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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning 10/1/2013 and ending 9/30/2014

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization Croft House, Inc.
 Doing Business As _____
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
356 York Street NE
 City or town State ZIP code
Aiken SC 29801
 Foreign country name Foreign province/state/country Foreign postal code

D Employer identification number 57-0840583

E Telephone number _____

G Gross receipts \$ 889,380

F Name and address of principal officer:
Charles Burhans 2400 Cardigan Drive, Aiken, SC 29803

H(a) Is this a group return for subsidiaries? Yes No
H(b) Are all subsidiaries included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (Insert no.) 4947(e)(1) or 527

J Website: _____

H(c) Group exemption number: _____

K Form of organization: Corporation Trust Association Other

L Year of formation: 1976 **M** State of legal domicile: SC

SCANNED AUG 18 2015

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>Providing housing to low income elderly and disabled persons by operating a HUD-assisted apartment community regulated under Section 223(f) of the National Housing Act.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	<u>3</u>	<u>13</u>
	4	Number of independent voting members of the governing body (Part VI, line 1b)	<u>4</u>	<u>13</u>
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	<u>5</u>	
	6	Total number of volunteers (estimate if necessary)	<u>6</u>	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	
7b	Net unrelated business taxable income from Form 990-T, line 34	<u>7b</u>		
Revenue	8	Contributions and grants (Part VIII, line 1h)	<u>57,658</u>	<u>58,979</u>
	9	Program service revenue (Part VIII, line 2g)	<u>793,332</u>	<u>814,598</u>
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>144</u>	<u>169</u>
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>15,014</u>	<u>15,634</u>
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>866,148</u>	<u>889,380</u>
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>163,556</u>	<u>172,785</u>
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	16b	Total fundraising expenses (Part IX, column (D), line 25)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>816,359</u>	<u>833,377</u>
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>979,915</u>	<u>1,006,162</u>	
19	Revenue less expenses. Subtract line 18 from line 12	<u>-113,767</u>	<u>-116,782</u>	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	<u>1,396,809</u>	<u>1,249,289</u>
	21	Total liabilities (Part X, line 26)	<u>2,335,874</u>	<u>2,305,136</u>
	22	Net assets or fund balances. Subtract line 21 from line 20	<u>-939,065</u>	<u>-1,055,847</u>

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: Charles H. Burhans Signature of officer
Charles H. Burhans President B.O.D. Type or print name and title
7/24/15 Date

Paid Preparer Use Only

Print/Type preparer's name: Seth Strongin Preparer's signature: [Signature] Date: 7/18/2015 Check if self-employed PTIN: P01344459

Firm's name: Seth D. Strongin, CPA P.C. Firm's EIN: 58-2351458

Firm's address: 4780 Ashford Dunwoody Rd., Ste A-628, Atlanta, GA 30338 Phone no.: _____

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

A P

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

Providing housing to low income elderly and disabled persons by operating a HUD-assisted apartment community regulated under Section 223(f) of the National Housing Act

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 \$ 964,876 including grants of \$) (Revenue \$ 830,232)

Provided housing to elderly and disabled persons by operating an apartment community regulated by the U.S. Department of Housing and Urban Development under Section 223(f) of the National Housing Act

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 ▶ 964,876

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	X	
2. Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
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		X
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		X
5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
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		X
7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
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		X
11. If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
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		X
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		X
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	X	
e. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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		X
12a. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a. Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
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		X
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		X
17. Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19. Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a. Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.		X
b. If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
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		X
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		X
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		X
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		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
25b 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		X
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		X
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		X
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)		
28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28c 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		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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		X
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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b 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		
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		X
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		X
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	X	

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. 2		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. -0-		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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. -0-		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? N/A		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? N/A		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? N/A		
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? N/A		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
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? 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?		X
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 line 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. 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		
1a	13		
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	13		
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?		X
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?	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	X	
8a			
b	Each committee with authority to act on behalf of the governing body?	X	
8b			
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		X
9			

