

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

OMB No 1545-0047 2013

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

Do not enter Social Security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury

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<u>A</u>	For the	2013 calen	dar year, or tax y	ear begin	ning		, 20	13, and	endin	ıg			1				
В	Check if a	pplicable	C Name of organiza	tion Refor	med Charch	of Highlar	nd Paik Af	forcapi	e Hous	sing Corp	D Emplo	yer ide	ntification Number				
	Addr	ress change	Doing Business A	5							20-	501	2410				
	Nam	ne change	Number and street	it (or PO box	if mail is not deliv	ered to street a	address)		Room/	suite	E Teleph	เอกอ กนเ	mber				
	In.tia	al return	19-21 Sout	h Seco	nd Avenu	е					(73	2)	249-7349				
	Tem	ninated	City or town, state	or province, o	country, and ZIP o	r foreign posta	l coce			·							
	Ame	endea return	Highland P	ark			N	J 08	904		G Gross	recolpts	\$ 629,442.				
	\vdash	lication pending	F Name and address		officer					H(a) is this							
			Seth Kaper-Dale	10-21 500-	n Senona Luerm	a Hambla	nd Park	ил па	904	H(p) Vie all	subordina'es	s Include					
	Tay-ov	kempl slatus	X 501(c)(3)	501(c) (sert no)	4947(a)(1)		527	If 'No '	attach a list.	(see ins	structions)				
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K		of organization.	X Corporation	Trust	Association	Other -		L Year of	formati	on 200	p IM	State of	f legal domicilo NJ				
Pa	rt I	Summar				<u> </u>											
	1 B	Briefly describ	e the organization	n's mission	or most sign	iticant activ	ities.	To_pro	vide :	cermanent	nousing	<u>g_to</u> 9	<pre>guallfied_individuals_</pre>				
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æ	11 0	Ther revenue	Part VIII colum	n (Δ) lings	5 6d 8c 9c	inc and	110\ \0	?/	//<		· · · = · · · · · · · · · · · · · · · ·						
	12 T	fotal revenue	- add lines 8 thr	ານ (ຕ), ແນວຈ ດນຸດh 11 <i>(</i> ກ	nust equal Pa	rt VIII. colu	mn (A) luke	a 121 ($\mathcal{S}(\mathcal{O})$	/			(20 442				
	13 0	Grants and si	come (Part VIII, co e (Part VIII, colum — add lines 8 thr milar amounts pai to or for members	d (Pad IX	column (A) li	nec 1-3\	11111 (///), 11114	\ \ \ \ \ \	2 -/-	-			629,442.				
	14 B	Sonafite nord	to or for members	(Part IV a	column (A) lin	nosti				•		-	 				
	l .	•		•		•				•							
es	1		r compensation, e										155,795.				
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ш	17 C	Other expens	es (Part IX, colum	ın (A), lines	11a-11d, 11	f-24e) .							436,047.				
	18 T	otal expense	s Add lines 13-1	7 (must eq	ual Part IX, co	olumn (A), I	line 25) .						591,842.				
_	19 F	Revenue less	expenses Subtra	act line 18	from line 12					. 🖯			37,600.				
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45	21 T	otal habilities	(Part X, line 26)								,018,0						
5.5	22 N	let assets or	fund balances, Si	ibtract line	21 from line	20											
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	y the IRS discuss this return with the preparer shown above? (see instructions)																
BA	A For P	aperwork R	eduction Act No	tice, see ti	ne separate i	nstruction	s.		TEE	EA0101 11/0			Form 990 (2013)				

TEEA0101 11/08/13

Form 990 (2013)

