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DLN: 93493318011054

# Form **990**

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		<b>2013 ca</b> l ipplicable	C Name of organization  MIDWEST HOUSING EQUITY GROUP INC	013 , 2013, and ending 12	2-31-2013	D Employ	er ider	ntification number
— Add	dress ch	hange	,			47-07	67984	<b>.</b>
Na	me cha	inge	Doing Business As					
Init	ial retu	ım	Number and street (or P O box if mail is not de	livered to street address) Room,	/suite	E Telepho	ne numl	ber
	mınate		13520 CALIFORNIA STREET NO 250			(402)	334-8	899
_	ended		City or town, state or province, country, and ZIF OMAHA, NE 68154	or foreign postal code				
App	olication	n pending						9,429,455
			F Name and address of principal office JASON MAIN	er		Is this a group subordinates?	return	for
			13520 CALIFORNIA STREET NO 25	0		suborumates.		, ,
			OMAHA,NE 68154			Are all subordır ıncluded?	nates	Γ Y es Γ No
<b>I</b> Ta	x-exen	npt status	▼ 501(c)(3)	「 4947(a)(1) or			a lıst	(see instructions)
J W	ebsite	e: ► WV	/W MHEGINC COM		H(c)	Group exempti	on nun	nber ▶-
<b>V</b> For	m of or	wa nization	Corporation Trust Association Other I	•	1	r of formation 199		State of legal domicile NE
	rt I	_	mary		L fea	i oi ioiiiiatioii 19:	93   14	state of legal doffficile. NE
Governance		MIDWES	escribe the organization's mission or most ST HOUSING EQUITY GROUP INC'S MIS Y AFFORDABLE HOUSING		HE DEVEL	OPMENT AND	SUST	AINABILITY OF
Jell Vell	2	Check tl	nis box 🛌 if the organization discontinue	d its operations or dispose	d of more t	han 25% of its	net as:	sets
			,					_
Activities &	I		of voting members of the governing body (	·			3	8
Ě	I		of independent voting members of the gov mber of individuals employed in calendar y				<b>4</b> 5	7 41
₽Ç	I		mber of volunteers (estimate if necessary)				6	0
•	I		related business revenue from Part VIII, o				7a	0
	I		lated business taxable income from Form				7b	0
				·		Prior Year		Current Year
	8	Contr	butions and grants (Part VIII, line 1h) .				0	0
Revenue	9		ım service revenue (Part VIII, line 2g) .			11,108,4	33	9,246,384
9.6	10	Inves	ment income (Part VIII, column (A), lines	3,4, and 7d)		96,7	65	182,179
<b>—</b>	11		revenue (Part VIII, column (A), lines 5, 6				0	0
	12		revenue—add lines 8 through 11 (must equ		ine	11,205,1	98	9,428,563
	13		and similar amounts paid (Part IX, colum			212,7		227,222
	14		ts paid to or for members (Part IX, column				0	0
	15		es, other compensation, employee benefits					
Expenses		5-10				3,584,5	_	4,344,058
<u>₹</u>	16a		sional fundraising fees (Part IX, column (A		•		0	0
ሿ	b		ndraising expenses (Part IX, column (D), line 25)		-	6 202 2	2.0	2 770 152
	17		expenses (Part IX, column (A), lines 11a-			6,382,2	_	2,779,153
	18 19		expenses Add lines 13–17 (must equal P ue less expenses Subtract line 18 from li			10,179,5		7,350,433 2,078,130
<u>د د</u>	1.5	Kevel	ac less expenses subtract file to nomin			inning of Currer	-	End of Year
Not Assets or Fund Balances	20	Total	assets (Part X, line 16)			<b>Year</b> 28,857,1	5.7	30,737,885
t As d B	21		liabilities (Part X, line 26)		`. <b> </b>	2,190,1	-	1,825,622
2E	22		sets or fund balances Subtract line 21 fro		. `	26,666,9		28,912,263
Pai	t II		ature Block			· · · · · ·		<u> </u>
my k	nowled arer ha	dge and as any k	perjury, I declare that I have examined this belief, it is true, correct, and complete De nowledge  ** ature of officer  N MAIN CFO					
			or print name and title					
			rint/Type preparer's name Preparer'	s signature	Date	Check I if	PTIN P01254	265
Paid	b	<b>⊢</b>	irm's name		<u> </u>	self-employed Firm's EIN > 35		
	pare	r		_				
Use	On	Iv   F	irm's address 🟲 501 CONGRESSIONAL BLVD STE 30	0		Phone no (317)	848-57	700

CARMEL, IN 46032

May the IRS discuss this return with the preparer shown above? (see instructions)  $\,$  .

✓ Yes ☐ No

Par	t III	Statement of Program S Check if Schedule O contains			III	
1	Brief	ly describe the organization's m	ssion			
		HOUSING EQUITY GROUP INC BLE HOUSING	C'S MISSION IS TO	PROMOTE THE DEV	ELOPMENT AND SUSTAINABIL	LITY OF QUALITY
<u> </u>	KDAL	SLE HOUSING				
2		ne organization undertake any si rior Form 990 or 990-EZ? .				┌ Yes ┌ No
	If"Y€	es," describe these new services	on Schedule O			
3	servi	ne organization cease conductin				┌ Yes ┌ No
	If"Y€	es," describe these changes on S	Schedule O			
4	expe		l (c)(4) organization	s are required to repor	ree largest program services, as t the amount of grants and alloca	
4a	APPR AFFO PRO\ INVE KANS HOUS HOUS	VEST HOUSING EQUITY GROUP, INC (NOXIMATELY 40 LIMITED PARTNERSHIPS INCOMED FOR THE PROJECTS WHICH AN AUTOMOTE PROJECTS, STED \$118 MILLION IN 29 ADDITIONAL SAS, OKLAHOMA, ARKANSAS, MISSOURI SING PROJECTS REPRESENTING 10,477	IHEG) PROVIDES ACQUI WHICH INVEST EQUITY RE ELIGIBLE FOR FEDER MHEG PROVIDES TECHN AFFORDABLE HOUSING I SOUTH DAKOTA, AND AFFORDABLE HOUSING 17% REPRESENT SING	CAPITAL IN OTHER PARTNE AL TAX CREDITS UNDER SE ICAL AND ADVISORY SERVIO PROJECTS CREATING 815 A FEXAS SINCE 1993 MHEG I UNITS IN 178 DIFFERENT O	227,222 ) (Revenue \$ VICES PRIMARILY BY ACTING AS THE GE ERSHIPS OR LLCS FORMED TO DEVELOP, CTION 42 OF THE INTERNAL REVENUE C CES TO THE PARTNERSHIPS FOR A FEE I FFORDABLE HOUSING UNITS LOCATED II HAS INVESTED OVER \$1 04 BILLION DOLL CITIES 41% OF THESE PROJECTS REPRI REPRESENT SPECIAL NEEDS OR TRAN	OWN AND OPERATE ODE IN ADDITION TO DURING 2013, MHEG N NEBRASKA, IOWA, ARS IN 376 AFFORDABLE ESENT MULTI-FAMILY
4b	(Cod	e ) (Expenses \$		including grants of \$	) (Revenue \$	)
<b>4</b> c	(Cod	e ) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)
						_
4d		er program services (Describe ii	•			
	(Exp	penses \$	including grants o	f\$	) (Revenue \$	)
4e	Tota	al program service expenses 🕨	6,166,067	,		

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 $A^{22}$	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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 $\sqrt[4]{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	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		No
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		No
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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 $11e^{2}$ 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? <i>If "Yes," complete Schedule G, Part II</i>	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		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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? If "Yes," complete Schedule L, Part $I$	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? If "Yes," complete Schedule L, Part I	25b		No
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		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
_		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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? If "Yes," complete Schedule N, Part I	31		No
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		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? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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 $512(b)(13)$ ? 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		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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

G I	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	l No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   13		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b  0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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			
	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)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	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)?	4a		N
,	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 105, to the 50 of 55, and the organization metrorin 0000 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5c		
1	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?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year   7d	<del></del>		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
	contract?	7e		N ·
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		N
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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	13a		
)	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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 or note to any line in this Part VI							

Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
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
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se		eveni	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<i>le Cod</i> <b>Yes</b>	e.) <b>No</b>
		evenu 10a		
10a	Did the organization have local chapters, branches, or affiliates?		Yes	
10a b	Did the organization have local chapters, branches, or affiliates?	10a	<b>Yes</b> Yes	
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	<b>Yes</b> Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	<b>Yes</b> Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written whistleblower policy?  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?  The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed ▶OK
- 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 ►JASON MAIN 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 (402)334-8899

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

#### 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) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec (, unle n offic	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) RICHARD SCHENCK	1 00	×						0	0	0
CHAIRPERSON	0 00							Ŭ		
(2) BARRY G SANDSTROM	1 00	x						0	0	0
DIRECTOR	0 00									
(3) CHRIS HENSLEY	20 00	×						67,333	0	0
DIRECTOR/INTERIM EVP	0 00							·		
(4) DENNIS BRAND	1 00	x						0	0	0
DIRECTOR (5) RICHARD A HOIEKVAM	0 00									
		х						0	0	0
DIRECTOR (6) RICK JACKSON	0 00									
DIRECTOR		х						0	0	0
(7) STEVE BODNER	0 00									
SECRETARY/TREASURER	0 00	Х						0	0	0
(8) DAVID FISHER	1 00									
VICE CHAIRPERSON	0 00	X						0	0	0
(9) JASON MAIN	40 00			.,				200 646		25.546
CFO	0 00			Х				209,646	0	25,546
(10) ANN BURGE	40 00			Х				183,852	0	17,220
C00	0 00			_ ^				163,632	0	17,220
(11) BECKY CHRISTOFFERSEN	40 00			х				222,979	0	24,362
CIO	0 00			L^				222,313		24,302
(12) DAN GARRETT	40 00			x				59,912	0	5,434
FORMER EVP - IA OPERATIONS	0 00							,		
(13) PATRICK MICHAELIS	40 00							152.250	0	12.040
VP/BUSINESS DEVELOPMENT OFFICER (CENTRAL REGION)	0 00			X				152,258	0	13,048
(14) THOMAS JUDDS	40 00									
FORMER EVP - NE OPERATIONS	0 00			Х				148,156	0	19,086
(15) ANDREA FRYMIRE	40 00									
VP/BUSINESS DEVELOPMENT OFFICER (SOUTH REGION)	0 00			х				151,169	0	13,551
(16) JOHN WIECHMANN	40 00									
PRESIDENT AND CEO	0 00			Х				321,032	0	27,519
(17) TOM STRATMAN	40 00			<u> </u>						
VP OF ACQUISITIONS	0 00			Х				123,123	0	17,919
						-				Form <b>990</b> (2013)

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more pers and	than on is a dii	one bot	note boo	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F Estim amount o compen from	ated of other isation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099 MISC)	) -	organiz and re organiz	lated
(18) BEN HENDERSON	40 00			х				56,885		0		610
VP OF ASSET MANAGEMENT	0 00			Ĺ			Ш			$\overset{"}{\longrightarrow}$		
							$\Box$					
							$\vdash$			$\dashv$		
					_		$\vdash$			$\dashv$		
							$\Box$			$\dashv$		
					-		Н			$\dashv$		
1b Sub-Total		<del></del>	<u> </u>	<del></del>		<u> </u>				Τ'		
c Total from continuation sheets to Part	VII, Section A					►						
d Total (add lines 1b and 1c)						►		1,696,345		0		164,295
2 Total number of individuals (including b	ut not limited to	those	liste	ed al	bov	e) who	rece	eived more than				
\$100,000 of reportable compensation	from the organiz	zation	<b>-</b> 8									
											Yes	No
3 Did the organization list any <b>former</b> offi	cer director or	trustea	a key	/ em	anlo	vee n	r hial	hest compensate	d employee [		165	140
on line 1a? If "Yes," complete Schedule 3			•,,	•		• •	• •			3		No
4 For any individual listed on line 1a, is to organization and related organizations									om the			
ındıvıdual		•	•	•	•	•				4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization?									ndividual for	_		
services remarked to the organization	1, 165, 66,,,			, 0,	240	on perc	, , , ,		[	5		No
Section B. Independent Contracto	ors											
Complete this table for your five highes compensation from the organization Re	t compensated								the organizati		tax year	
Name and b	(A) usiness address							Description	(B) on of services		(C Comper	
DAUBY O'CONNOR & ZALESKI 501 CONGRESSIONAL BL	VD SUITE 300 CARM	1EL IN 4	6032					AUDITING AND 1			F 21	952,380
INTEGRATEC SERVICES LLC 3560 LENOX RD STE 2800								DATA MANAGEM		$\bot$		312,659
KUTAK ROCK LLP 1650 FARNAM STREET OMAHA NE 68	102							LEGAL SERVICES	)	$\dashv$		255,041
2 Total number of independent contractors	(ıncludına but ı	not lim	ıted t	o th	iose	listed	abo	ve) who received	more than			