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?		X
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?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
11a			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
13			
14	Did the organization have a written document retention and destruction policy?	X	
14			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	N/A	
15a			
b	Other officers or key employees of the organization	N/A	
15b			
	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?		X
16a			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> 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	
	NHE, Inc	803-536-1056
	P.O. Box 1184, Orangeburg, SC 29116	

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

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

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) Charles Burhans President	2 00 0 00	X		X				0	0	0
(2) E Owen Clary Vice President	2 00 0 00	X		X				0	0	0
(3) Mary Welks Treasurer	2 00 0 00	X		X				0	0	0
(4) Beatrice McGhee Secretary	2 00 0 00	X		X				0	0	0
(5) Phyllis Pellarin Director	2 00 0 00	X						0	0	0
(6) Mary Barnett Director	2 00 0 00	X						0	0	0
(7) Sheila Wagner Director	2 00 0 00	X						0	0	0
(8) Ken Rayfield Director	2 00 0 00	X						0	0	0
(9) Selwyn Skinner Director	2 00 0 00	X						0	0	0
(10) Bill Hillan Director	2 00 0 00	X						0	0	0
(11) Chris Christiansen Director	2 00 0 00	X						0	0	0
(12) Tom McHenry Director	2 00 0 00	X						0	0	0
(13) Ellene Southerland Director	2 00 0 00	X						0	0	0
(14)										

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			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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

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

	Yes	No
3		X
4		X
5		X

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

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

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

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				
	e Government grants (contributions)	1e	58,979			
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f	\$				
	h Total. Add lines 1a-1f		58,979			
Program Service Revenue	Business Code					
	2a Tenant rent payments	531110	209,932	209,932		
	b Housing assistance payments	531110	507,902	507,902		
	c Dietary and related services	531390	96,764	96,764		
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f		814,598				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		169		169	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	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 Laundry and vending	531110	3,919	3,919			
b Cleaning and other charges	531110	2,877	2,877			
c Cable TV	531110	8,838	8,838			
d All other revenue						
e Total. Add lines 11a-11d		15,634				
12 Total revenue. See instructions		889,380	830,232		169	

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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				
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	156,733	156,733		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	16,052	16,052		
11 Fees for services (non-employees)				
a Management	36,686		36,686	
b Legal				
c Accounting	4,600		4,600	
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	20,424	20,424		
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	1,409	1,409		
20 Interest	134,323	134,323		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	206,052	206,052		
23 Insurance	60,799	60,799		
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 Service coordinator	60,581	60,581		
b Utilities, cable TV and trash removal	148,035	148,035		
c Repairs and maintenance	67,560	67,560		
d Food service and related services	84,239	84,239		
e All other expenses Miscellaneous	8,669	8,669		
25 Total functional expenses. Add lines 1 through 24e	1,006,162	964,876	41,286	
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 <input type="checkbox"/> 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	14,527	1	14,582
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,337	4	7
	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		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	7,972	9	8,167
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 3,749,255		
	b	Less accumulated depreciation	10b 2,904,894	10c 1,004,421	844,361
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	366,552	15	382,172
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,396,809	16	1,249,289	
Liabilities	17	Accounts payable and accrued expenses	44,419	17	43,580
	18	Grants payable		18	
	19	Deferred revenue	24	19	1,247
	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	2,274,703	23	2,242,711
	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	16,728	25	17,598
	26	Total liabilities. Add lines 17 through 25	2,335,874	26	2,305,136
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	-939,065	27	-1,055,847
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC958), check here <input type="checkbox"/> 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	-939,065	33	-1,055,847	
34	Total liabilities and net assets/fund balances	1,396,809	34	1,249,289	

Part XI Reconciliation 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	889,380
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,006,162
3	Revenue less expenses Subtract line 2 from line 1	3	-116,782
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-939,065
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	-1,055,847

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		X
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?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	X	

Public Charity Status and Public Support

2013

Open to Public Inspection

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.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

Croft House, Inc

Employer identification number

57-0640593

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?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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)									
(B)									
(C)									
(D)									
(E)									
Total									

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 section 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 from 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")	53,538	56,366	27,851	57,658	58,979	254,392
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	765,174	782,849	801,333	808,346	830,232	3,987,934
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	818,712	839,215	829,184	866,004	889,211	4,242,326
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)						4,242,326

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	818,712	839,215	829,184	866,004	889,211	4,242,326
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	513	434	184	144	169	1,444
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	513	434	184	144	169	1,444
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)	819,225	839,649	829,368	866,148	889,380	4,243,770
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	99.97%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	99.93%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	0.03%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	0.07%

- 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).

