MANAGING GP OF PARTNERSHIP	CA	EDEN HOUSING INC	RELATED	19,847	20,675		No		Yes		50 000 %
ORVIETO FAMILY APARTMENTS LP 22645 GRAND ST HAYWARD, CA 94541 26-3878355	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN ORVIETTO LLCROEM ORVIETTO FAMILY LLC	RELATED				No			No	
PALO ALTO FAMILY LP 22645 GRAND ST HAYWARD, CA 94541 26-3061581	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
PARKSIDE GLEN LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 33-0736251	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	CORONA CRESCENT INC	RELATED				No			No	
PERALTA SENIORS LP 22645 GRAND ST HAYWARD, CA 94541 26-4541856	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN DEVELOPMENT INC	RELATED				No			No	
RESEDA BOULEVARD ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 68-0351290	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN WINDSCAPE LLC	RELATED				No			No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount on Box 20 of K-1	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
RIDGEVIEW COMMONS ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3103847	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	RVC INVESTMENT INC	RELATED				No			No	
RIVERHOUSE ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 77-0284021	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	ELLIS LAKE TOWNHOMES INC	RELATED				No			No	
SAKLAN AVENUE LP 22645 GRAND ST HAYWARD, CA 94541 42-1714673	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	SAKLAN AVENUE LLC	RELATED				No			No	
SARA CONNER COURT LP 22645 GRAND ST HAYWARD, CA 94541 77-0654106	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	SARA CONNER LLC	RELATED				No			No	
SERENO VILLAGE ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3399898	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN SERENO LLC	RELATED				No			No	
SPM HOUSING ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3262417	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	SPM AFFORDABLE HOUSING CORPORATION	RELATED				No			No	
STONEY CREEK ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3144293	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	STONEY CREEK INC	RELATED				No			No	
TENNYSON PRESERVATION LIMITED PSHP 22645 GRAND ST HAYWARD, CA 94541 94-3395860	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	TENNYSON GARDENS LLC	RELATED				No			No	
UNION COURT LIMITED PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 94-3373628	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN DEVELOPMENT INC	RELATED				No			No	
VILLA SPRINGS APARTMENT LP 22645 GRAND ST HAYWARD, CA 94541 65-1312439	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	VILLA SPRINGS LLC	RELATED				No			No	
VIRGINIA LANE LTD PARTNERSHIP 22645 GRAND ST HAYWARD, CA 94541 94-3326392	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	VIRGINIA LANE HOUSING INC	RELATED				No			No	
WARNER CREEK SENIOR HOUSING LP 22645 GRAND ST HAYWARD, CA 94541 26-4814941	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	EDEN INVESTMENTS INC	RELATED				No			No	
WASHINGTON CREEK ASSOCIATES 22645 GRAND ST HAYWARD, CA 94541 94-3144294	OWN AND MANAGE AFFORDABLE LOW-INCOME APARTMENTS COMPLEX	CA	WASHINGTON CREEK INC	RELATED				No			No	

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

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
EDEN ISSEI HOUSING INC	C	2,428,484	
EDEN HOUSING MANAGEMENT INC	C	654,824	
REDWOOD LODGE INC	C	1,613,777	
SYCAMORE SQUARE HOUSING CORPORATION	C	144,853	
EDEN HOUSING RESIDENT SERVICES INC	C	146,112	
SEQUOIA MANOR INC	C	2,193,529	
EDEN ISSEI HOUSING INC	C	954,901	
CORONA ELY RANCH INC	B	513,409	
EDEN DEVELOPMENT INC	B	60,255	
EDEN INVESTMENTS INC	B	241,157	