	990 (2				land Park Affor		Corp		20-50	12410	Page 2
Par	<u>t III </u>	,		_	ice Accomplis						
					onse or note to an	y line in this Part I	<u> </u>		• • • • •		
1			e the organization								
	I oT	provic	<u>de permane</u>	nt housi	ng to gual:	<u> fied indiv</u>	<u>iduals</u>				
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	Did the	e organiz	zation undertake	any significa	nt program service	es during the year	which were not I	isted on the n	rior		
_										. Yes	X No
			e these new se							□	<u></u>
3	Did the	e organiz	zation cease cor	nducting, or m	ake significant cha	anges in how it cor	nducts, any prog	ram services?	7	. Yes	X No
			e these change								
4	Descri	ibe the o	rganization's pro	ogram service	accomplishments	for each of its thre	ee largest progra	ım services, a	s measure	ed by expense	es.
	Section	on 501(c) s, the tota	(3) and 501(c)(4 al expenses, and	i) organization I revenue, if a	ns and section 494 iny, for each progra	/(a)(1) trusts are i am service reporte	required to repored	t the amount	of grants a	ind allocation	s to
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4 a	(Code)) (Expense	es \$	505,213. inc	cluding grants of	\$	0.)(R	evenue	\$ 45	4.442.)
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Pant V Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Х 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 Х Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III 5 Х 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, 6 Х Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х 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 Х Х 10 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 Х 11 a Х 11 b Х 11 c Х 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.... 11 e 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 . . 11 f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х Schedule D, Parts XI, and XII. 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and Х If the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12 b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV . . . 15 Х 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, Х column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 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. Х 19 Х 20 b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 b

Part IV | Checklist of Required Schedules (continued)

			Yes	No
			162	NO
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
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		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No. 'go to line 25a	240		x
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
		240		
	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		
C	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
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? If 'Yes,' complete Schedule L, Part III	27		х
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)			;
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
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? If 'Yes,' complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
		32		<u> </u>
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? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	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)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
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? If 'Yes,' complete Schedule R, Part VI	37		х
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	Х	

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Form 990 (2013)

	n 990 (2013) Reformed Church of Highland Park Affordable Housing Corp 20-5012410)	۲	age :
<u>Pa</u>	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c	X	
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2 a 7			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b	i	
	· · · · · · · · · · · · · · · · · · ·			
	a 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)?	4 a		Х
	b If 'Yes,' enter the name of the foreign country		i '	
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	ļ	X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	<u>5 c</u>	L	
6	a 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?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		<u> </u>
	,	, D		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	l	Х
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	 	X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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?	 8		
9	Sponsoring organizations maintaining donor advised funds.			
_	a Did the organization make any taxable distributions under section 4966?	9 a		<u> </u>
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter		<u> </u>	
	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
	Section 501(c)(12) organizations. Enter			
	a Gross income from members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		<u> </u>
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			1
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13 a	ļ	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	c Enter the amount of reserves on hand		l	

14 a

14b

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

Form 990 (2013) Reformed Church of Highland Park Affordable Housing Corp 20-5012410 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year \dots 1 a 15 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. **b** Enter the number of voting members included in line 1a, above, who are independent 15 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х 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 X Did the organization make any significant changes to its governing documents 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х 8 b Х Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Х 10 a Did the organization have local chapters, branches, or affiliates? b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?.............. 10 b 11 a Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х 12 c Х 13 Х 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х 15b Х 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 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16 h Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > New Jersey Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Other (explain in Schedule O) Upon request Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization

19-21 South Second Avenue Highland Park NJ

Form 990 (2013)	Reformed	Church	٥f	Highland	Park	Affordable	Housing	Corn
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20-5012410

Page 7

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

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

			_	(()					
(A) Name and Title	(B) Average hours per week (list	one bo	ox, uni cer an	ess p	erson	more the	an)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Alec Stoll	2.00									
VP		Х		Χ				0.	0.	0.
(2) Jean Stockdale	0.50									······································
Trustee		Х						0.	0.	0.
(3) Donald Roberts	2.00									
Treasurer		Х		Х				0.	0.	0.
_(4)_John_Rametta	0.50	}								
Trustee		X						0.	0.	0.
(5) Harry Pangamanen	0.50									
Trustee		Х						0.	0.	0.
_(6) Allan Lichtenstein	0.50									
Trustee	ļ	Х	Ш					0.	0.	0.
_(7)_Jess_Munger	0.50									
Trustee		Х						0.	0.	0.
(8) Pat Kaufman	0.50									
Trustee		X						0.	0.	0.
(9) Lola Kamp	0.50									
Trustee		Х						0.	0.	0.
(10) Jacquelyn Juricic	0.50									
Trustee	ļ <u>-</u>	X						0.	0.	0.
(11) Terrence Horyn	0.50									
Trustee		X						0.	0.	0.
(12) Janet Francis	0.50									
Trustee	ļ	Х	Щ					0.	0.	0.
(13) Charles Page	2.00									
Secretary		Χ	Щ	Х				0.	0.	0.
(14) Seth Kaper-Dale	5.00									
Executive Director	<u> </u>	Х		Х				0.	0.	0.

