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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

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 www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2013

B Check if applicable
- [x] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization
BRIDGE HOUSING VENTURESINC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
600 CALIFORNIA STREET NO 900

City or town, state or province, country, and ZIP or foreign postal code
SAN FRANCISCO, CA 94108

D Employer identification number
94-3147882

E Telephone number
(415) 989-1111

G Gross receipts $ 2,355,406

F Name and address of principal officer
CYNTHIA PARKER
600 CALIFORNIA STREET NO 900
SAN FRANCISCO, CA 94108

H(a) Is this a group return for subordinates? [ ] Yes [x] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status [x] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ N/A

K Form of organization [x] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation 1991

M State of legal domicile CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
SUCCESSFULLY PROVIDED AFFORDABLE HOUSING BY PROVIDING ASSET MANAGEMENT SERVICES AND SERVING AS THE GENERAL PARTNER CONTINUED TO SUPPLY SUPPORT TO BRIDGE HOUSING CORPORATION BRIDGE HOUSING CORPORATION CREATES HIGH-QUALITY, AFFORDABLE HOMES FOR WORKING FAMILIES AND SENIORS WITH OVER 14,000 HOMES PLACED IN SERVICE AND OVER 4,900 UNITS CURRENTLY IN PROGRESS, BRIDGE IS AMONG THE LARGEST AFFORDABLE HOUSING DEVELOPERS IN CALIFORNIA BRIDGE BUILDS A RANGE OF HOUSING TYPES THAT NOT ONLY FIT COMFORTABLY INTO THEIR SURROUNDINGS BUT ALSO ACT AS THE CATALYST FOR REVITALIZING AND STRENGTHENING NEIGHBORHOODS

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

Activities & Governance

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	6
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	0
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	**5**	0
6	Total number of volunteers (estimate if necessary)	**6**	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	2,320	2,082,746
	9 Program service revenue (Part VIII, line 2g)	125,838	153,070
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	118,467	119,590
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	344	0
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	246,969	2,355,406
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,567,100	102,350
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	935,244	1,118,335
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,502,344	1,220,685
	19 Revenue less expenses Subtract line 18 from line 12	-2,255,375	1,134,721

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	4,409,284	5,070,984
	21 Total liabilities (Part X, line 26)	4,164,761	3,691,740
	22 Net assets or fund balances Subtract line 21 from line 20	244,523	1,379,244

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** | 2014-11-10
Signature of officer | Date

D KEMP VALENTINE CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
ALEXIS H WONG				P00604756

Firm's name ▶ LINDQUIST VON HUSEN & JOYCE LLP | Firm's EIN ▶ 94-1250261

Firm's address ▶ 90 NEW MONTGOMERY STREET 11TH FLOOR
SAN FRANCISCO, CA 94105 | Phone no (415) 957-9999

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☐

1 Briefly describe the organization's mission

TO PROVIDE LOW INCOME HOUSING BY ACTING AS GENERAL PARTNER OR LIMITED PARTNER

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 1,218,885 including grants of $ 102,350) (Revenue $ 153,070)

THE ORGANIZATION IS THE GENERAL PARTNER OR LIMITED PARTNER OF SEVERAL PARTNERSHIPS THAT PROVIDES LOW INCOME HOUSING AND LAND OWNER

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses** ▶ 1,218,885

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or 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? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants 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? *If "Yes," complete Schedule J*	**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? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**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**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *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**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**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? *If "Yes," complete Schedule R, Part 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**	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		No
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? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . . ☐

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

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 . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a**	6		
	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	**1b**	0		
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				
a	The governing body?	**8a**		Yes	
b	Each committee with authority to act on behalf of the governing body?	**8b**		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	**9**			No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ CA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶ THE ORGANIZATION 600 CALIFORNIA STREET NO 900
SAN FRANCISCO, CA 94108 (415) 989-1111

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . ☐

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CYNTHIA PARKER PRESIDENT	1 00 39 00	X		X				0	449,322	55,092
(2) SUSAN M JOHNSON VICE PRESIDENT/SECRETARY	2 50 37 50	X		X				0	254,005	30,471
(3) D KEMP VALENTINE VICE PRESIDENT/CFO	2 50 37 50	X		X				0	242,278	46,333
(4) REBECCA HLEBASKO VICE PRESIDENT	2 50 37 50	X		X				0	232,540	144,494
(5) KIMBERLY A MCKAY VICE PRESIDENT	1 00 39 00	X		X				0	248,332	43,481
(6) TOM EARLEY VICE PRESIDENT	1 00 39 00	X		X				0	224,058	41,217