\$100,000 of compensation from the organization  $\blacktriangleright 3$ 

Part V	<del></del>	Check if Schedu	il <b>Reveilue</b> ule O contains a respor	ise or note to any lii	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 92	1a	Federated camp	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es <b>1b</b>					
, E	c	Fundraising eve	ents <b>1c</b>					
ffs, ⊨A	d		rations 1d					
nija Jaa	e	Government grants						
ms, Sin		-						
utic ier	f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
	g	Noncash contribution	ons included in lines					
ng p	h	·	s 1 a - 1 f					
				Business Code				
E	2a	ACQUISITION/ADVI	ISORY	531110	7,597,116	7,597,116		
Program Serwce Revenue	ь	MONITORING FEES		531110	898,380	898,380		
ě Œ	l c	ORGANIZATION/OF	FERING	531110	464,119	464,119		
2	d	ASSET MGMT FEES	<u> </u>	531110	201,129	201,129		
፠	e	CONSULTING FEES	<u> </u>	531110	40,083	40,083		
Ta T	f	All other progra	ım service revenue		45,557	45,557		
Š	g	Total Add lines	s 2a – 2f		9,246,384			
	3		ome (including dividen					
		and other simila	aramounts)	•	183,071			183,071
	4		tment of tax-exempt bond p	oroceeds •••				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(i) icedi	(II) I CISOIIII				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental incor	ll me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or other basis and		892				
		sales expenses						
	C	Gain or (loss)		-892	-892	-892		
	d 8a	Gross income fi	rom fundraising		032	032		
<del>o</del>		events (not inc						
Other Revenue		\$ of contributions	 reported on line 1c)					
æ		See Part IV, lin						
<u>u</u>			a					
ŧ	С		penses <b>b</b> (loss) from fundraising (	events <b>.</b>				
			rom gaming activities					
			e 19					
		Laca dimantavi	a noncos					
	l		penses <b>b</b> (loss) from gaming activ	/ities <b>.⊫</b> -				
		Gross sales of	ı	-				
		returns and allo						
	ь	less cost of a	a oods sold b					
		=	(loss) from sales of inve	entory <b>.</b>				
		Miscellaneous		Business Code				
	11a							
	ь							
	С							
	d	All other revenu	ı					
	е	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue.	See Instructions		9,428,563	9,245,492	0	183,071
					-,, - 55	,,		Form <b>990</b> (2013)

Form	1990 (2013)				Page <b>10</b>
Pai	t IX Statement of Functional Expenses				
Sect	ion $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. A	ll other organızat	ions must comp	lete column (A )	
	Check if Schedule O contains a response or note to any line in thi	s Part IX			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	227,222	227,222		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				

1,696,345

1,929,772

244,337

256,382

217,222

264,715

9,349

49,438

603,685

154,196

356,375

31,640

376,666

60,195

17,479

845,177

7,350,433

7,967

1,430

841

1,696,345

1,929,772

244,337

256,382

217,222

841 264,715

49,438

1,430

11,361

31,640

376,666

5,552

845,177

6,166,067

7,967

9,349

603,685

142,835

356,375

60,195

11,927

1,184,366

Compensation of current officers, directors, trustees, and

Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . .

Accounting . . . . . . . . . . . .

Professional fundraising services See Part IV, line 17 Investment management fees . . . . . . . . Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on

Lobbying . . . . . . . . . . . .

Pension plan accruals and contributions (include section 401(k)

key employees . .

Other salaries and wages

Fees for services (non-employees)
Management . . . . . . . .

Legal . . . . . . . . . .

Office expenses . . . . . .

state, or local public officials . . . . . .

Conferences, conventions, and meetings . . . .

Depreciation, depletion, and amortization . . . .

Total functional expenses. Add lines 1 through 24e

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check

here ► T if following SOP 98-2 (ASC 958-720)

Joint costs. Complete this line only if the organization

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)

Payments of travel or entertainment expenses for any federal,

Information technology . . .

**EDUCATION REIMBURSEMENT** 

Royalties . .

10

11

12

13

14 15

16

**17** 

18

19

20

21 22

23

24

b

c d

25

26

a BAD DEBT

**e** All other expenses

0

Part X Balance Sheet

Par	't 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	736,262	1	655,895
	2	Savings and temporary cash investments	13,069,070	2	9,646,886
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	14,408,475	4	17,250,232
Assets	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			
S	l _		100.007	6	0.504.005
Ą	7	Notes and loans receivable, net	136,367	7	2,584,385
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	326,792	9	392,214
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  635,020			
	b	Less accumulated depreciation	170,136	<b>10</b> c	198,218
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV , line 11	10,055	15	10,055
	16	Total assets. Add lines 1 through 15 (must equal line 34)	28,857,157	16	30,737,885
	17	Accounts payable and accrued expenses	1,593,428	17	1,143,094
	18	Grants payable		18	
	19	Deferred revenue	550,996	19	659,280
	20	Tax-exempt bond liabilities		20	
S.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	_
	24	Unsecured notes and loans payable to unrelated third parties		24	_
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	45,767	25	23,248
	26	Total liabilities. Add lines 17 through 25	2,190,191	26	1,825,622
ي. طا		Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete			
Ĕ	27	lines 27 through 29, and lines 33 and 34.  Unrestricted net assets	26,666,966	27	28,912,263
<u>ନ</u>	28	Temporarily restricted net assets	20,000,000	28	20,012,200
<u> </u>	29	Permanently restricted net assets		29	
Ĭ	29	,		29	
or Fund Balance		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	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
\$ 55	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	26,666,966	33	28,912,263
Ž	34	Total liabilities and net assets/fund balances	28,857,157	34	30,737,885
	L .	The state of the s	25,557,187	<b>-</b> 7	

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,4	128,563
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,:	350,433
3	Revenue less expenses Subtract line 2 from line 1	3			78,130
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		· ·	566,966
5	Net unrealized gains (losses) on investments	5		-	167,167
6	Donated services and use of facilities	6			,107
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		28 (	912,263
Par	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line 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?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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As Filed Data -

DLN: 93493318011054

# SCHEDULE A Public

(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.

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

OMB No 1545-0047

Open to Public Inspection

Name	of	the	org	anizati	on	
1IDWE:	ST I	HOUS	ING	EQUITY	GROUP	INC

Employer identification number

47-0767984

Par	+ T_	Desc	on for Du	blic Charity Sta	tue (All or	nanizatione	must com	alata this r	147-0767			
				te foundation becaus						i i su ucuons	· .	
1	_		-	ion of churches, or a	•		-	•	-			
2	_		•	in <b>section 170(b)(1</b>					-/(-/(-/			
3	_			perative hospital se			•	n 170(b)(1	(A)(iii).			
4	<u></u>			h organization operat	=					(1)(A)(iii).	Enter the	
-	•			ity, and state	,					. – , ( , ( , , -		
5	Γ	Anorga	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by	a governmen	tal unit des	cribed in	
		sect ion	170(b)(1)(	( <b>A)(iv).</b> (Complete P	art II )							
6	Γ	A feder	al, state, or	· local government or	government	al unit desc	rıbed ın <b>secti</b>	on 170(b)(:	1)(A)(v).			
7	Γ			at normally receives			support from	a governme	ental unit or f	rom the gen	eral publi	С
8	Г			on 170(b)(1)(A)(vi). : described in <b>sectior</b>			nplete Part II	: )				
9	굣	An orga	anization th	at normally receives	(1) more th	an 331/3% o	f its support	from contril	outions, mem	bership fee:	s, and gro	SS
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of						L/3% of						
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from b	usinesses	
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee <b>section</b> 5	<b>509(a)(2).</b> (C	omplete Pa	rt III )			
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).											
11	1	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 <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h <b>a</b> Type I <b>b</b> Type II <b>c</b> Type III - Functionally integrated <b>d</b> Type III - Non-functionally integrated							.Check			
e	Γ	other t		ox, I certify that the ion managers and ot								
f		If the o	rganization this box	received a written de						III support	ing organ	ization,
g				2006, has the organi	zation accep	ted any gift	or contributi	on from any	of the			
			ng persons? erson who d	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii	)	Yes	No
		. ,		governing body of th	•		-			· .—	g(i)	<del> </del>
				er of a person descri		_					)(ii)	<del>†                                      </del>
			•	lled entity of a perso			above?				(iii)	
h				ng information about								
(i) Name of supported organization		rted	ed organization		organizati col <b>(i)</b> list your gove	(iv) Is the organization in col (i) listed in your governing document?		notify zation if your t?	(vi) Is the organization in col (i) organized in the U S ?		mon	mount of etary port
				(see instructions))							4	
				ilistructions))	Yes	No	Yes	No	Yes	No		
Total												

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</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	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported							
		ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	(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	4,194,482	11,377,070	7,866,492	11,108,433	9,246,3	84 43,792,861
_	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 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	4,194,482	11,377,070	7,866,492	11,108,433	9,246,3	84 43,792,861 0
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of						C
c	the amount on line 13 for the year Add lines 7a and 7b						0
8	<b>Public support</b> (Subtract line 7c from line 6)						43,792,861
	ction B. Total Support						1
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	<b>(f)</b> ⊤otal
9	A mounts from line 6	4,194,482	11,377,070	7,866,492	11,108,433	9,246,3	43,792,861
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	57,414	175,904	106,878	96,765	183,0	620,032
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b  Net income from unrelated	57,414	175,904	106,878	96,765	183,0	71 620,032
	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	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)	4,251,896	11,552,974	7,973,370	11,205,198	9,429,4	44,412,893
14	First five years. If the Form 990 is check this box and stop here			, thırd, fourth, or 1	fifth tax year as a	501(c)(3) org	janization, ►
	ction C. Computation of Pub			12 1 (0)			
15	Public support percentage for 2013			13, column (f))		15	98 600 %
16	Public support percentage from 201		·			16	98 720 %
<u>Se</u> 17	ction D. Computation of Investment income percentage for 3				n (f))	17	1 400 0/
1 <i>7</i> 18	Investment income percentage from				(17)	17	1 400 %
	33 1/3% support tests—2013. If the				line 15 is more t	18 han 33 1/3% a	1 270 %
± 7a	more than 33 1/3%, check this box a						

33 1/3% support tests—2012. 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 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Supplemental Information.** 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					
Return Reference	Explanation				
SCHEDULE A, PART III, LINE 12	INCLUDED ON PAGE 9, PART VIII IN CURRENT YEAR OTHER REVENUE LINE 7C IS A LOSS ON DISPOSAL OF DEPRECIABLE ASSETS OF \$892 THE LOSS IS NOT BEING INCLUDED ON SCHEDULE A, PART III, LINE 12 BECAUSE IT DOES NOT MEET THE DEFINITION OF SUPPORT AS DEFINED IN SECTION 509(D) OF THE INTERNAL REVENUE CODE				

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493318011054

#### OMB No 1545-0047

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Political Campaign and Lobbying Activities

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

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

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

Open to Public Inspection

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

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

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

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

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

	me of the organization DWEST HOUSING EQUITY GROUP INC			Er	nployer ider	ntification number
PIL	WEST HOOSING EQUIT GROOF INC			47	7-0767984	
Par	t I-A Complete if the or	ganization is exempt under	section 501(	c) or is a se	ction 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect polit	tical campaign act	tivities in Part I	V	
2	Political expenditures				<b>►</b>	\$
3	Volunteer hours					
Dar	Complete if the or	ganization is exempt under	section 501(	c)(3)		
1		e tax incurred by the organization u			<b></b>	¢
2	•	e tax incurred by organization mana				\$
3	·	ection 4955 tax, did it file Form 47	_		-	↑ Yes No
- 4a	Was a correction made?					□ Yes □ No
ь	If "Yes," describe in Part IV					,
		ganization is exempt under	section 501(	c), except s	ection 50	)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exemp	pt function activ	/ities 🕨	\$
2		organization's funds contributed to c	other organizations	s for section 52	7	
	exempt function activities				•	\$
3	Total exempt function expendit	tures Add lines 1 and 2 Enter here	e and on Form 112	20-POL, line 17	b <b>-</b>	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?				☐ Yes ☐ No
5	Enter the names, addresses ar organization made payments	funds Also enter the				
		ns received that were promptly and political action committee (PAC) I				
	(a) Name	(b) Address	<b>(c)</b> EIN	(d) A mount filing orgat funds If non	nization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

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

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means a			(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)		49,438	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)			
c	Total lobbying expenditures (add lines 1a and 1	49,438			
d	Other exempt purpose expenditures	7,300,995			
e	Total exempt purpose expenditures (add lines 1	7,350,433			
f	Lobbying nontaxable amount Enter the amount from the following table in both columns				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)		129,381	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		0	
i	Subtract line 1f from line 1c If zero or less, ente	er-0-		0	
j	If there is an amount other than zero on either li	ne 1h or line 1i, did the organization file Form	1720 rep	porting	

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

	Lobbying Expe	nditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	( <b>d)</b> 2013	<b>(e)</b> Total
2a	Lobbying nontaxable amount			658,976	517,522	1,176,498
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,764,747
c	Total lobbying expenditures			24,250	49,438	73,688
_d	Grassroots nontaxable amount			164,744	129,381	294,125
e	Grassroots ceiling amount (150% of line 2d, column (e))					441,188
f	Grassroots lobbying expenditures			24,250	49,438	73,688