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Part VII Section A. Officers, Directors, Tru	Stees, (B)	Key	En		oye C)	es,	and	a Hignest Con	ipensated Emp	loyee	S (conti	inued)
(A) Name and title	Average hours per week (list any	off	, unle	ss pe nd a c	more rson i directo	than o s both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation		
	hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	org ar	from the ganization nd related ganization	ı
(15) Robert Roesner Chairman	7.00	X		х				0.	0.		·	0
(16)											-	
(17)												
(18)												
(19)									-			
[20]												
(21)					-				· · ·			
(22)												
[23]									•			
[24]												
(25)												
1 b Sub-total							۱ ۱	0.	0.			0
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							•	0.	0.			0
Total number of individuals (including but not limited from the organization							eive			npensa	ation	
											Yes	No
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such inc										. 3		X
For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the such individual.	ortable co an \$150,	ompe	nsat <i>If "</i> Y	tion : 'es' :	and com	other o <i>lete</i>	cor Sch	mpensation from nedule J for		. 4	- 	x
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	mpensat	on fr	om a	any i	unre	lated	org	anization or individ	lual		-	X
Section B. Independent Contractors												
Complete this table for your five highest compensate compensation from the organization. Report comper	ed indepensation fo	nden r the	t cor cale	ntrac nda	ctors r yea	that ar en	rece ding	eived more than \$1 with or within the	00,000 of organization's tax ye	ar.		_
(A) Name and business addre	ss							(B) Description o			(C) ensatio	n
Total number of independent contractors (including the state of state	out not lin ►	nited	to th	ose	liste	d ab	ove) who received mo	re than			
<u> </u>									1		000 (

Form 990 (2013) Reformed Church of Highland Park Affordable Housing Corp Page 9 20-5012410 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) (A) Total revenue Related or Unrelated Revenue exempt business excluded from tax function revenue under sections revenue 512-514 1 a Federated campaigns PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS 1 a 1 b **b** Membership dues c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) . . 1 e 198,822 f All other contributions, gifts, grants, and similar amounts not included above. 31,542 g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 230,364 **Business Code** 0 0 2a Rent 531110 345,915 345,915 24,764 0 0. b Development_fees____ 531110 24,764 28,399 0 531110 28,399 0. f All other program service revenue . . 399,078 Investment income (including dividends, interest and Income from investment of tax-exempt bond proceeds . . . (ı) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) . . d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory. **b** Less cost or other basis and sales expenses . . . c Gain or (loss) d Net gain or (loss). 8 a Gross income from fundraising events OTHER REVENUE

/not including C	ļ			í
(not including \$	ļ	i		í
of contributions reported on line 1c).				
See Part IV, line 18 a				
b Less: direct expenses b				
c Net income or (loss) from fundraising event	ts ▶		 	
9 a Gross income from gaming activities. See Part IV, line 19 a				

c Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns **b** Less. cost of goods sold b c Net income or (loss) from sales of inventory ▶

	Miscellaneous Revenue	Business Code	 	 	
	11a				
i	b				
į	с				-
	d All other revenue				
	e Total. Add lines 11a-11d				
	1		 	 	

629,442.