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b **Sub-Total** . . . . . ▶										
c **Total from continuation sheets to Part VII, Section A** . . . . ▶										
d **Total (add lines 1b and 1c)** . . . . . ▶								0	1,650,535	361,088

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶0

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d	15,954			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,066,792			
	g	Noncash contributions included in lines 1a-1f $		2,066,792			
	h	**Total.** Add lines 1a-1f . . . . . ▶		2,082,746			
Program Service Revenue			Business Code				
	2a	MANAGEMENT FEES	531390	153,070	153,070		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . . ▶		153,070			
	3	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		119,590			119,590
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . . ▶					
			(i) Real	(ii) Personal			
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . . ▶					
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss) . . . . . ▶					
Other Revenue	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . ▶					
	12	**Total revenue.** See Instructions . . . . . ▶		2,355,406	153,070	0	119,590

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	102,350	102,350		
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				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	1,800		1,800	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties . .				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	75,265	75,265		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a LOSS FROM PARTNERSHIP	812,849	812,849		
b ASSET MANAGEMENT FEES	153,070	153,070		
c BAD DEBT EXPENSE	75,266	75,266		
d OTHER TAXES AND FEES	85	85		
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	1,220,685	1,218,885	1,800	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . . ☑

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	576,275	1	8,049
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	263,195	4	131,272
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	2,111,468	7	2,845,077
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	14,059
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 533,899			
	b	Less accumulated depreciation — 10b:	533,899	10c	533,899
	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	534,950
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	924,447	15	1,003,678
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	4,409,284	16	5,070,984
Liabilities	17	Accounts payable and accrued expenses	3,474,332	17	226,761
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		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	690,429	25	3,464,979
	26	**Total liabilities.** Add lines 17 through 25	4,164,761	26	3,691,740
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	244,523	27	1,379,244
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	244,523	33	1,379,244
	34	Total liabilities and net assets/fund balances	4,409,284	34	5,070,984

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,355,406
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,220,685
3	Revenue less expenses Subtract line 2 from line 1	3	1,134,721
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	244,523
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,379,244

Part 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 reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		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		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
11 ☑ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
a ☑ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated
e ☑ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? **11g(i)**		No
(ii) A family member of a person described in (i) above? **11g(ii)**		No
(iii) A 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		No

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) BRIDGE HOUSING CORPORATION	942827909	7	Yes						1,218,885
Total									1,218,885

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2012 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—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 ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** 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	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

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

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

b Assets included in Form 990, Part X ▶ $ _____

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

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

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

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

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

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Temporarily restricted endowment ▶

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

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

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		533,899		533,899
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				533,899

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) INVESTMENT IN PARTNERSHIPS	534,950	C
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶	534,950	

Part IX **Other Assets.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) CONSTRUCTION IN PROCESS	1,003,678
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	1,003,678

Part X **Other Liabilities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
NOTES PAYABLE	125,000
INTEREST PAYABLE	12,297
RELATED PARTY PAYABLE	3,327,682
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	3,464,979

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2	BRIDGE AND AFFILIATES BELIEVE THAT THEY HAVE APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DO NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS BRIDGE AND AFFILIATES' FEDERAL AND STATE INCOME TAX RETURNS FOR THE YEARS 2009 THROUGH 2012 ARE SUBJECT TO EXAMINATION BY REGULATORY AGENCIES, GENERALLY FOR THREE YEARS AND FOUR YEARS AFTER THEY WERE FILED FOR FEDERAL AND STATE, RESPECTIVELY

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990**

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BRIDGE HOUSING CORPORATION 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO,CA 94108	94-2827909	501(C)(3)	102,350				TO SUPPORT THE AFFILIATE IN PROVIDING AFFORDABLE HOUSING

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

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

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

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE ORGANIZATION MONITORS THE GRANTS TO AFFILIATED ORGANIZATIONS TO ENSURE THAT THE GRANTS ARE USED FOR ITS EXEMPT PURPOSE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**
▶ **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.**