	-	on under section 501(h)).	(;	a)		(b)	
For e activ		elow, provide in Part IV a detailed description of the lobbying	Yes	No	А	moun	ıt
1		on attempt to influence foreign, national, state or local uence public opinion on a legislative matter or referendum,		<u> </u>			
а	Volunteers?						
b	Paid staff or management (include comp	ensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?				1		
d	Mailings to members, legislators, or the	public?					
е	Publications, or published or broadcast	statements?					
f	Grants to other organizations for lobbying	ng purposes?					
g		ffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conv	entions, speeches, lectures, or any similar means?					
i	O ther activities?						
j	Total Add lines 1c through 1i						
2a		lanization to be not described in section 501(c)(3)?			_		
b	If "Yes," enter the amount of any tax inc						
C .		curred by organization managers under section 4912		ı			
d		on 4912 tax, did it file Form 4720 for this year?	-04/-	<u> </u>			
Par	501(c)(6).	ration is exempt under section 501(c)(4), section 5	out(c	)(5),	or se	CTIO	n
	301(c)(0).					Yes	No
1	Were substantially all (90% or more) du	es received nondeductible by members?		ſ	1		
2		lobbying expenditures of \$2,000 or less?		F	2		
3	Did the organization agree to carry over	lobbying and political expenditures from the prior year?			3		
Par		ration is exempt under section 501(c)(4), section 5 (a) BOTH Part III-A, lines 1 and 2, are answered " s."					
1	Dues, assessments and similar amounts		1				
2	Section 162(e) nondeductible lobbying a expenses for which the section 527(f) t	and political expenditures (do not include amounts of political ax was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
c	Total	022( )/4)/4)	2c				
3		033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		line 2c exceeds the amount on line 3, what portion of the excess r to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?	,	4				
5	Taxable amount of lobbying and politica	l expenditures (see instructions)	5				
Pa	art IV Supplemental Informat	ion					
	ovide the descriptions required for Part I-Art II-B, line 1 Also, complete this part for	A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou any additional information	ıp lıst),	Part I	I-A, lı	ne 2,	and
	Return Reference	Explanation					
PAR	T II-A, LINE 1A LOBBY	YING EXPENDITURES WERE MADE IN ORDER TO INFLUENCE	LEGIS	LATOR	RS TO	ENAC	СТ
	PROPI	ERTY TAX LEGISLATION TO PROTECT AFFORDABLE HOUSIN	G DEV	ELOP	4ENTS	5	

201104410 3 (1 3111 330 31 330 12) 2013		i age <del>-i</del>
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493318011054

OMB No 1545-0047

## **SCHEDULE D**

(Form 990)

Department of the Treasury

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

al Revenue Service	tractions is at www.irs.gov/rormsso.		Tuspection
ame of the organization IDWEST HOUSING EQUITY GROUP INC		Employer identifica	ntion number
organizations Maintaining Donor organization answered "Yes" to Form			. Complete if the
-	(a) Donor advised funds	(b) Funds and	other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor a funds are the organization's property, subject to the		onor advised	┌ Yes ┌ No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the b conferring impermissible private benefit?			┌ Yes ┌ No
rt II Conservation Easements. Comple	te if the organization answered "Yes"	to Form 990, Part I\	/, line 7.
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreation protection of natural habitat Preservation of open space	ation or education) Preservation of a	an historically important a certified historic struc	ture
Complete lines 2a through 2d if the organization heasement on the last day of the tax year	ield a qualified conservation contribution if	i the form of a conserva	tion
		Held at the	End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easeme	nts	2b	
Number of conservation easements on a certified	historic structure included in (a)	2c	
Number of conservation easements included in (c historic structure listed in the National Register	) acquired after 8/17/06, and not on a	2d	
Number of conservation easements modified, tran	sferred, released, extinguished, or termina	ted by the organization	during
the tax year 🗕			
Number of states where property subject to conse	ervation easement is located ►		
Does the organization have a written policy regard enforcement of the conservation easements it hol		ndling of violations, and	「Yes 「No
Staff and volunteer hours devoted to monitoring, ii	nspecting, and enforcing conservation eas	ements during the year	
A mount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easemer	nts during the year	
► \$	5, 235		
Does each conservation easement reported on lin and section 170(h)(4)(B)(II)?	e 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(ı)	┌ Yes ┌ No
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the organization's financi		
<b>Complete of the organization answere</b>		, or Other Similar	Assets.
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footn	assets held for public exhibition, education	n, or research in furthera	
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenu assets held for public exhibition, education	e statement and balanc	
(i) Revenues included in Form 990, Part VIII, line	e 1	<b>▶</b> \$	
(ii) Assets included in Form 990, Part X		<b>►</b> \$	
If the organization received or held works of art, h following amounts required to be reported under S		for financial gain, provi	
Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$	
Assets included in Form 990, Part X		<u></u>	
Mooelo iliciuueu ili FUIIII 990, Pail X		F* \$	

Part	Organizations Maintaining Co	llections of Art, F	listori	cal Tr	easu	res, or Ot	<u>her</u>	Similar Asse	ts (conti	nued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	, check	any of t	he follo	wing that ar	eas	significant use of	ıts	
а	Public exhibition	•	d 厂	Loan	or exch	ange progra	ms			
b	Scholarly research	•	е Г	Other	=					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explain	how the	y furthe	r the o	rganızatıon's	exe	empt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								Yes $\Gamma$	No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar	<b>jements.</b> Complete	ıf the	organı	zation			<u> </u>	,	
1a	Is the organization an agent, trustee, custor included on Form 990, Part X?	•				r other asse	ts no		Yes $ extstyle  ag{7}$	No No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	llowing	table				,	,	
								Amou	ınt	
c	Beginning balance					1	lc			
d	Additions during the year					1	.d			
e	Distributions during the year					1	.е			
f	Ending balance					1	Lf			
2a	Did the organization include an amount on F	orm 990, Part X, line 2	1?					Г	Yes $ extstyle  $	No
b	If "Yes," explain the arrangement in Part XI	II Check here if the ex	kolanati	on has	been p	rovided in Pa	art X	III		Γ
Pai	t V Endowment Funds. Complete									
			<b>(b)</b> Prior						<b>)</b> 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 cur	rent year end balance	(lıne 1g	, colum	n (a)) h	eld as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ►									
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
3a	Are there endowment funds not in the posse organization by	ssion of the organization	on that	are helo	d and a	dmınıstered	for t	he 	Yes N	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations						•	3a(ii)		
ь 4	If "Yes" to 3a(II), are the related organization. Describe in Part XIII the intended uses of t						•	<u>3b</u>		
	t VI Land, Buildings, and Equipme				answ	ered 'Yes'	to F	orm 990 Part	TV line	
	11a. See Form 990, Part X, line		. organ	nzacioi	1 411571	rered res		01111 330, 1 arc	10, 11110	
	Description of property			a) Cost of sis (inves		(b)Cost or other		(c) Accumulated depreciation	(d) Book	value
<b>1</b> a l	and									
b E	Buildings									
c l	easehold improvements					30,6	510	20,543	1	10,067
d E	Equipment					377,4	133	268,832	10	08,601
	Other					226,9	977	147,427	7	79,550

Part VII Investments—Other Securities. Con See Form 990, Part X, line 12.	nplete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1) Financial derivatives			
(2)Closely-held equity interests Other			
Total (Column (b) must equal Form 000, Part V, sel. (B) line 12.)	<b>F</b>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. Co			orm 990 Part IV line 11c
See Form 990, Part X, line 13.	implete il the organization	i aliswered Tes to To	orni 990, Parciv, iiile iic.
(a) Description of investment	(b) Book value	(c) Method of va	
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>+</b>		
Part IX Other Assets. Complete if the organization		, Part IV, line 11d See I	Form 990, Part X, line 15
(a) Descri	ption		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1.	5.)		
Part X Other Liabilities. Complete if the orga			ine 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes			
INVESTMENT IN LIMITED PARTNERSHIPS	23,248		
	+		
Table (0-hara (1))			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	23,248	o organization in the	Labatama anti- the c

PART XI, LINE 4B - OTHER

PART XII, LINE 2D - OTHER

ADJUSTMENTS

ADJUSTMENTS

Part		evenue per Audited Financial Statements With Revenue p vered 'Yes' to Form 990, Part IV, line 12a.	er Ret	t <b>urn</b> Complete ıf
1	_	er support per audited financial statements	1	9,574,703
2	A mounts included on line 1 bu	it not on Form 990, Part VIII, line 12		
а	Net unrealized gains on invest	ments		
b	Donated services and use of fa	acılıtıes		
С	Recoveries of prior year grants	s 2c		
d	Other (Describe in Part XIII )	<b>2d</b> 892		
e	Add lines <b>2a</b> through <b>2d</b> .	<del></del> .	2e	168,059
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3	9,406,644
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )			
c	Add lines <b>4a</b> and <b>4b</b>		4c	21,919
5		d <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	9,428,563
Part		xpenses per Audited Financial Statements With Expenses swered 'Yes' to Form 990, Part IV, line 12a.	per R	<b>eturn.</b> Complete
1	Total expenses and losses per	r audited financial statements	1	7,358,084
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25		
а	Donated services and use of fa	acilities		
b	Prior year adjustments			
c	Otherlosses			
d	Other (Describe in Part XIII )			
e	Add lines 2a through 2d		2e	7,651
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3	7,350,433
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )	4b		
c	Add lines <b>4a</b> and <b>4b</b>		4c	0
5	Total expenses Add lines 3 ar	nd <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	7,350,433
Part	XIII Supplemental Inf	formation		
Part		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to $\frac{1}{2}$		any additional
	Return Reference	Explanation		
PART	X, LINE 2	THE CORPORATION IS EXEMPT FROM FEDERAL INCOME TAX UNDE THE INTERNAL REVENUE CODE AND STATE INCOME TAX ACCORD FOR FEDERAL AND STATE TAXES ON REVENUE AND INCOME HAS B	INGLY,	NO PROVISION
PART	XI, LINE 2D - OTHER	ACCOMPANYING FINANCIAL STATEMENTS LOSS ON SALE OF ASSETS 892		
	STMENTS	37.50.50.50.50.50.50.50.50.50.50.50.50.50.		

TAX LOSS IN PARTNERSHIP INVESTMENTS 21,919

INVESTMENTS 314

GAAP/TAX DIFFERENCE DEPRECIATION EXPENSE 7,337 GAAP LOSS IN PARTNERSHIP

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

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

Attach to Form 990

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

OMB No 1545-0047

Employer identification number

2013

DLN: 93493318011054

Open to Public Inspection

MIDWEST HOUSING EQUITY (	GROUP INC					47-0767984	
Part I General Inform	nation on Grants	and Assistance					
<ul><li>Does the organization main the selection criteria used</li><li>Describe in Part IV the organization</li></ul>	to award the grants	orassistance?			ity for the grants or a	ssistance, and	✓ Yes
Part II Grants and Oth Form 990, Part IV		Governments and recipient that receive					d "Yes" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN NATIONAL RED CROSS 601 NORTHEAST 6TH STREET OKLAHOMA CITY, OK 73104	53-0196605	501(C)(3)	5,000				OKLAHOMA TORNADO RELIEF EFFORTS
(2) POLK COUNTY HOUSING TRUST FUND 108 3RD STREET DES MOINES,IA 50309	42-1510879	501(C)(3)	5,700				COMMUNITY EDUCATION CAMPAIGN (\$5,000) AND HOLIDAY DONATION (\$700)
(3) SALVATION ARMY PO BOX 2095 OKLAHOMA CITY,OK 73101	13-2923701	501(C)(3)	5,000				OKLAHOMA TORNADO RELIEF EFFORTS
(4) MIDWEST HOUSING DEVELOPMENT FUND 13520 CALIFORNIA ST OMAHA,NE 68154	84-1686593	501(C)(3)	200,000				GRANT MATCH FOR A CDFI AWARD FROM 2012, USED BY MHDF TO FUND/SUPPORT ITS LOAN PROTFOLIO

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

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

0	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>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Info	ormation. Provide the in	formation required in F	Part I, line 2, Part III, co	lumn (b), and any other a	dditional information.
	xplanation				

Part IV Sup	piementai in	<b>Tormation.</b> Provide the information required in Part 1, line 2, Part 111, Column (b), and any other additional information.
Return Reference		Explanation
PART I, LINE 2	-	THE BOARD OF DIRECTORS APPROVES THE AMOUNT OF FUNDS DESIGNATED FROM THE BUDGET FOR GRANTS TO HELP NON PROFIT
	ŀ	ORGANIZATIONS AND LOW INCOME HOUSING PARTNERSHIPS THE ORGANIZATION'S EXECUTIVE COMMITTEE STAFF ARE RESPONSIBLE
	li l	FOR SELECTING NON PROFITS TO RECEIVE GRANTS

Schedule I (Form 990) 2013

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DLN: 93493318011054

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

## **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Internal Revenue Service Name of the organization MIDWEST HOUSING EQUITY GROUP INC

**Employer identification number** 

47-0767984

Pa	Part I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to 990, Part VII, Section A, line 1a Complete Part III to provide any relevant info			
	First-class or charter travel Housing allowance	or residence for personal use		
		iess use of personal residence		
	☐ Tax idemnification and gross-up payments ☐ Health or social clu	ıb dues or ınıtıatıon fees		
	Discretionary spending account Personal services (	(e g , maid, chauffeur, chef)		
b	<b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written pore reimbursement or provision of all of the expenses described above? If "No," con			
2	Did the organization require substantiation prior to reimbursing or allowing expedirectors, trustees, officers, including the CEO/Executive Director, regarding the			
3	Indicate which, if any, of the following the filing organization used to establish th organization's CEO/Executive Director Check all that apply Do not check any used by a related organization to establish compensation of the CEO/Executive	boxes for methods		
	▼ Compensation committee	t contract		
		vey or study		
	Form 990 of other organizations  Approval by the box	ard or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a or a related organization	with respect to the filing organization		
а	a Receive a severance payment or change-of-control payment?	4a		No
b	<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement	plan? 4b		Νo
C	${f c}$ Participate in, or receive payment from, an equity-based compensation arrangements	ment? 4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amount	s for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5		n pay or accrue any		
а	a The organization?	5a		Νo
b	<b>b</b> Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization compensation contingent on the net earnings of	n pay or accrue any		
а	a The organization?	6a	Yes	
b	<b>b</b> Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization payments not described in lines 5 and 6? If "Yes," describe in Part III	n provide any non-fixed		No
8				
	subject to the initial contract exception described in Regulations section 53 49			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption prosection 53 4958-6(c)?	ocedure described in Regulations		