399,078.

b Less direct expenses

12 Total revenue. See instructions

b

Part IX | Statement of Functional Expenses

	not include amounts reported on lines 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	3	3,40,000
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16		1		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	116,490.	66,682.	49,808.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	23,572.	23,572.	0.	0.
10	Payroll taxes	15,733.	9,006.	6,727.	0.
11	Fees for services (non-employees)				
	Management	19,330.	19,330.	0.	0.
	Legal	1,871.	1,871.	0.	0.
	: Accounting	6,500.	0.	6,500.	0.
	Lobbying				
	Professional fundraising services See Part IV, line 17				
g	Investment management fees Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion				
13	Office expenses	2,500.	0.	2,500.	0.
14	Information technology				
15	Royalties		<u></u>		
16	Occupancy	21,094.	0.	21,094.	0.
17	Travel	1,265.	1,265.	0.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest	13,547.	13,547.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	196,367.	196,367.	0.	0.
23	Insurance	32,586.	32,586.	0.	0.
24	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				•
а	Repairs	42.241.	42,241.	0.	0.
	Supplies	11,411.	11.411.	0.	0.
	Property_taxes	17,406.	17,406.	0.	0.
d		4,823.	4,823.	0.	0.
е	All other expenses	65,106.	64,906.	200.	0.
25	Total functional expenses Add lines 1 through 24e	591,842.	505,013.	86,829.	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 or note to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	63,695.	1	39,041.
	2	Savings and temporary cash investments		2	<u>, , , , , , , , , , , , , , , , , , , </u>
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	25,695.	4	6,897.
	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	
AS	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T S	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10 b 702,552.	5,722,515.	10 c	6,471,656.
	11	Investments – publicly traded securities		11	<u> </u>
	12	Investments — other securities See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
1	14	Intangible assets	V	14	
	15	Other assets. See Part IV, line 11	54,230.	15	60,806.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,866,135.	16	6,578,400.
	17	Accounts payable and accrued expenses	18,420.	17	30,017.
	18	Grants payable		18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
AB	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
B L L	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	
1	23	Secured mortgages and notes payable to unrelated third parties	3,999,659.	23	4,662,727.
S	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		25	
	26	Total liabilities. Add lines 17 through 25	4,018,079.	26	4,692,744.
N E T		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete	i		
- 1		lines 27 through 29, and lines 33 and 34.			
ASSETS	27	Unrestricted net assets	1,848,056.	27	1,885,656.
Ę	28	Temporarily restricted net assets		28	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
OR R	29	Permanently restricted net assets		29	
- 1		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
FOZO	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ç	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALAZCES	33	Total net assets or fund balances	1,848,056.	33	1,885,656.
S	34	Total liabilities and net assets/fund balances	5,866,135.	34	6,578,400.
BA	Δ				Form 990 (2013)

Forn	990 (2013) Reformed Church of Highland Park Affordable Housing Corp 20-5	01241	. 0	Pa	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				$\cdot \square$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	62	29,4	42.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5 !	91,8	42.
3	Revenue less expenses. Subtract line 2 from line 1	3		37,6	00.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,8	48,0	56.
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,88	35,6	56.
Par	t XII Financial Statements and Reporting		•		
	Check if Schedule O contains a response or note to any line in this Part XII				. \square
	Official Control of Co			Yes	No
1	Accounting method used to prepare the Form 990:		_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2 a	Х	
	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'				
	X Separate basis Consolidated basis Both consolidated and separate basis				
t	Were the organization's financial statements audited by an independent accountant?		. 2 b		Х
	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				
C	: 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?		. 2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			2	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		. 3a		Х
ŧ	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit	tit			İ
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	. З Б		
BAA			Form	990 (2	2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047 2013