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
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 pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)CYNTHIA PARKER PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	330,422	105,000	13,900	25,525	29,567	504,414	0
(2)SUSAN M JOHNSON VICE PRESIDENT/SECRETARY	(i)	0	0	0	0	0	0	0
	(ii)	204,725	47,038	2,242	12,271	18,200	284,476	0
(3)D KEMP VALENTINE VICE PRESIDENT/CFO	(i)	0	0	0	0	0	0	0
	(ii)	194,910	46,828	540	12,216	34,117	288,611	0
(4)REBECCA HLEBASKO VICE PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	207,741	21,807	2,992	30,925	113,569	377,034	0
(5)KIMBERLY A MCKAY VICE PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	210,098	37,337	897	12,864	30,617	291,813	0
(6)TOM EARLEY VICE PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	181,198	42,500	360	11,100	30,117	265,275	0

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded				
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (PRTNSHP INT)	X	1	2,066,792	BOOK BASIS
26	Other ▶(_____)				
27	Other ▶(_____)				
28	Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 | 0

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		No
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b	If "Yes," describe in Part II		
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

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

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	ANY DIRECTOR OR OFFICER WHO HAS A FINANCIAL INTEREST, DIRECTLY OR INDIRECTLY, MUST DISCLOS E IT BEFORE A CONSIDERATION OR VOTE OF THE TRANSACTION IS MADE BY THE BOARD OF DIRECTORS THE PERSON THAT HAS THE CONFLICT IS RESPONSIBLE FOR RECUSING THEMSELVES FROM THE DISCUSSIO N AND VOTE. THE BOARD OF DIRECTORS MINUTES REFLECT SUCH DISCUSSIONS. EACH YEAR THE DIRECTO RS AND OFFICERS SIGN A STATEMENT TO DENOTE IF CONFLICTS EXISTED DURING THE YEAR. IF SUCH A CONFLICT EXISTED, THE DIRECTOR OR OFFICER DISCLOSES THE NATURE OF THE CONFLICT. THE ORGAN IZATION ALSO DOES PERIODIC REVIEWS TO ENSURE COMPENSATION IS REASONABLE AND GOODS AND SERV ICES RECEIVED ARE AT ARMS LENGTH AND CONFORM WITH INTERNAL POLICIES
FORM 990, PART VI, SECTION B, LINE 15	PROPOSED COMPENSATION IS PRESENTED TO THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS OF BRIDGE HOUSING CORPORATION. THE PROPOSAL INCLUDES COMPARABLE DATA FROM INDEPENDENT SOU RCES. THE COMMITTEE THEN APPROVES OR DISCUSSES ALTERNATIVES TO THE PROPOSAL
FORM 990, PART VI, SECTION C, LINE 19	THE DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT BEEN CHANGED FROM PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493314024754

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BRIDGE HOUSING VENTURESINC

Employer identification number
94-3147882

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

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

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" 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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
See Additional Data Table							

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No
(1) BRIDGE INFILL DEVELOPMENT INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3390449	DEVELOPS URBAN INFILL DEVELOPMENTS	CA	N/A	C					No
(2) BRIDGE PROPERTIES INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-2986189	PROPERTY MANGEMENT PROVIDER	CA	N/A	C					No
(3) PACIFIC HOME CONNECTION 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-2704465	PROVIDER OF HOME OWNERSHIP SERVICES AND MORTGAGE ASSISTANCE PROGRAMS	CA	N/A	C					No
(4) BRIDGE COMMUNITY DEVELOPMENT INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-2410096	COMMUNITY DEVELOPMENT	CA	N/A	C					No
(5) CHESTNUT LINDEN INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 40-0002561	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	N/A	C					No

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

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e 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
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	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)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r	Yes	
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 this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

(a) Name, address, and EIN of entity	(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	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 94-3147882
Name: BRIDGE HOUSING VENTURESINC