Area with horizontal dashed lines for supplemental information.

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ 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.

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

Name of the organization Croft House, Inc	Employer identification number 57-0640593
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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? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 Tax 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
1c	
1d	
1e	
1f	

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

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

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

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		66,055		66,055
b Buildings		3,265,514	2,542,995	722,519
c Leasehold improvements				
d Equipment		142,909	120,963	21,946
e Other		274,777	240,936	33,841
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				844,361

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		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
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)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total (Column (b) must equal Form 990, Part X, col (B) line 13)		

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) Tenant security deposits	17,598
(2) Insurance escrow	55,446
(3) Replacement reserve	246,802
(4) Residual receipts reserve	228
(5) Deferred financing costs	62,098
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	382,172

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
(1) Federal income taxes	
(2) Tenant security deposits	17,598
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	17,598

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. NA

Part XIII Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ 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

Croft House, Inc

Employer identification number

57-0640593

Form 990, Part VI, Section A, Line 3 The organization has entered into a management agreement

with a management company for day-to-day management of the apartment community as is customary

for owners/operators of HUD-assisted rental communities

Form 990, Part VI, Section B, Line 11b The return is prepared by a certified public

accounting firm and provided to the management company for initial review and approval After

any questions and comments from the management company are addressed, the return is provided

to the board of directors for final review and approval After any questions and comments from

the board of directors are addressed, the return is provided to the designated board officer

for signature and filing

Form 990, Part VI, Section B, Line 12c Compliance is monitored at regularly scheduled

meetings of the board of directors and at other times, if needed

Form 990, Part VI, Section C, Line 19 Documents are maintained by the board of directors and

copies are provided upon request

Name of the organization

Employer identification number

Croft House, Inc

57-0640593

Area with horizontal dashed lines for additional information.

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
1 Depreciation	<u>1</u> 203,760	<u>203,760</u>	<u> </u>	<u> </u>
2 Depletion	<u>2</u>	<u> </u>	<u> </u>	<u> </u>
3 Amortization	<u>3</u> 2,292	<u>2,292</u>	<u> </u>	<u> </u>
4 Total	<u>4</u> 206,052	<u>206,052</u>	<u> </u>	<u> </u>