#### 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-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)JASON MAIN CFO	(i) (ii)	191,521 0	18,125 0	0	17,382 0	8,164 0	235,192 0	0
(2)ANN BURGE COO	(i) (ii)	167,602 0	16,250 0	0	14,859 0	2,361 0	201,072	0 0
(3)BECKY CHRISTOFFERSEN CIO	(i) (ii)	203,604 0	19,375 0	0	18,282	6,080 0	247,341 0	0
(4)PATRICK MICHAELIS VP/BUSINESS DEVELOPMENT OFFICER (CEN	(i) (ii)	136,143 0	16,115 0	0	12,177 0	871 0	165,306 0	0
(5)THOMAS JUDDS FORMER EVP - NE OPERATIONS	(i) (ii)	131,466 0	16,690 0	0	12,319	6,767 0	167,242 0	0
(6)ANDREA FRYMIRE VP/BUSINESS DEVELOPMENT OFFICER (SOU	(i) (ii)	135,544 0	15,625 0	0	12,132 0	1,419 0	164,720 0	0
(7)JOHN WIECHMANN PRESIDENT AND CEO	(i) (ii)	296,970 0	24,062 0	0	20,400 0	7,119 0	348,551 0	0

Schedule J (Form 990) 2013

#### Part III Supplemental Information

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

Return Reference	Explanation
. ,	A BONUS POOL IS IN PLACE AND CALCULATED BASED ON THE NET INCOME OF THE COMPANY THE CALCULATION AND FINAL AMOUNT IS APPROVED BY THE INDEPENDENT BOARD OF DIRECTORS

Schedule J (Form 990) 2013

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DLN: 93493318011054

OMB No 1545-0047

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#### **SCHEDULE 0** (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.

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

Name of the organization MIDWEST HOUSING EQUITY GROUP INC **Employer identification number** 

47-0767984

990 Schedule O, Supplemental Information

Return Reference	Explanation							
FORM 990, PART VI, SECTION B, LINE 11								
FORM 990, PART VI, SECTION B, LINE 12C	ALL TRANSACTIONS THAT COULD BE OF FINANCIAL BENEFIT TO THE ABOVE MENTIONED INDIVIDUALS GO TO AN APPROVAL PROCESS BY INDEPENDENT BOARD MEMBERS AND SUB-COMMITTEES							
FORM 990, PART VI, SECTION B, LINE 15	THE CEO COMPLETES A SELF EVALUATION WHICH IS REVIEWED BY THE INDEPENDENT BOARD MEMBERS TH EY COMPARE DATA FROM A COMPENSATION SURVEY AND REVIEW THE SALARY OF HIS PEERS THERE IS AN EVALUATION PROCESS FOR ALL EMPLOYEES AND THE OVERALL INCREASE IN SALARIES AND BONUSES ARE APPROVED BY THE INDEPENDENT BOARD MEMBERS							
FORM 990, PART VI, SECTION C, LINE 19	MIDWEST HOUSING EQUITY GROUP DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST P OLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC							
FORM 990, PART VI, SECTION A, LINE 1B & FORM 990, PART VII, SECTION A	DURING THE YEAR, AN EMPLOYEE LEFT THE ORGANIZATION AND AS A RESULT, A BOARD MEMBER PERFORM ED THE SERVICES OF THE FORMER EMPLOYEE UNTIL THE POSITION WAS FILLED THE BOARD MEMBER'S C OMPENSATION, \$67,333, IS BEING REPORTED ON FORM 990, PART VII, SECTION A							
FORM 990, PART XII, QUESTION 2C	THE AUDIT PROCESS IS DIRECTED BY THE CHIEF FINANCIAL OFFICER ONCE THE AUDIT IS COMPLETE, THE AUDIT REPORT IS PRESENTED TO THE INVESTMENT COMMITTEE BY THE INDEPENDENT AUDITING FIRM ALL INVESTMENT COMMITTEE MEMBERS HAVE THE OPPORTUNITY TO HAVE ALL QUESTIONS ANSWERED WH EN THE INVESTMENT COMMITTEE IS SATISFIED WITH THE AUDIT REPORT, THE INVESTMENT COMMITTEE R ECOMMENDS TO THE BOARD OF DIRECTORS THAT THE AUDIT REPORT BE APPROVED THIS OVERSIGHT PROC ESS IS COMPLETED PRIOR TO THE ANNUAL MEETING WHEN THE AUDIT IS UP FOR BID, THE INVESTMENT COMMITTEE RECOMMENDS TO THE BOARD WHETHER OR NOT THE EXISTING AUDITING FIRM SHOULD BE RET AINED OR REPLACED							

#### DLN: 93493318011054

## SCHEDULE R (Form 990)

#### **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2013

**Employer identification number** 

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions. ► Information about Schedule R (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

MIDWEST HOUSING EQUITY GROUP INC 47-0767984 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity (1) MHEG 2011 FUND MANAGER LLC RENTAL REAL ESTATE -1,029 -1,315 MIDWEST HOUSING EQUITY GROUP NE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 61-1641223 -647 MIDWEST HOUSING EQUITY GROUP (2) MHEG 2012 FUND MANAGER LLC RENTAL REAL ESTATE NE -493 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 35-2439507 (3) MHEG 2013 FUND MANAGER LLC RENTAL REAL ESTATE NE -76 75 MIDWEST HOUSING EQUITY GROUP 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 37-1714217 Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a)
Name, address, and EIN of related organization (d) (e) (g) Legal domicile (state Primary activity Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (13) controlled (if section 501(c)(3)) entity entity? Yes No

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomii income(re unrelate excluded tax unc sections:	lated, total incoled, from der 512-	( <b>g</b> ) f Share of ne end-of-year assets	(h) Disproprtionate r allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		
					314)			Yes	No		Yes	No	
ditional Data Table												$\Box$	
												$\vdash$	
												$\vdash \vdash$	
												$\sqcup$	
	ed Organizations Taxable e or more related organizati							wered	d "Yes'	" on Form	990,	Part I	.V,
<b>(a)</b> Name, address, and EIN of related organization	( <b>b</b> ) Primary activity	(c) Legal domicile (state or fo			(d) controlling	(e)	(f) Share of total income	(g) Share of end-of year assets		(h) Percent owners	tage	(	(i) ection 512 (b)(13) ontrolled entity?
													es No
		+											
ISTANCE CORP 20 CALIFORNIA ST STE AHA, NE 681545297	RENTAL REAL ESTATE	NE			(	C				100 00	0 %		No
SISTANCE CORP 520 CALIFORNIA ST STE 0 AHA, NE 681545297	RENTAL REAL ESTATE	NE				C				100 00	0 %		No
SISTANCE CORP 20 CALIFORNIA ST STE AHA, NE 681545297	RENTAL REAL ESTATE	NE				C				100 00	0 %	+	NO
SISTANCE CORP 20 CALIFORNIA ST STE AHA, NE 681545297	RENTAL REAL ESTATE	NE				C				100 00	0 %	<u>+</u>	NO
SISTANCE CORP 520 CALIFORNIA ST STE 0 AHA, NE 681545297	RENTAL REAL ESTATE	NE				C				100 00	0 %	  -  -	No
) MIDWEST HOUSING SISTANCE CORP  520 CALIFORNIA ST STE 0 1AHA, NE 681545297 -0773664	RENTAL REAL ESTATE	NE								100 00	0 %		No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule								
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	ated organizations li	sted in Parts II-IV?					
а	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)				1b		No	
c	Gıft, grant, or capıtal contribution from related organization(s)				1c		No	
d	Loans or loan guarantees to or for related organization(s)				1d	Yes		
е	Loans or loan guarantees by related organization(s)				1e		No	
f	Dividends from related organization(s)				1f		No	
g	Sale of assets to related organization(s)				1g		No	
h	Purchase of assets from related organization(s)				1h		No	
i	Exchange of assets with related organization(s)				1i		No	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes		
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No	
o	Sharing of paid employees with related organization(s)				10		No	
р	Reimbursement paid to related organization(s) for expenses				1р		No	
q	Reimbursement paid by related organization(s) for expenses				<b>1</b> q	Yes		
r	O ther transfer of cash or property to related organization(s)				1r		No	
s	Other transfer of cash or property from related organization(s)				1s		No	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete		· · · · · · · · · · · · · · · · · · ·					
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amo	ount II	nvolved		
ee A	Iditional Data Table							

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

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	end-of-year			(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												]	
												$\Box$	
												$\Box$	
	•												

Schedule R (Form 990) 2013

## Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Software ID: Software Version:

**EIN:** 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

Form 990, Schedule R,	Part III - Ident	tificatio	n of Related	Organizatio	ns Taxable as	a Partnership						
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	<b>(g)</b> Share of end-of- year assets	allocati	ortionate ions?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	Mana Parti	eral r aging ner?	<b>(k)</b> Percentage ownership
OKLAHOMA EQUITY FUND		ок	N/A	RELATED	-172	514,387	Yes	<b>No</b> No		<b>Yes</b> Yes	No	0 010 %
I LP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154  33-1115755	ESTATE					·						
OKLAHOMA EQUITY FUND II LP	RENTAL REAL ESTATE	ок	N/A	RELATED	-178	9,475		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5738947												
	RENTAL REAL ESTATE	ок	N/A	RELATED	-134	1,593,792		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-2381043												
	RENTAL REAL ESTATE	ОК	N/A	RELATED	-387	13,838,481		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-5346263 IOWA EQUITY FUND I LP	RENTAL REAL	IA	N/A	RELATED	-42	6,653		No		Yes		0 010 %
	ESTATE		N/A	KLLATED	-42	0,033		NO		1 65		0 010 70
IOWA EQUITY FUND II LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-99	1,152,282		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-0072076												
IOWA EQUITY FUND III LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-126	11,171		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5739095												
IOWA FUND IV LP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154  26-2587462	RENTAL REAL ESTATE	IA	N/A	RELATED	-96	1,362,049		No		Yes		0 010 %
IOWA FUND V LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-142	5,011,008		No		Yes		0 010 %
IOWA FUND VI LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-247	4,481,908		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2174856												
IOWA FUND VII LP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154  27-5100545	RENTAL REAL ESTATE	IA	N/A	RELATED	-173	30,862,604		No		Yes		0 010 %
KANSAS EQUITY FUND I	RENTAL REAL ESTATE	KS	N/A	RELATED	-14	28,233		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 39-2008696												
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	KS	N/A	RELATED	-39	7,856		No		Yes		0 010 %
30-0046363 KANSAS EQUITY FUND III		KS	N/A	RELATED	-115	1,796,260		No		Yes		0 010 %
LP 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	ESTATE											
76-0742787  KANSAS EQUITY FUND IV	RENTAL PEAL	KS	N/A	RELATED	-145	1,164,642		No		Yes		0 010 %
LP 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	ESTATE				173	1,107,072						3 3 1 0 70
26-0105906	I	Ī	I	l		I	l	Ī	I		ı İ	

Form 990, Schedule R,	Part III - Iden	1	n of Related	Organizatio	ns Taxable as	s a Partnership	1	I	l	ſ
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</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) Disproprtionate allocations?  Yes No	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?	ownership
KANSAS EQUITY FUND V LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-67	1,890,716	No No		Yes	0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5608271										
KANSAS FUND VI LP 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	KS	N/A	RELATED	-75	2,014,281	No		Yes	0 010 %
26-1951376  KANSAS FUND VII LP  13520 CALIFORNIA	RENTAL REAL ESTATE	KS	N/A	RELATED	-90	1,479,877	No		Yes	0 010 %
STREET SUITE 250 OMAHA, NE 68154 26-4018301										
KANSAS FUND VIII LP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154  27-2174407	RENTAL REAL ESTATE	KS	N/A	RELATED	-130	3,212,396	No		Yes	0 010 %
KANSAS FUND IX LP  13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	KS	N/A	RELATED	-234	8,929,733	No		Yes	0 010 %
27-5100715 KANSAS FUND X LP  13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	KS	N/A	RELATED	-246	20,706,035	No		Yes	0 010 %
45-4818941  MHEG FUND 40 LP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154 30-0766625	RENTAL REAL ESTATE	NE	N/A	RELATED	-22	84,042,761	No		Yes	0 010 %
	RENTAL REAL ESTATE	NE	N/A	RELATED	-54	17,272,631	No		Yes	0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 61-1706605										
EQUITY FUND OF NEBRASKA VI LP 13520 CALIFORNIA	RENTAL REAL ESTATE	NE	N/A	RELATED	-81	8,503	No		Yes	0 010 %
STREET SUITE 250 OMAHA, NE 68154 43-1808737										
EQUITY FUND OF NEBRASKA VII LP 13520 CALIFORNIA STREET SUITE 250	RENTAL REAL ESTATE	NE	N/A	RELATED	-84	12,191	No		Yes	0 010 %
OMAHA, NE 68154 47-0819366 EQUITY FUND OF	RENTAL REAL	NE	N/A	RELATED	-75	50,275	No		Yes	0 010 %
NEBRASKA VIII LP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154  47-0828532	ESTATE									
EQUITY FUND OF NEBRASKA IX LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-156	-1,126	No		Yes	0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0844673										
EQUITY FUND OF NEBRASKA IX-B LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-9	773	No		Yes	0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0845255										
EQUITY FUND OF NEBRASKA X LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-217	323,352	No		Yes	0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 11-3645080										
EQUITY FUND OF NEBRASKA XI LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-195	975,423	No		Yes	0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 71-0969038										