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(1) 16TH STREET STATION LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-3864910	LOW-INCOME HOUSING	CA			BRIDGE ECONOMIC DEVELOPMENT CORPORATION
(1) 474 NATOMA LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 68-0657579	LOW-INCOME HOUSING	CA			BRIDGE HOMES INC
(2) ALAMEDA HOUSING LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3227594	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA			MCB FAMILY HOUSING INC
(3) ARMSTRONG TOWNHOMES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 75-3236154	LOW-INCOME HOUSING	CA			BRIDGE HOMES INC
(4) ASH STREET DEVELOPMENT LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-4989760	LOW-INCOME HOUSING	CA			NORTHPOINT HOUSING INC
(5) AVEVISTA ASSOCIATES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108	LOW-INCOME HOUSING	CA			MCB FAMILY HOUSING INC
(6) BERRY STREET LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 87-0812903	LOW-INCOME HOUSING	CA			BRIDGE HOMES INC
(7) BRIDGE NORCAL LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-3249497	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA			MCB FAMILY HOUSING INC
(8) BRIDGE SC LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-3714598	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA			BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA
(9) BRIDGE TOWER LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 37-1513008	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA			NORTHPOINT HOUSING INC
(10) BRIDGE TRIANGLE LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3122110	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA			BRIDGE NORCAL DEVELOPMENT INC
(11) BRIDGE-POTRERO COMMUNITY ASSOCIATES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-4277086	LOW-INCOME HOUSING	CA			BRIDGE REGIONAL PARTNERS INC
(12) BROADWAY UPPER TOWER LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-1399060	LOW-INCOME HOUSING	CA			BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA
(13) BUILD EQUITY INVESTMENTS (SOUTH BERNARDO) LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-2417808	DEVELOPS URBAN INFILL DEVELOPMENTS	CA			BRIDGE URBAN INFILL LAND DEVELOPMENT LLC
(14) BUILD EQUITY INVESTMENTS (TRI-CITY II) LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 51-0580894	DEVELOPS URBAN INFILL DEVELOPMENTS	CA			BRIDGE URBAN INFILL LAND DEVELOPMENT LLC
(15) BUILD EQUITY INVESTMENTS MACARTHUR TRANSIT COMMUNITY LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108	DEVELOPS URBAN INFILL DEVELOPMENTS	CA			BRIDGE ECONOMIC DEVELOPMENT CORPORATION
(16) BUILD WEST OAKLAND LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 48-1288883	DEVELOPS URBAN INFILL DEVELOPMENTS	CA			BRIDGE URBAN INFILL LAND DEVELOPMENT LLC
(17) FOOTHILL FARMS SENIOR LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-5013296	LOW-INCOME HOUSING	CA			MCB FAMILY HOUSING INC
(18) HARBOUR WAY LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-0620147	LOW-INCOME HOUSING	CA			WINFIELD HILL INC
(19) HOMEBRICKS NSP LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-1714466	PURCHASES FORECLOSED HOMES IN DISTRESSED AREAS TO REHABILITATE AND SELL	CA			HOMEBRICKS INC

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
(21) MACARTHUR TRANSIT COMMUNITY PARTNERS LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 83-0403220	LOW-INCOME HOUSING	CA			BRIDGE ECONOMIC DEVELOPMENT CORPORATION
(1) MANDELA GATEWAY COMMERCIAL LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 68-0533499	LOW-INCOME HOUSING	CA			BRIDGE ECONOMIC DEVELOPMENT CORPORATION
(2) MANDELA GATEWAY TOWNHOMES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3227592	LOW-INCOME HOUSING	CA			BRIDGE HOMES INC
(3) PICKLEWEED HOUSING ASSOCIATES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3830830	LOW-INCOME HOUSING	CA			ALTO STATION INC
(4) POTTERY COURT LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-4981227	LOW-INCOME HOUSING	CA			BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA
(5) SUMMERHOUSE HOUSING LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108	LOW-INCOME HOUSING	CA			BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA
(6) SUSANNE B WILSON LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-4234564	LOW-INCOME HOUSING	CA	0	0	BRIDGE HOUSING VENTURES INC
(7) TOBRIA TERRACE LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-0637092	LOW-INCOME HOUSING	CA			BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA
(8) WINFIELD HILL LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-1164754	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA			WINFIELD HILL INC