CROFT HOUSE, INC.
DEPRECIATION SCHEDULE
9/30/2014

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
Land 1.2 Acres	4/11/1977			50,000 00				50,000 00
Land	9/30/1983			6,805 00				6,805 00
Land	8/29/1991			9,250 00				9,250 00
				<u>66,055 00</u>				<u>66,055 00</u>
BUILDINGS								
Building	1/1/1979	40	SL	1,703,140 00	1,479,602 80	42,578 50	1,522,181 30	180,958 70
Vestibule	4/1/1989	15	SL	3,458 00	3,458 00	-	3,458 00	-
Improvements	3/3/1998	10	SL	15,756 98	15,756 98	-	15,756 98	-
EQUIPMENT-FIXED								
Automatic doors	11/30/1990	10	SL	6,072 00	6,072 00	-	6,072 00	-
Automatic doors	2/15/1991	10	SL	7,285 00	7,285 00	-	7,285 00	-
Equipment	9/30/1991	10	SL	942 90	942 90	-	942 90	-
Building	2/28/1992	10	SL	795 00	795 00	-	795 00	-
Equipment	2/28/1992	10	SL	807 45	807 45	-	807 45	-
New cooling tower	10/25/1994	10	SL	13,510 00	13,510 00	-	13,510 00	-
Water circulation pump	6/25/1996	10	SL	4,250 00	4,250 00	-	4,250 00	-
Automatic doors	2/19/2001	10	SL	1,876 00	1,876 00	-	1,876 00	-
Boiler	11/21/2002	10	SL	19,785 00	19,785 00	-	19,785 00	-
Security cameras (front)	12/4/2003	10	SL	8,580 00	8,580 00	-	8,580 00	-
Oven	4/15/2003	10	SL	7,886 50	7,886 50	-	7,886 50	-
Walk-in cooler	4/12/2003	10	SL	3,332 32	3,332 32	-	3,332 32	-
Heat pumps	9/24/2003	10	SL	6,160 72	6,160 72	-	6,160 72	-
Fire protection system	10/15/2003	10	SL	35,363 88	35,363 88	-	35,363 88	-
Security system (front)	4/7/2004	10	SL	5,582 14	5,303 03	279 11	5,582 14	-
Air compressors	8/9/2004	10	SL	1,568 10	1,437 43	130 68	1,568 10	-
Kitchen hood fire system	10/1/2004	10	SL	2,332 00	2,098 80	233 20	2,332 00	-
Trane 5 ton heat pump	2/25/2005	10	SL	9,855 90	8,459 65	985 59	9,445 24	-
Fire alarm system	3/31/2005	10	SL	1,143 53	972 00	114 35	1,086 35	-
Water line	9/29/2005	10	SL	4,300 60	3,440 48	430 06	3,870 54	-
5 HVAC units	1/24/2006	10	SL	9,546 60	7,319 06	954 66	8,273 72	-
Hobart commercial dishwasher	5/18/2006	10	SL	9,837 80	7,214 39	983 78	8,198 17	-
Maintenance room doors	2/15/2007	10	SL	1,235 00	813 04	123 50	936 54	-
Heat pumps	5/15/2007	10	SL	57,172 00	36,208 93	5,717 20	41,926 13	-
Gazebo/courtyard	5/15/2007	10	SL	15,265 00	9,667 83	1,526 50	11,194 33	-
Refrigerator (food service)	5/15/2007	10	SL	5,024 00	3,181 87	502 40	3,684 27	-
Resurface parking lot	2/15/2007	10	SL	42,490 00	27,972 58	4,249 00	32,221 58	-
Roof	2/15/2007	15	SL	103,023 00	45,215 65	6,868 20	52,083 85	-
Fencing	2/15/2007	10	SL	2,208 00	1,453 60	220 80	1,674 40	-
Doors and windows	6/15/2007	10	SL	108,410 00	67,756 25	10,841 00	78,597 25	-
Building exterior	6/15/2007	15	SL	69,602 00	29,000 83	4,640 13	33,640 97	-
Acoustic ceiling tile	2/15/2007	10	SL	25,976 00	17,100 87	2,597 60	19,698 47	-
Refurbish elevators	5/15/2007	10	SL	205,226 00	129,976 47	20,522 60	150,499 07	-
HVAC units	5/15/2007	10	SL	98,293 00	62,252 23	9,829 30	72,081 53	-
Water heaters	3/15/2007	10	SL	303,455 00	197,245 75	30,345 50	227,591 25	-
Monitoring board	5/15/2007	10	SL	6,307 00	3,994 43	630 70	4,625 13	-
Security system a/v	10/27/2006	10	SL	1,358 53	939 65	135 85	1,075 50	-