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

				Affordable Hou						12410			
Part	1	Reason for Publ	ic Charity Status	(All organizations r	nust co	mplet	e this p	art.) S	ee inst	ruction	S.		
he o	gar	ization is not a private	foundation because it	is (For lines 1 through 1	11, check	only or	ne box)			•			
1	П	A church, convention	of churches or associa	ition of churches describe	ed in sec	tion 17	0(b)(1)(A	λ)(i).					
2	П	A school described in	section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	М	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's											
4	Н	•	•	•		٠,,			1)(A)(iii)	Enter th	e 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				(b)(1)(A)(vi). (Complete I	Part II.)								
9		from activities related	to its exempt functions d unrelated business t	nore than 33-1/3% of its s s — subject to certain exc axable income (less sect aplete Part III)	eptions,	and (2)	no more	than 33	3-1/3% of	fits supp	ort from gro	SS	
10	П	An organization organ	zed and operated exc	clusively to test for public	safety S	See sec	tion 509	(a)(4).					
11		more publicly supporte	ed organizátions descr	clusively for the benefit of ribed in section 509(a)(1) in and complete lines 11e	or section	on 509(a							
		a ∏Type I b	Type II c	Type III — Functiona	ally integ	rated	c	ı 🗍 :	Type III -	- Non-fu	nctionally in	tegrate	ed
9		By checking this box, other than foundation section 509(a)(2)	certify that the organi managers and other th	ization is not controlled d nan one or more publicly	rectly or supporte	ındirect ed orgar	tly by one nizations	or moi describ	re disqua ed in sec	lified per tion 509	sons (a)(1) or		
f		If the organization recicheck this box	eived a written determ	ination from the IRS that	ıs a Typ	e I, Typ	e II or Ty	pe III su	pporting	organiza	ation,		. 🗌
g		Since August 17, 2006	6, has the organization	accepted any gift or co	ntributior	n from a	ny of the	followir	ng persor	ns?	1	Yes	No
		(i) A person who di	rectly or indirectly con	trols, either alone or toge orted organization?	ether with	n person	s descrit	oed in (i	i) and (iii)	11 g (i)	162	NO
		·		d in (i) above?							. 11 g (ii)	-	
		• •	•	scribed in (i) or (ii) above									
				supported organization(s)							11 g (ili)		
<u>h</u>		<u>-</u>		······································			I		T		6.88 A ·	-6	
		(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 column (I) listed in your governing document?		zation in of your	(vi) is organiza colum organize	ation in in (i) d in the	(vii) Amount sup		etary	
					Yes	No	Yes	No	Yes	No			
A)													
B)							1						
									1				
C)					į	ł							
~,					 		+		 				
D)				!									
٠,					 	-	 		 				
= \					1								
E)					 		+		 				
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otal			<u> </u>	<u> </u>	l .	1	1	l.					

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.)

<u>Sec</u>	tion A. Public Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	75.	2,486,005.	1,437,048.	147,015.	227,902.	4,298,045.		
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	75.	2,486,005.	1,437,048.	147,015.	227,902.	4,298,045.		
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						4,298,045.		
<u>Sec</u>	tion B. Total Support	т		,					
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	75.	2,486,005.	1,437,048.	147,015.	227,902.	4,298,045.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			139.	13.	361,365.	361,517.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on				26,674.	24,764.	51,438.		
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						4,711,000.		
12	Gross receipts from related activiti	ies, etc (see instrui	ctions)			12			
13	First five years. If the Form 990 storganization, check this box and s	s for the organizati	on's first, second,	third, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ □		
	tion C. Computation of Pu						· · · · · · · · · · · · · · · · · · ·		
	Public support percentage for 201						91.23 %		
15	Public support percentage from 20						%		
16 a	33-1/3% support test — 2013. If and stop here. The organization of	the organization di qualifies as a public	d not check the book cly supported orga	ox on line 13, and the nization	he line 14 is 33-1/3	% or more, check	this box · · · · · · ► X		
t	b 33-1/3% support test — 2012. 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								
17 a	10%-facts-and-circumstances to or more, and if the organization method organization meets the 'facts-a	eets the 'facts-and	-circumstances' te:	st, check this box a	and stop here. Exp	olain in Part IV how			
	10%-facts-and-circumstances to or more, and if the organization m organization meets the 'facts-and-	eets the 'facts-and circumstances' tes	-circumstances' te it. The organization	st, check this box a n qualifies as a pub	and stop here. Exp olicly supported org	olain in Part IV how Janization	'the · · · · · · · ►		
18	Private foundation. If the organiz	ation did not checl	k a box on line 13,	16a, 16b, 17a, or	17b, check this box	and see instructio	ons ▶ [_		
RAA					Sch	adule A (Form 99)	0 or 990-FZ) 2013		