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(1) ALTO STATION INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3152631	OWNER & OPERATOR OF AFFORDABLE HOUSING PROPERTY	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(1) BAY AREA SENIOR SERVICES INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3008774	OPERATOR OF SENIOR ASSISTED LIVING FACILITY	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(2) BLP PARTNERSHIP INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 31-1811761	OWNER & OPERATOR OF SENIOR ASSISTED LIVING FACILITY	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(3) BOMH INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3282930	OWNER & OPERATOR OF AFFORDABLE HOUSING PROPERTY	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(4) BRIDGE BISSELL CORP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3149477	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP (CURRENTLY NO PARTNERSHIPS	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(5) BRIDGE ECONOMIC DEVELOPMENT CORPORATION 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3149476	DEVELOPER, GENERAL PARTNER, AND COMMERCIAL PROPERTY OWNER AND OPERATOR	CA	501(C)(4)	N/A	BRIDGE HOUSING CORPORATION		No
(6) BRIDGE HOMES INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3227592	DEVELOPER OF AFFORDABLE OWNERSHIP HOUSING PROJECTS	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(7) BRIDGE HOUSING ACQUISITIONS INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3175634	OWNER OF MIXED USE AND AFFORDABLE HOUSING COMPLEXES	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(8) BRIDGE HOUSING CORP - SOUTHERN CALIFORNIA 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3233154	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(9) BRIDGE HOUSING CORPORATION 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-2827909	DEVELPR OF AFFRDBLE HSG, G P & CO-G P OF AFFRDBLE HSNG, AND LAND OWNER	CA	501(C)(3)	LINE 7	BRIDGE HOUSING CORPORATION		No
(10) BRIDGE PROPERTY MANAGEMENT COMPANY 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3063990	PROPERTY MANGEMENT PROVIDER OF AFFORDABLE HOUSING	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(11) BRIDGE REGIONAL PARTNERS INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3187094	OWNER OF LAND AND OPERATOR OF PROPERTY	CA	501(C)(3)	LINE 9	BRIDGE HOUSING CORPORATION		No
(12) BRIDGE SUPPORT CORPORATION 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-1501314	SUPPORT CORPORATION TO BRIDGE HOUSING CORPORATION	CA	501(C)(3)	LINE 11B, II	BRIDGE HOUSING CORPORATION		No
(13) BRIDGE TERRAZA INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3211275	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(14) BRIDGE THIRD STREET INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3130270	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 9	BRIDGE HOUSING CORPORATION		No
(15) BRIDGE WEST OAKLAND HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3261561	OWNER & OPERATOR OF AFFORDABLE HOUSING PROPERTY	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(16) BRISBANE SENIOR HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3323102	OWNER & OPERATOR OF AFFORDABLE HOUSING PROPERTY	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(17) CALISTOGA BRANNAN HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3167786	GENERAL PARTNER AND LIMITED PARTNER OF AFFORDABLE HOUSING PARTNERSHIPS	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(18) CHESTNUT CREEK INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3360307	OWNER & OPERATOR OF HUD SECTION 202 PROPERTY	CA	501(C)(3)	LINE 9	BRIDGE HOUSING CORPORATION		No
(19) CHURCH STREET HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3349372	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
(21) COGGINS SQUARE INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3294187	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(1) DANVILLE SENIOR HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 91-2148404	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(2) BROADWAY TOWER INC (FORMERLY EMERY BRIDGE INC) 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3130269	FORMER GENERAL PARTNER OF HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(3) EMERYVILLE SENIOR HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3107670	OWNER & OPERATOR OF HUD SECTION 202 PROPERTY	CA	501(C)(3)	LINE 9	BRIDGE HOUSING CORPORATION		No
(4) FELL STREET HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3153378	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(5) HERCULES SENIOR HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3262543	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(6) HOMEBRICKS INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 59-3795727	PRVDR OF HOME OWNERSHIP SRVCS AND MORTG ASSISTANCE PRGS FOR LOW INC FAMILIES	CA	501(C)(3)	LINE 11B, II	BRIDGE HOUSING CORPORATION		No
(7) BRIDGE NORCAL DEVELOPMENT INC (FORMERLY HOTEL DON INC) 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3122110	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP (CURRENTLY NO PARTNERSHIPS	CA	501(C)(3)	LINE 9	BRIDGE HOUSING CORPORATION		No
(8) HUNT AVENUE INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3119469	GENERAL PARTNER AND LIMITED PARTNER OF AFFORDABLE HOUSING PARTNERSHIPS	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(9) MCB FAMILY HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3227594	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(10) METRO SENIOR HOMES INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3213337	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(11) MILPITAS HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3253389	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(12) NAIROBI HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3331051	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(13) NORTH BEACH HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 82-0563916	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP (CURRENTLY NO PARTNERSHIPS	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(14) NORTHPOINT HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3287293	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(15) NORTHSIDE SENIOR HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3315757	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(16) OHLONE HOUSING CORPORATION 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3232360	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(17) REDWOOD SHORES SENIOR HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3190749	OWNER & OPERATOR OF HUD SECTION 202 PROPERTY	CA	501(C)(3)	LINE 7	BRIDGE HOUSING CORPORATION		No