CROFT HOUSE, INC.
DEPRECIATION SCHEDULE
9/30/2014

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
EQUIPMENT-FIXED (CONTINUED)								
HVAC units	10/17/2006	10	SL	8,553 00	5,915 83	855 30	6,771 13	1,781 88
Water heater	9/5/2006	10	SL	278 35	194 85	27 84	222 68	55 67
HVAC units - ground floor	1/28/2008	10	SL	10,230 00	5,797 00	1,023 00	6,820 00	3,410 00
Parking lot signs	5/21/2008	10	SL	2,918 00	1,556 27	291 80	1,848 07	1,069 93
Floor - beauty shop/bathrooms	6/6/2008	10	SL	3,991 56	2,128 83	399 16	2,527 99	1,463 57
Irrigation system, walls	7/19/2008	10	SL	10,640 00	5,497 33	1,064 00	6,561 33	4,078 67
Security/surveillance system - rear	7/23/2008	10	SL	26,967 69	13,933 31	2,696 77	16,630 08	10,337 61
Sidewalk, steps, handrail	9/26/2008	10	SL	5,028 00	2,514 00	502 80	3,016 80	2,011 20
Generator	1/15/2009	10	SL	5,100 00	2,422 50	510 00	2,932 50	2,167 50
Wood fence, trash receptacle gate	2/25/2009	10	SL	4,494 68	2,060 06	449 47	2,509 53	1,985 15
Concrete walk extension & pad	7/30/2009	10	SL	906 80	377 83	90 68	468 51	438 29
Fire extinguisher cabinets	9/23/2009	10	SL	1,123 50	449 40	112 35	561 75	
Restaurant range, serving counter, food service stations	9/28/2009	10	SL	20,913 74	8,365 50	2,091 37	10,456 87	10,456 87
Rest room counters & sinks	5/24/2010	10	SL	2,553 15	851 05	255 32	1,106 37	1,446 79
Beauty shop counters & drawers	6/28/2010	10	SL	1,235 00	401 38	123 50	524 88	710 13
Coffee counter - dining room	8/31/2010	10	SL	2,037 28	628 16	203 73	831 89	1,205 39
Back flush toilets	9/1/2010	10	SL	34,841 86	10,742 91	3,484 19	14,227 09	20,614 77
Laundry room counter tops	4/25/2011	10	SL	1,425 24	344 43	142 52	486 96	938 28
HVAC units	6/16/2011	10	SL	12,522 83	2,817 64	1,252 28	4,069 92	8,452 91
Storage building	9/13/2011	10	SL	4,572 00	933 45	457 20	1,390 65	3,181 35
Stainless steel handrails	10/12/2011	10	SL	19,950 00	3,990 00	1,995 00	5,985 00	13,965 00
Doors & door hardware	1/12/2012	10	SL	35,403 68	6,195 64	3,540 37	9,736 01	25,667 67
Network/cable jacks for library	1/17/2012	10	SL	1,654 18	275 70	165 42	441 11	1,213 07
Heat pumps	4/2/2012	10	SL	11,666 00	1,749 90	1,166 60	2,916 50	8,749 50
Laminate floor - library	6/7/2012	10	SL	1,092 41	145 65	109 24	254 90	837 51
Heat pump - mail room	8/3/2012	10	SL	4,420 00	515 67	442 00	957 67	3,462 33
Hallway carpeting	9/13/2012	10	SL	28,368 48	2,955 05	2,836 85	5,791 90	22,576 58
4 water heat pumps	10/19/2012	10	SL	12,073 00	1,106 69	1,207 30	2,313 99	9,759 01
4 bathroom remodeling	2/12/2013	10	SL	20,000 00	1,333 33	2,000 00	3,333 33	16,666 67
New carpet for ground floor and offices	8/29/2013	10	SL	10,761 61	89 68	1,076 16	1,165 84	9,595 77
5 heat pumps	10/17/2013	10	SL	14,540 00		1,332 83	1,332 83	13,207 17
Heat pump	12/12/2013	10	SL	2,900 00		241 67	241 67	2,658 33
Bathroom renovation 214/215	3/15/2014	15	SL	20,300 00		789 44	789 44	19,510 56
Heat pumps replaced				(6,160 72)			(6,160 72)	-
				3,265,514 27	2,370,778 40	178,376 36	2,542,994 04	722,520 23
EQUIPMENT-PORABLE								
Ice machine and installation	4/14/1989	10	SL	2,086 20	2,086 20	-	2,086 20	-
Misc equipment	9/1/1989	5	SL	728 80	728 80	-	728 80	-
Refrigerator	5/25/1991	5	SL	396 90	396 90	-	396 90	-
Refrigerator	10/1/1992	5	SL	845 25	845 25	-	845 25	-
Refrigerator	2/9/1993	5	SL	845 25	845 25	-	845 25	-
Moveable gates	2/9/1993	5	SL	700 00	700 00	-	700 00	-
Appliances	11/12/1993	5	SL	612 20	612 20	-	612 20	-
Appliances	8/23/1994	5	SL	865 97	865 97	-	865 97	-