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

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

Sec	tion A. Public Support							
	idar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(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							
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
	Total. Add lines 1 through 5					-		
t	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)							
Sec	tion B. Total Support	•						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
10 a	Amounts from line 6							
	Add lines 10a and 10b							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
	Total Support. (Add Ins 9,10c 11 and 12)							
	First five years. If the Form 990 is organization, check this box and st	•		hird, fourth, or fifth	tax year as a sect	ion 501(c)(3))	▶ □
	tion C. Computation of Pul					······································		
	Public support percentage for 2013		•	,		, i	15	%
	Public support percentage from 20						16	
	tion D. Computation of Inv					·		·-··
	Investment income percentage for	•	•	•	••		17	%
	Investment income percentage from					L	18	용
	33-1/3% support tests — 2013. If is not more than 33-1/3%, check th	nis box and stop h	ere. The organizat	ion qualifies as a p	publicly supported o	organization		▶ ∐
	33-1/3% support tests — 2012. If line 18 is not more than 33-1/3%, o	check this box and	stop here. The or	ganızatıon qualıfie	es as a publicly sup	ported organ	ızatıon	▶ 📋
20	Private foundation. If the organiza	ation did not check	a box on line 14,	19a, or 19b, check	this box and see II	nstructions.		

Sche	dule A	(Form 990 c	or 990-EZ) 2	2013 I	Reformed	Church	of Highla	and Park	Affordab	ole Housi	ng Corp	20-5012	410	Page 4
Part	IV	Supplem or 17b; a (See inst	nental Inf Ind Part II Tructions).	ormation	on. Prov 2. Also d	ide the omplete	explana this pa	itions re	quired b y additio	y Part II, onal infor	, line 10; mation.	Part II, line	e 17a	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

m990. Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Ref	ormed Church of Highland Park	Affordable Housing	g Corp	20-5012410
Par	Organizations Maintaining Donor	Advised Funds or Oth	ner Similar Fu	
	Complete if the organization answer	ed 'Yes' to Form 990, P	art IV, line 6.	
		(a) Donor advised t	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 are the organization's property, subject to the organization's	dvisors in writing that the assenization's exclusive legal cont	ets held in donor a	dvised funds
6	Did the organization inform all grantees, donors, ar for charitable purposes and not for the benefit of the impermissible private benefit?	e donor or donor advisor, or f	or any other purpo	se conferring
Par	Conservation Easements. Complete if the organization answer	ed 'Yes' to Form 990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that a	pply)	
	Preservation of land for public use (e.g., recrea	ition or education)	Preservation o	f an historically important land area
	Protection of natural habitat		Preservation of	f a certified historic structure
	Preservation of open space		_	
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation co	ontribution in the fo	orm of a conservation easement on the
	last day of the tax year			The state of the s
	T. I I			Held at the End of the Tax Year
	Total number of conservation easements			
	Total acreage restricted by conservation easement			
	Number of conservation easements on a certified h	·	-	. 2c
C	Number of conservation easements included in (c) structure listed in the National Register			<u> </u>
3	Number of conservation easements modified, transtax year ►	ferred, released, extinguishe	d, or terminated by	y the organization during the
4	Number of states where property subject to conser	vation easement is located >		_
5	Does the organization have a written policy regards and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, in	specting, and enforcing consc	ervation easement	s during the year
7	Amount of expenses incurred in monitoring, inspect ►\$	ting, and enforcing conservat	ion easements dui	ring the year
8	Does each conservation easement reported on line and section $170(h)(4)(B)(u)^2 \dots \dots \dots$		· · · · · · · · · · · ·	· · · · · · · · · · · · Yes
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to the conservation easements.	conservation easements in its organization's financial state	revenue and expe ments that describ	ense statement, and balance sheet, and es the organization's accounting for
Par	Organizations Maintaining Collect Complete if the organization answer	tions of Art, Historical ed 'Yes' to Form 990, P	Treasures, or Part IV, line 8.	r Other Similar Assets.
1 8	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its financial st	l for public exhibition, educati	on, or research in	atement and balance sheet works of furtherance of public service, provide,
t	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for following amounts relating to these items:	public exhibition, education,	or research in furth	nerance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, line			
	(II) Assets included in Form 990, Part X			
	If the organization received or held works of art, his amounts required to be reported under SFAS 116 (storical treasures, or other sin (ASC 958) relating to these ite	nılar assets for fina ems	incial gain, provide the following
ā	Revenues included in Form 990, Part VIII, line 1			••••
	Assets included in Form 990. Part Y			► \$