(18) ROBERTS AVENUE INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3375010	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(19) ROTARY VALLEY INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3244788	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(41) SAN MARCOS FAMILY HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3265633	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(1) SILVERADO CREEK HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3376086	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(2) SITE K INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3132902	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(3) STROBRIDGE HOUSING INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3229530	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(4) WESTPARK HOUSING CORP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3154096	GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP (CURRENTLY NO PARTNERSHIPS	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(5) WINFIELD HILL INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3152859	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No
(6) BRIDGE NORTHWEST DEVELOPMENT INC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-2490091	CONTROLLING GENERAL PARTNER OF AFFORDABLE HOUSING PARTNERSHIP	CA	501(C)(3)	LINE 11A, I	BRIDGE HOUSING CORPORATION		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
14TH ST ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 56-2569711	LOW-INCOME HOUSING	CA	N/A									
25 ESSEX LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-3566841	LOW-INCOME HOUSING	CA	N/A									
ALAMEDA HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-4289796	LOW-INCOME HOUSING	CA	N/A									
AREA F-1 HSG ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 90-0150206	LOW-INCOME HOUSING	CA	N/A									
ARMSTRONG PLACE ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 68-0653328	LOW-INCOME HOUSING	CA	N/A									
AVEVISTA ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3850099	LOW-INCOME HOUSING	CA	N/A									
BCDI SUBSIDIARY CDE I LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-1063540	PROVIDE COMMUNITY LENDING FOR AFFORDABLE HOUSING	CA	N/A									
BCDI SUBSIDIARY CDE II LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-1063836	PROVIDE COMMUNITY LENDING FOR AFFORDABLE HOUSING	CA	N/A									
BCDI SUBSIDIARY CDE III LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-1064050	PROVIDE COMMUNITY LENDING FOR AFFORDABLE HOUSING	CA	N/A									
BCDI SUBSIDIARY CDE IV LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-1064267	PROVIDE COMMUNITY LENDING FOR AFFORDABLE HOUSING	CA	N/A									
BHC SAGE PARK LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-1527957	LOW-INCOME HOUSING	CA	N/A									
BRIDGE GRAYSON CREEK ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3389039	LOW-INCOME HOUSING	CA	N/A									
BRIDGE TRIANGLE ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 80-0874681	LOW-INCOME HOUSING	CA	N/A									
BRIDGE URBAN INFILL LAND DEVELOPMENT LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3391691	DEVELOPS URBAN INFILL DEVELOPMENTS	CA	N/A									
BROADWAY TOWER ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-0772994	LOW-INCOME HOUSING	CA	N/A									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
BROADWAY UPPER TOWER ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-5626742	LOW-INCOME HOUSING	CA	N/A									
CALISTOGA BRANNAN HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3167785	LOW-INCOME HOUSING	CA	N/A									
CANAL HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3375830	LOW-INCOME HOUSING	CA	N/A									
CARMEL VALLEY HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3390105	LOW-INCOME HOUSING	CA	N/A									
CARQUINEZ ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-3334622	LOW-INCOME HOUSING	CA	N/A									
CHELSEA GARDENS ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3314552	LOW-INCOME HOUSING	CA	N/A									
CHESTNUT LINDEN ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3411722	LOW-INCOME HOUSING	CA	BRIDGE HOUSING VENTURES INC	RELATED	29,787	228,863		No		Yes		0 010 %
CHURCH STREET HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3361620	LOW-INCOME HOUSING	CA	N/A									
COGGINS SQUARE ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3294186	LOW-INCOME HOUSING	CA	N/A									
COMM 22 LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 73-1728124	LOW-INCOME HOUSING	CA	N/A									
COMM22 FAMILY HOUSING LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-3719866	LOW-INCOME HOUSING	CA	N/A									
COMM22 HOUSING GP LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-3767700	LOW-INCOME HOUSING	CA	N/A									
COMM22 SENIOR GP LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-2578975	LOW-INCOME HOUSING	CA	N/A									
COMM22 SENIOR HOUSING LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-3719955	LOW-INCOME HOUSING	CA	N/A									
COPPER CREEK 4 HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 35-2166973	LOW-INCOME HOUSING	CA	N/A									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
COPPER CREEK 9 HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 83-0369696	LOW-INCOME HOUSING	CA	N/A									
COTTONWOOD CREEK HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 59-3837978	LOW-INCOME HOUSING	CA	N/A									
DANVILLE SENIOR HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3405442	LOW-INCOME HOUSING	CA	N/A									
DORETHA MITCHELL HOUSING LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-1147966	LOW-INCOME HOUSING	CA	N/A									
DORETHA MITCHELL HOUSING LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-5611572	LOW-INCOME HOUSING	CA	N/A									
DRAKE MARIN ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3230387	LOW-INCOME HOUSING	CA	N/A									
FABIAN WAY ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 68-0653330	LOW-INCOME HOUSING	CA	N/A									
FOLSOM ESSEX LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-0708193	LOW-INCOME HOUSING	CA	N/A									
FOOTHILL FARMS ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-3790939	LOW-INCOME HOUSING	CA	N/A									