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

Form 990, Schedule R, I	Part III - Ident 	1	n of Related		ns Taxable as	a Partnership	ı		I	1 6	j)	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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	allocat	prtionate ions?	(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	Ger Mana Part	neral or aging ner?	( <b>k)</b> Percentage ownership
	RENTAL REAL	NE	N/A	RELATED	-250	1,237,216	Yes	No No		Yes Yes	No	0 010 %
NEBRASKA XII LP  13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 03-0607491	ESTATE											
	RENTAL REAL ESTATE	NE	N/A	RELATED	-91	1,259,460		No		Yes		0 010 %
26-2444496 NEBRASKA FUND XIV LP	RENTAL REAL	NE	N/A	RELATED	-127	4,355,785		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-4018401	ESTATE	N.E	1470	MELATED	127	4,333,703						0 010 %
	RENTAL REAL ESTATE	NE	N/A	RELATED	-180	10,181,365		No		Yes		0 010 %
27-2174738  NEBRASKA FUND XVI LP  13520 CALIFORNIA STREET SUITE 250	RENTAL REAL ESTATE	NE	N/A	RELATED	-235	7,405,812		No		Yes		0 010 %
13520 CALIFORNIA STREET SUITE 250	RENTAL REAL ESTATE	NE	N/A	RELATED	-247	21,256,026		No		Yes		0 010 %
OMAHA, NE 68154 45-4757784 NE AFFORDABLE HOUSING	RENTAL REAL	NE	N/A	RELATED	26,896			No		Yes		0 010 %
FUND 1996 LP  13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0795408	ESTATE	NL	N/A	KLLATED	20,090			140		163		0 010 %
PARTNERSHIP #62 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	IA	N/A									
	RENTAL REAL ESTATE	IA	N/A									
	RENTAL REAL ESTATE	IA	N/A									
CEDAR PARK	RENTAL REAL ESTATE	IA	N/A									
20-0401516  DUNLAP ASSISTED LIVING LLC	RENTAL REAL ESTATE	IA	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3738210												
LAMONI ASSISTED LIVING LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	IA	N/A									
20-3738239 LMAAL LLLP	RENTAL REAL ESTATE	IA	N/A									
05-0539068 NORTHPARK APARTMENTS		IA	N/A									
LLLP  13520 CALIFORNIA  STREET SUITE 250  OMAHA, NE 68154  20-1784441	ESTATE											

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) Legal (j) (h) (e) (d) (g) Disproprtionate General or (k) (b) Predominant Direct Share of total Code V-UBI amount Domicile Share of end-Managing allocations? Percentage Name, address, and EIN of Primary activity ncome(related, (State Controlling ıncome of-year assets ın Partner? ownership related organization unrelated, Box 20 of K-1 or Entity excluded from Foreign (Form 1065) tax under Country sections 512-514) Yes No Yes No ODEBOLT ASSISTED RENTAL REAL IΑ N/A LIVING LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3738090 PANORA ASSISTED LIVING RENTAL REAL IΑ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3738136 STONE RIDGE LLLP RENTAL REAL IΑ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3671527 ADEL ASSISTED LIVING LP RENTAL REAL IΑ N/A ESTATE PO BOX 473 SPENCER, IA 51301 20-0326338 PIONEER WOODS LLC RENTAL REAL IΑ N/A FSTATE 921 SIXTH AVE STE B DES MOINES, IA 50309 20-3786543 SPRING VILLAGE RENTAL REAL IΑ N/A APARTMENTS OF IOWA LLC ESTATE 2 E MIFFLIN STREET SUITE 401 MADISON, IA 53703 20-4593874 SPRUCE HILLS VILLAGE LLC RENTAL REAL IΑ N/A ESTATE 2 E MIFFLIN STREET SUITE 401 MADISON, IA 53703 20-4261825 THE ANTLERS LP RENTAL REAL IΑ N/A ESTATE PO BOX 473 SPENCER, IA 51301 20-1888027 BROWN APARTMENTS LP RENTAL REAL N/A ESTATE 5400 KIRKWOOD **BOULEVARD SW** CEDAR RAPIDS, IA 52404 26-1195327 BERRY COURT LIMITED RENTAL REAL IΑ N/A PARTNERSHIP 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5823686 HFS COUNCIL BLUFFS LLC RENTAL REAL IΑ N/A ESTATE 2101 S 42ND STREET OMAHA, NE 68105 20-3781186 RENTAL REAL PARKWILD HEIGHTS LLC IΑ N/A ESTATE 13057 WEST CENTER ROAD OMAHA, NE 68144 20-4909457 RENTAL REAL **BOONE 2 LIMITED** IΑ N/A PARTNERSHIP FSTATE 1909 SYCAMORE AVE PO BOX 456 GRANGER, IA 50109 20-4882105 CHAPEL RIDGE WEST I LP RENTAL REAL IΑ N/A ESTATE 319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766414 COMMUNITY HOMES LP RENTAL REAL IΑ N/A ESTATE PO BOX 473 SPENCER, IA 51301 20-5859839

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (e) General Legal (g) Predominant Disproprtionate (k) (b) (a) Domicile Direct Share of total Share of end-Code V-UBI amount or allocations? Percentage Name, address, and EIN of Primary activity income(related Managing (State Controlling ıncome of-year assets ın ownership unrelated, related organization or Entity Box 20 of K-1 Partner? excluded from Foreign (Form 1065) tax under Country sections 512-514) Yes No Yes No SANCTUARY TRANSITIONAL RENTAL REAL N/A TΔ HOUSING I LLLP ESTATE 800 5TH ST SIOUX CITY, IA 51101 20-3796692 ST MARY'S APARTMENTS OF RENTAL REAL IΑ N/A DUBUQUE LLC 2 EAST MIFFLIN STREET SUITE 401 MADISON, IA 53703 26-0472283 STOCKBRIDGE LP RENTAL REAL IΑ N/A ESTATE 1620 PLEASANT STREET DES MOINES, IA 50314 20-5829617 NORTHWOODS LIMITED RENTAL REAL IΑ N/A PARTNERSHIP 1 ESTATE 1600 UNIVERSITY AVENUE STE 212 ST PAUL, MN 55104 20-1743309 CANTERBURY IV LIMITED RENTAL REAL N/A PARTNERSHIP ESTATE 319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766417 DEER RIDGE VI LP RENTAL REAL IΑ N/A ESTATE 319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766416 GRANT TERRACE LLLP RENTAL REAL N/A ESTATE PO BOX 473 SPENCER, IA 51301 20-3773650 RENTAL REAL N/A HOME TO STAY LP TΑ lestate PO BOX 473 SPENCER, IA 51301 20-3746904 LINCOLN TERRACE LP RENTAL REAL IΑ N/A ESTATE PO BOX 473 SPENCER, IA 51301 20-1845755 WILLOW BEND II LIMITED RENTAL REAL N/A IΑ PARTNERSHIP ESTATE 319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766415 OLD SPENCER SCHOOL LLLP RENTAL REAL IΑ N/A ESTATE PO BOX 473 SPENCER, IA 51301 26-1232442 WILLOW BEND I LIMITED RENTAL REAL IΑ N/A PARTNERSHIP ESTATE 319 7TH STREET SUITE 500 DES MOINES, IA 50309 20-5817680 CHAPEL RIDGE WEST II LP RENTAL REAL N/A IΑ ESTATE 319 7TH STREET SUITE 500 DES MOINES, IA 50309 26-3465397 ANISTON VILLAGE LP RENTAL REAL IΑ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 42-1508090 RENTAL REAL MIK BRICKSTONE IΑ N/A DEVELOPMENT LP IESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3542783

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile allocations? Managing Percentage Name, address, and EIN of Primary activity income(related, Controlling income (State of-year assets ın ownership Partner? unrelated, related organization Box 20 of K-1 Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No 821 JACKSON LLLP RENTAL REAL IΑ N/A ESTATE 520 NEBRASKA ST SUITE 233 SIOUX CITY, IA 51101 26-3580347 RENTAL REAL CRESTVIEW TERRACE LLLP IΑ N/A ESTATE PO BOX 473 SPENCER, IA 51301 26-1232468 HOLIDAY COURT LLLP RENTAL REAL IΑ N/A ESTATE 211 E 37TH STREET DAVENPORT, IA 52806 26-3035382 SUGAR CREEK BEND LLLP RENTAL REAL N/A ESTATE PO BOX 473 SPENCER, IA 51301 27-0529358 MLK BRICKSTONE II LP RENTAL REAL IΑ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1814624 WALKER CORNERS LLC RENTAL REAL IΑ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1260184 RENTAL REAL 125 9TH STREET LLLP N/A IΑ ESTATE 14 WEST 21ST STREET-PO BOX 473 SPENCER, IA 51301 27-2092627 RENTAL REAL BAKER CREEK SENIOR IΑ N/A LIVING I LLLP ESTATE **4224 HUBBELL AVENUE** DES MOINES, IA 50317 27-5317473 RENTAL REAL FB HARLAN LP N/A IΑ ESTATE 8201 NW 97TH TERRACE KANSAS CITY, IA 64153 14-2009063 MCKINLEY CREST LLLP RENTAL REAL IΑ N/A **ESTATE** 2024 FOREST AVENUE SUITE 101 DES MOINES, IA 50311 45-4411713 SOUTHERN MEADOWS RENTAL REAL IΑ N/A HOMES LP ESTATE 1312 LOCUST STREET SUITE 300A DES MOINES, IA 50309 45-4350525 WEST HEIGHTS RENTAL REAL IΑ N/A TOWNHOMES LLLP ESTATE 14 WEST 21ST STREET-PO BOX 473 SPENCER, IA 51301 27-4945254 RENTAL REAL ESKRIDGE HOUSING I LP N/A **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1233794 NORTHVIEW VILLAGE RENTAL REAL N/A APARTMENTS LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1209143 PRAIRIE VILLAS LP RENTAL REAL KS N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1245938

Form 990, Schedule R, Pa	art III - Identifi		of Related Or	ganizations	Taxable as a	Partnership			I	ı	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections	(f) Share of total Income		<b>(h)</b> Disproj allocat	ortionate	Gene	agıng	<b>(k)</b> Percentage ownership
	RENTAL REAL	KS	N/A	512-514)			Yes	No	Yes	No	
TOWNHOMES LLC  13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 01-0714018	ESTATE										
EASTSIDE TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1225181											
	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 31-1814890											
	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 68-0555810											
NORTHGLENN APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 87-0700265											
T TOWN HOMES LP	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1251259											
TROY HOUSING INVESTORS	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 81-0550593											
AMO HOUSING I LP	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1251559											
	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 42-1619270											
GLENN OAKS CITY CENTRE LP	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 90-0188716											
IVORY STREET	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1492768											
KOURI PLACE LLC	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-0099657											
MAPLEWOOD TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-0497417											
MEADO WVIEW PLACE LLC	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-0233266											
NORTHFIELD VILLAGE LP	RENTAL REAL ESTATE	KS	N/A								
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 68-0571598											
				'		'				'	

Form 990, Schedule R, Pa	art III - Identifi		of Related Or	ganizations <sup>*</sup>	Taxable as a	Partnership			ı	ı		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	<b>(f)</b> Share of total Income	(g) Share of end- of-year assets	(h) Dispropallocati	ortionate	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	(j Gene Mana Part	ral or aging ner?	<b>(k)</b> Percentage ownership
PARADISE PLAZA I LLC	RENTAL REAL	KS	N/A				res	NO		res	INO	
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1677639	ESTATE											
	RENTAL REAL ESTATE	KS	N/A									
2909 SW PLASS COURT TOPEKA, KS 66611 20-0059806												
RUSSELL HOUSING LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	KS	N/A									
	RENTAL REAL	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	ESTATE											
73-1717296 SIX UNITS LP	RENTAL REAL	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0934801	ESTATE											
WALNUT COURT APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 86-1070207												
	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-0233169												
	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 57-1138881												
	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-4807530	ESTATE											
	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3583386												
	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-2780457												
	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1619531												
FRIENDSHIP PLACE I LLC	RENTAL REAL ESTATE	KS	N/A									
600 WEST BLANCHARD AVENUE SOUTH HUTCHINSON, KS 67505												
20-4694152 GARDEN AT FLINT HILLS LP		KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3006177	ESTATE											
GODDARD SENIOR	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3006604												
										,		