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 6,471,656

Schedule **D** (Form 990) 2013

BAA

Page 3

(a) Description of security or category (including name of security)	(b) Book value	Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation Cost or end-of-year market value
) Financial derivatives	(b) book value	(c) Method of Valuation Cost of end-of-year market value
•		
Closely-held equity interests		
Other		<u> </u>
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tal. (Column (b) must equal Form 990, Part X, column (B) line 12)		
art VIII Investments - Program Related.	Voc' to Form 900 F	Part IV line 11c See Form 900 Part V line 13
(a) Description of investment type	(b) Book value	Part IV, line 11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end-of-year market value.
	(b) Dook Value	(c) Wethod of Valuation. Cost of end-of-year market valu
1)	<u> </u>	
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(9) (10) tal. (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets.	Voo' to Form 000 F	Port IV line 11d See Form 000 Port V line 15
(a) Description (b) must equal Form 990, Part X, column (b) line 13) And IX Other Assets. Complete if the organization answered (a) Description	Yes' to Form 990, F	Part IV, line 11d. See Form 990, Part X, line 15.
(9) tal. (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered " (a) Des		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(9) 10) tal. (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered " (a) December 13		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(9) 10) tal. (Column (b) must equal Form 990, Part X, column (B) line 13) art IX Other Assets. Complete if the organization answered " (a) December (1) (2) (3)		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(1) (2) (3) (4)		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(a) Des (1) (2) (3) (4) (5) (10) (10) (10) (10) (10) (10) (10) (10		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
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99 1al. (Column (b) must equal Form 990, Part X, column (B) line 13) 1art IX Other Assets. Complete if the organization answered (a) December 1990 11) 22) 33) 44) 55) 66) 77) 88) 99 00) 1al. (Column (b) must equal Form 990, Part X, column (B), Interest 1990 1art X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability 1) Federal income taxes 2) 3) 4)	ine 15.)	(b) Book value
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Sche	edule D (Form 990) 2013 Reformed Church of Highland Park Affordable Housing Corp 20)-5012410 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.
	Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	. 1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	
	Net unrealized gains on investments	
t	Donated services and use of facilities	-
(Recoveries of prior year grants	- -
	d Other (Describe in Part XIII.)	-]
	Add lines 2a through 2d	. 2 e
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
á	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
	Other (Describe in Part XIII.)	- , '
	Add lines 4a and 4b	. 4c
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5
	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	
	Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
		T 4 T
1	Total expenses and losses per audited financial statements	· 1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
	Donated services and use of facilities	- /
	Prior year adjustments	-
	Cother losses	-
	1 Other (Describe in Part XIII)	-
	Add lines 2a through 2d	
3	Subtract line 2e from line 1	. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	
	n Investment expenses not included on Form 990, Part VIII, line 7b	-
	Add lines 4a and 4b	- 4c
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	
	t XIII Supplemental Information.	., • ,
Prov	ide 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, 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 additio	nal information
	To the Mark the provided and the Mark the most be used to the part to provide any addition	na momaton
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BAA		Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 Reformed Church of Highland Park Affordable Housing Corp Part XIII Supplemental Information (continued)	20-5012410	Page 5
Part XIII Supplemental Information (continued)		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
Reformed Church of Highland Park Affordable Housing Corp	20-5012410
Pt VI, Line 11b Board reviews and approves 990 prior to filing	
Pt_VI, Line 12c Annual conflict of interest documents completed	by board members
Pt VI, Line 15a no compensation paid to ED	
Pt VI, Line 15b Other compensation determined by board and salar	y surveys
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Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Development expenses	6,285.	6,285.	0.	0.
Utilities	49,042.	49,042.	0.	0
Telephone	4,261.	4,061.	200.	0.
Other operating expenses	5,518.	5,518.	0.	0.