GEARY HOUSING PARTNERS LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 83-0481231	LOW-INCOME HOUSING	CA	N/A									
GOUGH STREET HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-0686186	LOW-INCOME HOUSING	CA	N/A									
GOUGH STREET HOUSING LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-2961813	LOW-INCOME HOUSING	CA	N/A									
GRAND OAK ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 71-0987940	LOW-INCOME HOUSING	CA	N/A									
HERCULES SR HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3262539	LOW-INCOME HOUSING	CA	N/A									
HERITAGE SQUARE HOUSING PARTNERS LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 37-1751927	LOW-INCOME HOUSING	CA	N/A									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
HUNT AVENUE ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3163833	LOW-INCOME HOUSING	CA	N/A									
IRVINGTON DEV GROUP LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 61-1492960	LOW-INCOME HOUSING	CA	N/A									
IVY AT COLLEGE PARK LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-1275132	LOW-INCOME HOUSING	CA	N/A									
JENNINGS AVE ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 71-0987938	LOW-INCOME HOUSING	CA	N/A									
JOHN STREET HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-0903447	LOW-INCOME HOUSING	CA	N/A									
JOHN STREET HOUSING LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-0962940	LOW-INCOME HOUSING	CA	N/A									
JORDAN DOWNS COMMUNITY PARTNERS LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3375235	LOW-INCOME HOUSING	CA	N/A									
KENTFIELD ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 11-3794630	LOW-INCOME HOUSING	CA	N/A									
LAGUNA CANYON HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 56-2281684	LOW-INCOME HOUSING	CA	N/A									
LELAND HOUSING PARTNERS LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-2979055	INTENDED FOR LOW-INCOME HOUSING	CA	N/A									
MACARTHUR TELEGRAPH ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-2560832	LOW-INCOME HOUSING	CA	BRIDGE NORCAL LLC	RELATED	-1			No			No	1 000 %
MANDELA GATEWAY ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-0500876	LOW-INCOME HOUSING	CA	BRIDGE HOUSING VENTURES INC	RELATED	25,848	624,270		No		Yes		0 010 %
MARINA ANNEX ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3396985	LOW-INCOME HOUSING	CA	BRIDGE HOUSING VENTURES INC	RELATED	27,684	445,769		No		Yes		0 010 %
MARINA TOWERS ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 86-1140987	LOW-INCOME HOUSING	CA	N/A									
METRO SENIOR ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3213475	LOW-INCOME HOUSING	CA	N/A									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MILPITAS HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3253668	LOW-INCOME HOUSING	CA	N/A									
NAIROBI HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3331004	LOW-INCOME HOUSING	CA	N/A									
NATOMA FAMILY HOUSING LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-3533912	LOW-INCOME HOUSING	CA	N/A									
NORTH BEACH HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 82-0563921	LOW-INCOME HOUSING	CA	BRIDGE HOUSING VENTURES INC	RELATED	45,039	4,107,375		No		Yes		0 010 %
NORTHPOINT HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3287332	LOW-INCOME HOUSING	CA	N/A									
NORTHPOINT II HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3324167	LOW-INCOME HOUSING	CA	N/A									
NORTHSIDE HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3315758	LOW-INCOME HOUSING	CA	N/A									
NORTHWOOD HSG ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 57-1176155	LOW-INCOME HOUSING	CA	N/A									
OHLONE HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3232359	LOW-INCOME HOUSING	CA	N/A									
PACIFIC OAKS ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3026354	LOW-INCOME HOUSING	CA	BRIDGE HOUSING VENTURES INC	RELATED	33,965	1,308,214		No		Yes		25 000 %
PICKLEWEED HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 45-5616121	LOW-INCOME HOUSING	CA	WINFIELD HILL INC	RELATED				No			No	1 000 %
POINSETTIA HOUSING PARTNERS 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 33-0832030	LOW-INCOME HOUSING	CA	N/A									
POTTERY COURT HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-0162400	LOW-INCOME HOUSING	CA	N/A									
RICHMOND CITY CTR ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3146993	LOW-INCOME HOUSING	CA	N/A									
RICHMOND HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-0612080	LOW-INCOME HOUSING	CA	N/A									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
ROBERTS AVE SENIOR HSG LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3408441	LOW-INCOME HOUSING	CA	N/A									
ROTARY VALLEY ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3244786	LOW-INCOME HOUSING	CA	ROTARY VALLEY INC	RELATED	-17,465	3,801,959		No			No	99 000 %
SAN RAFAEL APARTMENTS LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 33-0508119	LOW-INCOME HOUSING	CA	N/A									
SANRAF ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3410682	LOW-INCOME HOUSING	CA	N/A									
SANTA ALICIA FAMILY HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3233778	LOW-INCOME HOUSING	CA	N/A									
SANTORINI HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-2335298	LOW-INCOME HOUSING	CA	N/A									
SILVERADO CREEK PARTNERS 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3329192	LOW-INCOME HOUSING	CA	N/A									
SOUTH BEACH FAMILY ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3132899	LOW-INCOME HOUSING	CA	SITE K INC	RELATED	-38,805	6,788,588		No			No	99 000 %
SOUTH BERNARDO ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-2323955	REAL ESTATE RENTAL	CA	N/A									
SOUTH SAN FRANCISCO MAGNOLIA PLAZA ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3026352	LOW-INCOME HOUSING	CA	BRIDGE HOUSING VENTURES INC	RELATED	52,768	1,389,977		No		Yes		25 000 %
ST JOSEPHS FAMILY ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-0627778	LOW-INCOME HOUSING	CA	N/A									
ST JOSEPHS SENIOR LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 26-2893982	LOW-INCOME HOUSING	CA	N/A									
STROBRIDGE HOUSING ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3229531	LOW-INCOME HOUSING	CA	N/A									
SUMMERHOUSE HOUSING 3 LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-2919668	LOW-INCOME HOUSING	CA	N/A									
SUMMERHOUSE HOUSING ASSOCIATES (PHASE I AND PHASE II) 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 27-0901144	LOW-INCOME HOUSING	CA	N/A									