Form 990, Schedule R, Pa	art III - Identifi		of Related Or	ganizations ]	Taxable as a	Partnership			I	ı		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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	allocat	ortionate ons?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	Gene Mana Part		<b>(k)</b> Percentage ownership
PARADISE PLAZA II LLC	RENTAL REAL	KS	N/A	512-514)			Yes	No		Yes	No	
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3473277	ESTATE											
STREET OF DREAMS LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-4840240												
TIERRA VERDE APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-4798645												
WALNUT CREEK APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1492271												
WALNUT GLENN APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3466770												
WEST CREST LLC	RENTAL REAL ESTATE	KS	N/A									
2501 NORTH TEE TIME CIRCLE WICHITA, KS 67205 20-1286400	LSTATE											
RURAL HOUSING AND DEVELOPMENT LP	RENTAL REAL ESTATE	KS	N/A									
PO BOX 5900 FORT SMITH, KS 72913 65-1205822												
CHERRY CREEK TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-4694250												
CREEKSIDE PLACE	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5913377	ESTATE											
FHI APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-8501575												
RICHMOND PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0240681												
MERIDEN HEIGHTS LLC	RENTAL REAL ESTATE	KS	N/A									
1000 SE HANCOCK STREET TOPEKA, KS 66607 20-8254192	DENTAL DEAL	l/c	NI (A									
SUNRISE RIDGE TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0532956												
STONEPOST PARTNERS LLC	RENTAL REAL ESTATE	KS	N/A									
7500 COLLEGE BLVD STE 500 OVERLAND PARK, KS 66210 20-5868538												
	RENTAL REAL ESTATE	KS	N/A									
7500 COLLEGE BLVD STE 500 OVERLAND PARK, KS 66210 20-8119009												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) Legal (d) (f) (i) General (g) (k) Disproprtionate (b) Predominant Code V-UBI amount Share of total or Domicile Direct Share of end-Name, address, and EIN of Primary activity income(related, allocations? Percentage Managing of-year assets (State Controlling ıncome unrelated, ownership related organization Box 20 of K-1 Entity Partner? or excluded from Foreign (Form 1065) tax under Country sections 512-514) Yes Yes No No MDI LIMITED PARTNERSHIP RENTAL REAL KS N/A #104 ESTATE 1600 UNIVERSITY AVENUE STE 212 ST PAUL, MN 55104 20-3290291 PRAIRIE POINTE RENTAL REAL N/A KS TOWNHOMES LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0480825 CHEYENNE RIDGE LLC RENTAL REAL N/A IESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3278617 FLOR DE SOL PARTNERS LLC RENTAL REAL KS N/A ESTATE 7500 COLLEGE BLVD STE OVERLAND PARK, KS 66210 26-0633223 BF III LP RENTAL REAL KS N/A IESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3164260 SANDSTONE HOMES ILLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-8287866 STONEPOST PARTNERS II RENTAL REAL N/A ESTATE 2850 MISSION WOODS DR TOPEKA, KS 66614 26-3380572 MCKINLEY HOUSING LLC RENTAL REAL N/A KS ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3881063 LARNED DREAM HOMES LLC RENTAL REAL N/A ESTATE 417 BROADWAY STREET LARNED, KS 67550 27-0278961 RENTAL REAL N/A COVENTRY COURT KS TOWNHOMES II LLC ESTATE **501 EAST NORTHVIEW** ROAD PO BOX 843 MCPHERSON, KS 67460 26-2867341 CORNERSTONE RENTAL REAL N/A IESTATE APARTMENTS LP 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3408436 **EMPORIA SENIOR** RENTAL REAL KS N/A RESIDENCES LP ESTATE 7701 E KELLOGG SUITE 820 WICHITA, KS 67207 27-1165456 RENTAL REAL N/A FLOR DE SOL PARTNERS II KS ESTATE 534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 26-3942869 RENTAL REAL PIONEER ADAMS II LP N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3086688 10TH STREET APARTMENTS RENTAL REAL N/A LLC IESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-3369758

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (g) (i) Disproprtionate General or (k) Predominant (a) (b) Domicile Direct Share of total Share of end-Code V-UBI amount Percentage allocations? Managing Name, address, and EIN of Primary activity ncome(related  ${\sf Controlling}$ (State ıncome of-year assets ın ownership Partner? related organization unrelated, Box 20 of K-1 Entity excluded from (Form 1065) Foreian tax under Country) sections 512-514) Yes Yes No No ECHO RIDGE LLC RENTAL REAL KS N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-3254493 RENTAL REAL N/A GENESIS HOMES LLC KS ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 80-0667381 RENTAL REAL HEARTHSTONE LLC KS N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2389519 MARYSVILLE SENIOR RENTAL REAL KS N/A HOUSING LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1885130 TENNESSEE TOWN II LLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1185202 LCHT ACCESSIBLE RENTAL REAL KS N/A HOUSING LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-3399238 HAMPTON WEST LLC RENTAL REAL KS N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-3101834 LA ESTANCIA PARTNERS RENTAL REAL KS N/A ESTATE 534 SOUTH KANSAS **AVENUE SUITE 900 TOPEKA, KS 66603** 27-3522454 RENTAL REAL MARKET STREET LOFTS LP KS N/A ESTATE 8109 NW HILLSIDE DRIVE WEATHERBY LAKE, KS 64152 27-3629179 STONEPOST PARTNERS III RENTAL REAL KS N/A ESTATE 534 SOUTH KANSAS **AVENUE SUITE 900** TOPEKA, KS 66603 27-3489267 STATE STREET HOUSING RENTAL REAL KS N/A ESTATE LLC 8109 NW HILLSIDE DRIVE WEATHERBY LAKE, KS 64152 27-3160956 MURRAY HILL SENIOR RENTAL REAL KS N/A APARTMENTS LP ESTATE 8201 NW 97TH TERRACE KANSAS CITY, KS 64153 27-3629283 FLOR DE SOL III LLC RENTAL REAL N/A ESTATE 534 S KANSAS AVE SUITE 900 TOPEKA, KS 66603 27-4280085 HUMBOLDT SENIOR RENTAL REAL KS N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-4527775 HERITAGE HAWTHORNE RENTAL REAL KS N/A PARTNERS ESTATE 534 S KANSAS AVE SUITE TOPEKA, KS 66603 27-4896333

Form 990, Schedule R, P	art III - Identifi		of Related Or	ganizations '	Taxable as a	Partnership	ı		1	1	ı	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income		allocat	ortionate ions?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	Part	ral or aging ner?	(k) Percentage ownership
PAOLA SENIORS LP	RENTAL REAL	KS	N/A	312 314)			Yes	No		Yes	No	
5000 W 95TH STREET SUITE 120 PRAIRIE VILLAGE, KS 66207 45-4329369	ESTATE											
RIVERVIEW SENIOR DEVELOPERS LP	RENTAL REAL ESTATE	KS	N/A									
22 E ROCKWOOD DRIVE OTTAWA, KS 660673722 46-1213352												
	RENTAL REAL ESTATE	KS	N/A									
8201 NW 97TH TERRACE KANSAS CITY, KS 64153 90-0435859												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 91-1867793												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 39-1947390												
EAST MEADOWS SENIOR	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0814890												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0821967												
L & S HOUSING LP  13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154	RENTAL REAL ESTATE	NE	N/A									
47-0815661 MEADOWVIEW ESTATES LP	RENTAL REAL	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 91-1859025	ESTATE											
OMAHA CROWN LP II	RENTAL REAL ESTATE	NE	N/A									
540 S 27TH ST OMAHA, NE 68105 47-0813255												
CENTRAL PARK TOWER APTS LP	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0814091												
KELLOM EAST LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
2221 NORTH 24TH STREET OMAHA, NE 68110 47-0806902												
	RENTAL REAL ESTATE	NE	N/A									
2221 NORTH 24TH STREET OMAHA, NE 68102 47-0817472												
1234 SOUTH 13TH STREET LLC	RENTAL REAL ESTATE	NE	N/A									
540 S 27TH ST OMAHA, NE 68105 47-0822990												
	RENTAL REAL ESTATE	NE	N/A									
540 S 27TH ST OMAHA, NE 68105 47-0823333												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Domicile Direct Share of total Share of end-Code V-UBI amount Percentage allocations? Managing Name, address, and EIN of Primary activity ncome(related, Controlling income (State of-year assets ın Partner? ownership related organization unrelated, Entity Box 20 of K-1 excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No AUBURN HOUSING RENTAL REAL ΝE N/A PARTNERS LP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 43-1829642 BADER NORTH RENTAL REAL N/A APARTMENTS LP **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0825797 GRANT HOUSING I LIMITED RENTAL REAL N/A PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0820871 LAP HOUSING JONNA RENTAL REAL ΝE N/A COURT LP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0823958 RENTAL REAL OSCEOLA-SHELBY N/A **HOUSING I LP** ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0822573 SOMERS POINT RENTAL REAL ΝE N/A APARTMENTS LLC **ESTATE** 13520 CALIFORNIA STREET SUITE 250 **OMAHA, NE 68154** 47-0819649 RENTAL REAL ST JAMES MANOR LP ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0819602 SUNSET CROWN I LIMITED RENTAL REAL N/A ΝE PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0823641 TILDEN HOUSING I RENTAL REAL N/A LIMITED PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0814796 VALLEY VIEW TOWNHOMES RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0821502 405 WEST BROADWAY LLC RENTAL REAL ΝE N/A STATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 39-2011010 BARRIER FREE HOMES LLC RENTAL REAL ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0835356 BEATRICE SUNSET II LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0838041 KOUTNZE PARK CROWN III RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0837312 MEADOWS ASSOCIATES RENTAL REAL N/A LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 **OMAHA, NE 68154** 47-0797779

Form 990, Schedule R, P	art III - Identifi	cation	of Related O	rganizations	Taxable as a	Partnership				_		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income		allocati	ortionate ions?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	Part	ral or aging ner?	<b>(k)</b> Percentage ownership
PARK VIEW PLAZA CONGREGATE LP	RENTAL REAL ESTATE	NE	N/A	312-314)			Yes	No		Yes	No	
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154												
47-0832163 PINE ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0835281												
PRAIRIE WOODS CROWN LTD	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0842332												
THE CENTER APARTMENTS LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0805769												
THE VILLAS AT CRYSTAL COURT LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0834890												
WOODGATE TOWNHOMES LP	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0841279												
KELLOM GARDENS LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
2221 NORTH 24TH STREET OMAHA, NE 68110 47-0837446												
RIVER CITY LP PO BOX 473 14 WEST 21ST	RENTAL REAL ESTATE	IA	N/A									
ST SPENCER, IA 51301												
42-1527377 3525 EVANS STREET LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0840879												
710 SOUTH 20TH STREET LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0837624												
ALBION MANOR LLC  13520 CALIFORNIA STREET	RENTAL REAL ESTATE	NE	N/A									
SUITE 250 OMAHA, NE 68154												
47-0843815 BLUE TERRACE CROWN LTD	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 75-3045097												
CIRRUS HOUSE APARTMENTS LP	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 46-0479865												
IMMANUEL ELDERLY HOUSING I LP	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0830746												
KING'S HERITAGE ESTATES I LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 48-1260879												
	-	-					-	•		-	. '	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile Percentage allocations? Managing Name, address, and EIN of Primary activity ncome(related, Controlling income (State of-year assets ın ownership Partner? related organization unrelated, Box 20 of K-1 Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No LAP HOUSING WAHOO RENTAL REAL ΝE N/A LIMITED PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0817516 OAK RIDGE APARTMENTS RENTAL REAL N/A **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 75-3044323 RENTAL REAL PARENTS OF ALL AGES LP ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0835605 SOMERS POINT RENTAL REAL ΝE N/A APARTMENTS II LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0892836 RENTAL REAL SOUTHWOOD CROWN LP ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 68-0496443 RENTAL REAL THE VILLAGE AT ΝE N/A HEARTLAND PARK LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0843816 THE VILLAS AT CRYSTAL RENTAL REAL N/A ESTATE COURT II LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 75-3044320 FULLWOOD SQUARE RENTAL REAL ΝE N/A APARTMENTS LIMITED ESTATE PARTNERSHIP 1701 N 24TH ST STE 102 OMAHA, NE 68110 47-0842565 KELLOM VILLA LIMITED RENTAL REAL ΝE N/A PARTNERSHIP ESTATE 2221 NORTH 24TH STREET OMAHA, NE 68110 47-0839869 RENTAL REAL CASTLE ON THE HILL LLC ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 39-2034832 COURTHOUSE VILLA LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1179264 HILLSIDE CROWN LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET OMAHA, NE 68154 20-0868640 KING'S HERITAGE ESTATES RENTAL REAL ΝE N/A II LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 03-0458253 LEO VAUGHAN MANOR LP RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 11-3722438 LIVESTOCK EXCHANGE RENTAL REAL ΝE N/A BUILDING LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 43-2005184

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile Percentage lallocations? Managing Name, address, and EIN of Primary activity income(related, Controlling (State ıncome of-year assets ın ownership Partner? related organization unrelated, Box 20 of K-1 Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No SARATOGA CROWN IV LP RENTAL REAL ΝE N/A STATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-0239468 STREHLOW HOUSING RENTAL REAL ΝE N/A PARTNERS LP ESTATE 540 S 27TH ST OMAHA, NE 68105 84-1651669 RENTAL REAL THUNDER WAY LP ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1760070 VALACIA NORTH VILLA LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 **OMAHA, NE 68154** 27-0092010 WEST PARK TOWNHOMES RENTAL REAL N/A ΝE ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 74-3123188 RENTAL REAL YORK PLACE CROWN LTD N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-1672559 GI VENTURE LP RENTAL REAL N/A ESTATE 13057 WEST CENTER ROAD OMAHA, NE 68144 20-1470744 RENTAL REAL **RALSTON HOUSE** ΝE N/A ASSOCIATES LLC ESTATE 13057 WEST CENTER ROAD OMAHA, NE 68144 37-1477744 VILLA DE SANTE I LIMITED RENTAL REAL N/A PARTNERSHIP ESTATE 2221 NORTH 24TH STREET OMAHA, NE 68110 90-0001641 APPLE RIVER CROWN LLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-2523225 RENTAL REAL GOLDENROD VILLAGE LLC ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3278935 GREAT WEST TOWNHOMES RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3991280 JAMES TINSLEY VILLAS LLC RENTAL REAL N/A **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5290310 KEYSTONE CROWN I LP RENTAL REAL N/A ESTATE 540 S 27TH ST OMAHA, NE 68105 16-1635419 NORTH OMAHA RENTAL REAL ΝE N/A AFFORDABLE HOMES LP ESTATE 540 S 27TH ST OMAHA, NE 68105 20-3415915