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
SUTTERVIEW HOUSING ASSOCIATES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3044863	LOW-INCOME HOUSING	CA	N/A									
SUTTERVIEW HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3034606	LOW-INCOME HOUSING	CA	N/A									
TERRA COTTA HSG ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3265635	LOW-INCOME HOUSING	CA	N/A									
TRESTLE GLEN ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 11-3794633	LOW-INCOME HOUSING	CA	N/A									
TRI-CITY GARDENS II LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 20-4382157	CONSTRUCTION OF HOMES FOR SALE	CA	N/A									
WALLLEWIS SAN JOSE LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 20-5251118	CONSTRUCTION OF HOMES FOR SALE	CA	N/A									
WASHINGTON PLAZA HOUSING ASSOCIATES LLC 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3244226	LOW-INCOME HOUSING	CA	N/A									
WASHINGTON PLAZA HOUSING ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 46-3233282	LOW-INCOME HOUSING	CA	N/A									
WHITE DOVE CANYON HSG ASSOCIATES LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 06-1638296	LOW-INCOME HOUSING	CA	N/A									
WINFIELD HILL ASSOCIATES 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3153147	LOW-INCOME HOUSING	CA	WINFIELD HILL INC	RELATED	-320,713	13,712,826		No			No	99 000 %
WOODBURY PARTNERS LP 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 68-0620325	LOW-INCOME HOUSING	CA	N/A									
YWCA VILLA NUEVA PARTNERS 600 CALIFORNIA STREET SUITE 900 SAN FRANCISCO, CA 94108 94-3143354	LOW-INCOME HOUSING	CA	N/A									