Form 990, Schedule R, P	art III - Identifi		of Related Oi	ganizations	Taxable as a	Partnership	ı		ı	1		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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	allocati	ortionate ons?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	Gene Mana Part	aging ner?	<b>(k)</b> Percentage ownership
NORTH OMAHA CROWN V LP	RENTAL REAL ESTATE	NE	N/A	512-514)			Yes	No		Yes	No	
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 83-0436367	ESTATE											
SUTTON HORSESHOE BEND VILLAS LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-3537402												
TERRACE HEIGHTS VILLAGE II LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 84-1688521												
THE NATHAN LP  13520 CALIFORNIA STREET	RENTAL REAL ESTATE	NE	N/A									
SUITE 250 OMAHA, NE 68154 20-2536126	DENTAL DEAL	NE	NI /A									
WEST WING APARTMENTS LP	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-4901469												
5217 SOUTH 28TH STREET LLC	RENTAL REAL ESTATE	NE	N/A									
2723 Q STREET OMAHA, NE 68107 20-3145069												
VILLAGE PLACE 1 LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
1701 NORTH 24TH ST SUITE 102 OMAHA, NE 68110 20-5197001												
VILLE DE SANTE II LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
2221 NORTH 24TH STREET SUITE 200 OMAHA, NE 68110 20-3533854												
CURTIS CENTER HOUSING LP	ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5708223												
SOUTHEAST VILLA LLC  13520 CALIFORNIA STREET	RENTAL REAL ESTATE	NE	N/A									
SUITE 250 OMAHA, NE 68154 20-8622939												
VALLEY CROWN LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5170773												
WOODLAND PARK TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-8197688												
YORKTOWNE ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-8197598												
WINDRIDGE TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0541952												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0576269												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile Percentage allocations? Managing Name, address, and EIN of Primary activity income(related, Controlling (State ıncome of-year assets ın ownership Partner? related organization unrelated, Box 20 of K-1 Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No RED BUD CROWN LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET **SUITE 250** OMAHA, NE 68154 20-5946536 LITTLE PRIEST RENTAL REAL ΝE N/A APARTMENTS LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-1777133 ROSEWOOD ESTATES LLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-1803399 ROYAL OAKS ESTATES LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0762832 GRETNA CROWN LLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-1901751 SUNRISE EAST LLC RENTAL REAL ΝE N/A FSTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-2086462 COUNTRY CLOVER CROWN RENTAL REAL N/A **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-2168070 HELP THE HOMELESS OF RENTAL REAL ΝE N/A THE METRO LLC ESTATE 2828 N 23RD STREET EAST OMAHA, NE 68110 20-5584346 NO CROWN VI LIMITED RENTAL REAL ΝE N/A PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0831147 FONTENELLE COTTAGES RENTAL REAL ΝE N/A LIMITED PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0830593 DAWSON ESTATES LP RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3560185 VILLE DE SANTE III RENTAL REAL ΝE N/A LIMITED PARTNERSHIP ESTATE 2221 NORTH 24TH STREET OMAHA, NE 68110 26-2766741 WINDRIDGE TOWNHOMES II RENTAL REAL N/A IESTATE 13520 CALIFORNIA STREET **SUITE 250** OMAHA, NE 68154 26-3937677 WOODLAND PARK RENTAL REAL ΝE N/A TOWNHOMES II LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3913113 CROWN VII LP RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 80-0280008

Form 990, Schedule R, Pa	art III - Identifi	1	f Related Or	ganizations 1	Taxable as a	Partnership	ı		1	1	1	
(a) Name, address, and EIN of related organization	<b>(b)</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		allocat	ortionate ions?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	Mana Part	eral r aging ner?	<b>(k)</b> Percentage ownership
CARDINAL ESTATES LLC	RENTAL REAL	NE	N/A				Yes	No		Yes	No	
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-0762767	ESTATE											
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3913625												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3913156												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3937725												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-0763367												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1029899												
REBUILDING LIVES LLC	RENTAL REAL	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-2997332	ESTATE											
DIXIE GARDENS LP	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1061371												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1061457												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-0371887												
	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1263029												
MOSIAC RESIDENTIAL	RENTAL REAL ESTATE	NE	N/A									
LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154												
27-1695051	RENTAL REAL	NE	N/A									
	ESTATE	INE	IN/A									
SHANNON HEIGHTS LLC	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2337175												
VILLAGE AT HEARTLAND	RENTAL REAL ESTATE	NE	N/A									
13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2232245												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile lallocations? Managing Percentage Name, address, and EIN of Primary activity income(related, Controlling income (State of-year assets ın Partner? ownership unrelated, related organization Box 20 of K-1 Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No MILLARD SENIOR HOUSING RENTAL REAL ΝE N/A 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2787815 LEXINGTON ESTATES LP RENTAL REAL N/A STATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2207004 SUNRISE LANE LLC RENTAL REAL N/A **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2274391 SIXTEENTH STREET RENTAL REAL ΝE N/A LIMITED PARTNERSHIP ESTATE 2221 N 24TH STREET OMAHA, NE 68110 20-5421205 LUKE ESTATES LP RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-2346135 STONEWOOD TOWNHOMES RENTAL REAL N/A 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-1205288 ST PAUL COTTAGES LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-1437758 RENTAL REAL WILDERNESS FALLS LLC ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-4849619 CIRRUS SOUTH BEND LP RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-2931187 GTMC LLC RENTAL REAL ΝE N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-2404983 SOUTHWOOD ESTATES LLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-2231206 NORTH OMAHA SENIOR RENTAL REAL ΝE N/A COTTAGES LP **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-4464309 CYPRESS POINTE LLC RENTAL REAL N/A ESTATE 3801 VERMASS PLACE LINCOLN, NE 68502 45-4794848 JACKSON MEADOWS LP RENTAL REAL N/A ESTATE 908 1ST AVENUE AURORA, NE 68818 37-1666774 CITY IMPACT HOMES LLC RENTAL REAL N/A ESTATE 8551 LEXINGTON AVENUE LINCOLN, NE 68505 45-4798601

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) (b) Predominant (a) Domicile Direct Share of total Share of end-Code V-UBI amount Percentage allocations? Managing Name, address, and EIN of Primary activity ncome(related, Controlling (State ıncome of-year assets ın ownership Partner? unrelated, related organization Entity Box 20 of K-1 excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No FAIR DEAL LP RENTAL REAL ΝE N/A ESTATE 2221 N 24TH STREET OMAHA, NE 68110 45-4056336 SOUTHGATE APARTMENTS RENTAL REAL ΝE N/A BELLEVUE LP **ESTATE** 16910 FRANCES STREET **STE 200** OMAHA, NE 68130 35-2432369 STONEWOOD TOWNHOMES RENTAL REAL ΝE N/A ESTATE 2604 26TH AVENUE CENTRAL CITY, NE 68826 45-5606892 OMAHA CROWN LP I RENTAL REAL ΝE N/A ESTATE 540 S 27TH ST OMAHA, NE 68105 47-0801758 PROGRESS FOR PEOPLE LLC RENTAL REAL N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0795220 SECURITIES BUILDING RENTAL REAL ΝE N/A LIMITED PARTNERSHIP ESTATE 540 S 27TH ST OMAHA, NE 68105 47-0795209 26TH STREET LIMITED RENTAL REAL ΝE N/A **PARTNERSHIP** ESTATE 2221 NORTH 24TH STREET OMAHA, NE 68110 47-0795531 BETHPHAGE RESIDENTIAL RENTAL REAL N/A SERVICES LP **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 47-0805544 RENTAL REAL CHARMED-PERKINS N/A ОΚ AFFORDABLE HOUSING ESTATE PARTNERS LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5096477 CHICKASHA SENIOR RENTAL REAL N/A LIMITED PARTNERSHIP ESTATE 13520 CALIFORNIA STREET SUITE 250 **OMAHA, NE 68154** 20-2370359 RENTAL REAL N/A QUAIL RIDGE HOMES LLC ОК STATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 59-3797991 RENTAL REAL PARKLAND TOWN HOMES ОΚ N/A AFFORDABLE LLC ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-155/203 SAIL ASSOCIATES LLC RENTAL REAL N/A IESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-0680515 BROADWAY POINTE RENTAL REAL N/A APARTMENTS ESTATE 2813 NW 122ND OKLAHOMA CITY, OK 73120 20-1055550 STROUD COMMUNITY RENTAL REAL ОΚ N/A **HOUSING LP** ESTATE 1401 S MAIN ST SUITE A STILLWATER, OK 740745836 26-1078824

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile Percentage allocations? Managing Name, address, and EIN of Primary activity ncome(related, Controlling income (State of-year assets ın Partner? ownership related organization unrelated, Box 20 of K-1 Entity excluded from (Form 1065) Foreian tax under Country sections 512-514) Yes Yes No No VALLIANT VILLAGE RENTAL REAL ОК N/A APARTMENTS LP ESTATE 2537 N HIGHWAY 81 **DUNCAN, OK 73533** 20-2557716 GRAND PRAIRIF RENTAL REAL N/A ОК APARTMENTS LP ESTATE 2537 N HIGHWAY 81 **DUNCAN, OK 73533** 20-1681071 IDABEL PIONEER VILLAGE RENTAL REAL ОΚ N/A ESTATE 2537 N HIGHWAY 81 **DUNCAN, OK 73533** 27-0099471 WESTLAWN GARDENS LP1 RENTAL REAL ОΚ N/A ESTATE 2400 GENERAL PERSHING BLVD OKLAHOMA CITY, OK 73107 26-0420981 CHECOTAH VILLAGE APTS RENTAL REAL N/A ESTATE LIMITED PTRN 2537 NORTH HIGHWAY 81 **DUNCAN, OK 73533** 20-2557635 RENTAL REAL WILBURTON VILLAGE LP N/A ESTATE 2537 N HIGHWAY 81 **DUNCAN, OK 73533** 27-0099468 RENTAL REAL COTTAGE PARK LP 2 ОΚ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 23-1339001 RENTAL REAL COTTAGE PARK LP 1 ОΚ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 20-5129779 CHARMED-PERKINS RENTAL REAL N/A ОΚ AFFORDABLE HOUSING ESTATE PARTNERS II LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 26-3797392 HICKORY RIDGE RENTAL REAL ОΚ N/A MCALESTER LLC ESTATE 111 EAST BROADWAY **SUITE 1250** SALT LAKE CITY, OK 84111 26-1547913 EUFAULA AFFORDABLE RENTAL REAL ОК N/A HOUSING PARTNERS LP **ESTATE** 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 14-1983401 MOUNT OLIVE LIMITED RENTAL REAL N/A **ESTATE** PARTNERSHIP 3900 N MARTIN LUTHER KING JR AVE OKLAHOMA CITY, OK 73111 26-1400008 URBAN LEAGUE CAPITOL RENTAL REAL ОΚ N/A SQUARE LP ESTATE 3900 N MARTIN LUTHER KING AVE OKLAHOMA CITY, OK 73111 26-1776170 WOODSON PARK RENTAL REAL ОΚ N/A APARTMENTS LTD ESTATE 2813 NW 122ND OKLAHOMA CITY, OK 73120 20-3932744 SKIATOOK RETIREMENT RENTAL REAL N/A COMMUNITY LIMITED ESTATE PARTNERSHIP 115 N BROADWAY INOLA, OK 74036 20-5607765

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) Predominant (a) (b) Direct Share of total Share of end-Code V-UBI amount Domicile Percentage allocations? Managing Name, address, and EIN of Primary activity income(related, Controlling income (State of-year assets ın ownership Partner? unrelated, related organization Box 20 of K-1 Entity excluded from (Form 1065) Foreign tax under Country sections 512-514) Yes Yes No No LEGENDS AT HICKORY RENTAL REAL ОК N/A ESTATE RIDGE II LP 20 EAST 9TH STREET SHAWNEE, OK 74801 27-0250606 SMITH FARM ESTATE LLC RENTAL REAL N/A ОК ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1234324 RENTAL REAL STONEBROOK VILLAS LLC ОΚ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-1324435 STONEBROOK ESTATES LLC RENTAL REAL ОΚ N/A ESTATE 13520 CALIFORNIA STREET SUITE 250 **OMAHA, NE 68154** 27-1324774 ARDMORE AFFORDABLE RENTAL REAL ОΚ N/A HOUSING LP ESTATE 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 27-0287120 HOLDENVILLE OAKRIDGE RENTAL REAL N/A COMMUNITY II LP ESTATE 20 EAST 9TH STREET SHAWNEE, OK 74801 27-1331253 MADILL AFFORDABLE RENTAL REAL N/A **ESTATE** HOUSING LLC 13520 CALIFORNIA STREET SUITE 250 OMAHA, NE 68154 45-1785091 RENTAL REAL AUTUMN CREEK VILLAS LP ОΚ N/A ESTATE 1401 S MAIN ST STILLWATER, OK 74074 45-2066377 HRM III LP RENTAL REAL N/A ESTATE 20 EAST 9TH STREET SHAWNEE, OK 74801 45-3865300 HUGO AFFORDABLE RENTAL REAL N/A ОΚ HOUSING LLC ESTATE 600 S WASHINGTON ARDMORE, OK 73401 45-5385551 RENTAL REAL LINDEN WOODS II LP N/A ОΚ ESTATE 20 EAST 9TH STREET SHAWNEE, OK 74801 45-3865159 MANNFORD SENIOR RENTAL REAL ОΚ N/A LIMITED PARTNERSHIP ESTATE 301 FARROW DRIVE MANNFORD, OK 74044 27-5318217 SOUTH ROCK CREEK RENTAL REAL ОК N/A ESTATES LLC ESTATE 8551 LEXINGTON AVENUE LINCOLN, OK 68505 45-3838751 RENTAL REAL COFFEYVILLE GARDEN N/A APARTMENTS LLC ESTATE 2145 NORTH TOPEKA WICHITA, KS 67214 39-2073831 CORRIDOR WOODS RENTAL REAL IΑ N/A LIMITED PARTNERSHIP ESTATE 1700 S FIRST AVE STE 25B IOWA CITY, IA 522404501 27-5170816

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (j) (e) Legal (d) (g) (i) Disproprtionate General or (k) (b) Predominant (a) Domicile Direct Share of total Share of end-Code V-UBI amount Name, address, and EIN of allocations? Managing Percentage Primary activity income(related, (State Controllingıncome of-year assets ın Partner? ownership unrelated, related organization Box 20 of K-1 Entity excluded from Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No DES MOINES GREYSTONE RENTAL REAL N/A IΑ **HOMES LP** ESTATE 1312 LOCUST ST 300A DES MOINES, IA 50309 27-5091568 FRONTIER HOUSING LLC RENTAL REAL KS N/A ESTATE 400 S BROADWAY STREET WICHITA, KS 67202 45-4152907 HERITAGE ESTATES LLC RENTAL REAL KS N/A ESTATE 400 S BROADWAY STREET WICHITA, KS 67202 45-4153069 HERITAGE TOWNHOMES OF RENTAL REAL N/A KS SMITH CENTER LLC 219 S MAIN ST SMITH CENTER, KS 66967 45-5218865 10TH STREET TOWNHOMES RENTAL REAL IΑ N/A 2401 BROADWAY AVENUE SUITE 4 SLAYTON, MN 56172 46-1503289 2723 Q STREET LLC RENTAL REAL N/A ΝE ESTATE 2723 Q ST OMAHA, NE 68107 36-3363994 RENTAL REAL N/A APPLE RIDGE SENIORS LP ОΚ ESTATE 3785 ASH CIRCLE SALT LAKE CITY, UT 84109 35-2479635 ARK RIVER NORTH LLC RENTAL REAL KS N/A ESTATE 1313 STONE GREAT BEND, KS 67530 46-3364474 RENTAL REAL BEDFORD PLACE LLC KS N/A **ESTATE** 1313 STONE ST GREAT BEND, KS 67530 45-5629819 BSSR LP RENTAL REAL KS N/A ESTATE 1712 E 123RD ST OLATHE, KS 66061 46-3512338 CALLYN HEIGHTS RENTAL REAL МΟ N/A APARTMENTS LP ESTATE 900 E LAHARPE KIRKSVILLE, MO 63501 36-4752772 CHAMBROOKE HOMES OF RENTAL REAL ΟK N/A ARDMORE LLC **ESTATE** 600 S WASHINGTON STREET ARDMORE, OK 73401 46-1514242 RENTAL REAL N/A CHI MILFORD LLLP IΑ **ESTATE** 14 WEST 21ST ST SPENCER, IA 51301 32-0394563 COTTAGE PARK LP RENTAL REAL ΝE N/A **ESTATE** 1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-2807222 DUNCAN AFFORDABLE RENTAL REAL N/A HOUSING LLC ESTATE 600 S WASHINGTON STREET ARDMORE, OK 73401 35-2446741

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (e) Disproprtionate Code V-UBI amount Legal (d) (f) (g) General (k) (b) Predominant Share of total Domicile Direct Share of end-Name, address, and EIN of Primary activity ncome(related Percentage ControllingManaging (State ıncome of-year assets ownership related organization unrelated, Partner? Box 20 of K-1 Entity or excluded from Foreign (Form 1065) tax under Country sections 512-514) Yes Yes No No **HEATHER ESTATES LP** RENTAL REAL ΝE N/A **ESTATE** 1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-2819158 HICKORY HEIGHTS LLC RENTAL REAL KS N/A ESTATE 2107 INDUSTRIAL DRIVE MCPHERSON, KS 67460 46-3696319 HILLTOP I LIMITED RENTAL REAL N/A IΑ PARTNERSHIP ESTATE 319 SEVENTH STREET DES MOINES, IA 50309 35-2461044 HOUSE TO HOME RENTAL REAL KS N/A RIVERVIEWESCALADE LLC ESTATE 2 SOUTH 14TH ST KANSAS CITY, KS 66102 46-3364608 RENTAL REAL JACKSON HEIGHTS SD N/A APARTMENTS LIMITED ESTATE PARTNERSHIP 310 S ROOSEVELT ABERDEEN, SD 57401 45-4293901 LA ESTANCIA PARTNERS II LLC RENTAL REAL KS N/A 534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 90-0846697 LEGEND OAKS II LLC RENTAL REAL ΝE N/A ESTATE 2604 26TH AVENUE CENTRAL CITY, NE 68826 46-3363896 MILL FARM PARTNERS LLC RENTAL REAL N/A IΑ ESTATE 534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 61-1674660 MONUMENT VIEW VILLA LLC RENTAL REAL ΝE N/A ESTATE 89-A WOODLEY PARK RD GERING, NE 69341 45-4490800 NORTH OMAHA SENIOR RENTAL REAL ΝE N/A **COTTAGES LIMITED ESTATE** PARTNERSHIP PHASE II 3014 NORTH 45TH STREET OMAHA, NE 68104 32-0363688 OPG MAPLEWOOD PARTNERS RENTAL REAL ΤX N/A 534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 38-3914570 PRAIRIE TRAILS PARTNERS II RENTAL REAL N/A 534 S KANSAS AVENUE SUITE 900 **TOPEKA, KS 66603** 46-2958592 RIVER ROAD TOWNHOMES LLC RENTAL REAL ΝE N/A ESTATE 5404 N 107TH PLZ OMAHA, NE 68134 46-3364313 ROLLING HILLS ESTATE AN RENTAL REAL N/A ARKANSAS LIMITED ESTATE PARTNERSHIP 612 EAST CANAL STREET PARAGOULD, AR 72450 46-1645381 SCENIC POINTE LP RENTAL REAL KS N/A ESTATE 103 SOUTH 4TH STREET MANHATTAN, KS 66505 46-1142239

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

Form 990, Schedule K, Pa	art 111 - 10eutili	cation o	r kelated Or	ganizations	i axable as a	Partnersnip			•			
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	( <b>d)</b> Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income		allocati	ortionate ons?	(i) Code V-UBI amount In Box 20 of K-1 (Form 1065)	<b>(j</b> Gene Mana Part	ral or iging ner?	(k) Percentage ownership
				312-314)			Yes	No		Yes	No	
	RENTAL REAL ESTATE	ок	N/A									
	RENTAL REAL	IA	N/A									
	ESTATE											
WEBSTER GROVES LP  1525 E REPUBLIC ROAD SUITE B100 SPRINGFIELD, MO 65804 46-1847238	RENTAL REAL ESTATE	МО	N/A									
	RENTAL REAL ESTATE	NE	N/A									

Form 990, Schedule R, Part V - Transactions With Related Organizations			
(a) Name of other organization	( <b>b</b> ) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
WYANDOTTE ASSOCIATES	D	85,864	_
NEBRASKA FUND XVI LP	L	100,000	
IOWA FUND VII LP	L	384,386	
KANSAS FUND X LP	L	523,913	
NEBRASKA FUND XVII LP	L	240,320	
OKLAHOMA FUND IV LP	L	204,985	
MHEG FUND 40 LP	L	6,143,512	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493318011054 OMB No 1545-0172 Depreciation and Amortization (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** FORM 990 PAGE 10 Name(s) shown on return MIDWEST HOUSING EQUITY GROUP INC 47-0767984 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 . . . . . 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . • 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 10.331 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · 40.632 If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ΜМ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life See Add'l Data S/L **b** 12-year 12 yrs S/L **c** 40-year 40 yrs MMS/L Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 22 here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 60,195

23 For assets shown above and placed in service during the current year, enter the

23

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

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

Section A—Depre	ciation a	<u>nd Other I</u>	<u>nforma</u>	tion (C	aution	: See	the i	<u>instruc</u>	tions i	for lin	nits i	or pa	isseng	er au	tomol	oiles. <b>)</b>
<b>24a</b> Do y ou hav e ev ider	nce to support	the business/in	vestment ι	ıse claıme	d? <b>F</b> Yes	Гио		2	<b>4b</b> If "Y	es," is t	the ev	ıdence	written?	Гүе	s F N	0
(a) Type of property (list vehicles first)	<b>(b)</b> Date placed in service	Date placed in investment Cost o		(e) Basis for depreciation (business/investment use only)				(f) Recover period	<b>(g)</b> ry Method/ Convention			(h) Depreciation/ deduction			(i) Elected section 179 cost	
<b>25</b> Special depreciation allo 50% in a qualified busi	•		erty placed	in service (	during the	tax year	and u	ısed mor	e than	25						
6 Property used more	e than 50%	ın a qualıfıed	business	use						-	•			<u> </u>		
		%														
		%									+					
<b>7</b> Property used 50%	orless in a		siness us	<u> </u>	<u>I</u>			l			<u> </u>					
, ,		%							S/L -							
		%							S/L - S/L -		-					
<b>28</b> Add amounts in co	ı olumn (h), lır		jh 27 En	ter here	and on lii	ne 21,	page	1	28							
<b>29</b> Add amounts in c	olumn (ı), lın	e 26 Enterh	ere and c	n line 7,	page 1								29			
		Se	ction B	—Infor	mation	on U	se d	of Vel	icles				·			
omplete this section														a uahir	los	
you provided vehicles to					a)		пеес а <b>b)</b>	Пехсер	(c)	этгріеці <u>.</u>	ig triis (C		_	e)		f)
<b>30</b> Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)			Vehi		Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		Vehicle 6			
<b>31</b> Total commuting (	mıles drıven	during the ye	ear .													
<b>32</b> Total other persor	nal(noncomn	nuting) miles	drıven							$\neg$						
33 Total miles driven	during the y	ear Add line	s 30													
34 Was the vehicle a	vailable for p	ersonal use	•	Yes	No	Yes	No	Yes	s N	lo 1	es/	No	Yes	No	Yes	No
during off-duty ho																
<b>35</b> Was the vehicle u owner or related p	sed primarily	y by a more t	han 5%													
<b>36</b> Is another vehicle		r personal us	se? .													
Section	on C—Que	stions for	Emplo	yers W	ho Pro	vide \	Vehi	cles 1	or Us	e by	The	ir Er	nploy	ees		
nswer these questio % owners or related				eption to	comple	tıng Se	ction	B for v	ehicles	sused	by e	mploy	ees wh	o are	not mo	re thar
<b>37</b> Do you maintain a employees?	written poli	y statement	that prof	nibits all	personal • •	use of	vehi •	cles, ın	cluding	comn	nutın 	g, by '	your	Y	es	No
<b>20</b> D			*6-*				h l -							-		
<b>38</b> Do you maintain a employees? See t												your •				
<b>39</b> Do you treat all us	se of vehicle	s by employe	es as pe	rsonal us	e?											
<b>40</b> Do you provide movehicles, and reta				oyees, o	btaın ınfo	ormatio	n froi	m your	employ	ees al	bout	the us	se of			
, <b>41</b> Do you meet the r				automobi	le demor	nstratio	n us	e? (See	ınstru	ctions	) .					
Note: If your answ	ver to 37, 38	, 39, 40, or 4	l1 ıs "Ye	s," do no	t comple	te Sect	tion E	3 for the	cover	ed veh	nicles	5				
	rtization	· · ·			· ·											
(a) (b) Date Description of costs amortization begins		(c) A mortizable			(	Code I		(e) A mortization period or				( <b>f</b> ) rtızatı	<b>(f)</b> ızatıon for			
		1		amount			S 6	ection		ercenta		I this			ar	
<b>42</b> A mortization of co	sts that beg	ııns durıng yo	ur 2013	tax year	(see ins	truction	ns)									
<b>43</b> Amortization of co	sts that beg	an before yo	ur 2013 1	tax year						. [	43					
44 Total Add amoun	ts in column	(f) See the i	nstructio	ns for wh	ere to re	nort					44					

## **Additional Data**

Software ID: Software Version:

**EIN:** 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

Form 4562, Part III, Line 20a - c, Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System :

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g)Depreciation deduction
<b>20a</b> Class life		25,000	5 0	HY	S/L	2,500
<b>20a</b> Class life		52,266	5 0	HY	S/L	5,227
<b>a</b> Class life		7,100	3 0	HY	S/L	1,183
<b>a</b> Class life		2,186	5 0	HY	S/L	219
<b>a</b> Class life		1,391	20 0	HY	S/L	35
<b>a</b> Class life		1,225	9 0	HY	S/L	68