CROFT HOUSE, INC.
DEPRECIATION SCHEDULE
9/30/2014

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
EQUIPMENT-PORTABLE (CONTINUED)								
Faucets & appliances	3/2/1995	5	SL	1,533 59	1,533 59	-	1,533 59	-
Appliances	3/25/1996	5	SL	1,755 60	1,755 60	-	1,755 60	-
Refrigerators	7/16/1997	5	SL	21,201 70	21,201 70	-	21,201 70	-
Appliances	2/18/1997	5	SL	257 25	257 25	-	257 25	-
Refrigerator	4/8/1999	5	SL	412 98	412 98	-	412 98	-
Appliances	10/1/2001	5	SL	855 42	855 42	-	855 42	-
Stove	1/15/2002	5	SL	355 10	355 10	-	355 10	-
Stove	2/22/2002	5	SL	299 98	299 98	-	299 98	-
Stoves	4/1/2002	5	SL	606 32	606 32	-	606 32	-
Stoves	4/1/2003	5	SL	949 76	949 76	-	949 76	-
Slicer	11/25/2003	5	SL	920 00	920 00	-	920 00	-
Warmer, can opener, processor	11/25/2003	5	SL	1,449 63	1,449 63	-	1,449 63	-
Steamer	4/12/2003	5	SL	3,036 90	3,036 90	-	3,036 90	-
Proofer/holding cabinet	1/22/2003	5	SL	1,690 70	1,690 70	-	1,690 70	-
4 TVs and DVD player	9/1/2004	5	SL	1,908 84	1,908 84	-	1,908 84	-
Whirlpool washing machine	6/18/2006	5	SL	895 00	895 00	-	895 00	-
Ranges, hoods, cords	4/15/2007	5	SL	32,869 00	32,869 00	-	32,869 00	-
Washing machine - front load	10/30/2006	5	SL	873 09	873 09	-	873 09	-
Refrigerators	6/11/2007	5	SL	873 12	873 12	-	873 12	-
Coin dryer	12/21/2007	5	SL	957 65	957 65	-	957 65	-
Refrigerator	3/10/2008	5	SL	553 19	553 19	-	553 19	-
Dryer - 3rd floor	6/27/2008	5	SL	895 00	895 00	-	895 00	-
Washer and dryer	12/11/2008	5	SL	1,529 14	1,529 14	50 97	1,529 14	-
Washer - top loading	1/30/2009	5	SL	537 00	537 00	35 80	537 00	-
Washer - top mount	3/24/2010	5	SL	549 84	384 89	109 97	494 86	54 98
Washer	11/27/2010	5	SL	954 84	541 08	190 97	732 04	222 80
Refrigerators	4/1/2011	5	SL	1,496 40	748 20	299 28	1,047 48	448 92
Refrigerator	10/1/2012	5	SL	526 30	105 26	105 26	210 52	315 78
Refrigerator	8/6/2013	5	SL	537 00	17 90	107 40	125 30	411 70
Front load washing machine	8/28/2013	5	SL	1,322 21	22 04	264 44	286 48	1,035 73
				89,683 12	86,029 12	1,164 09	87,193 21	2,489 91
FURNITURE								
94 banquet stack chairs	9/21/2006	7	SL	16,277 00	16,277 00	-	16,277 00	-
24 round table bases	9/21/2006	7	SL	2,237 48	2,237 48	-	2,237 48	-
24 square table tops	9/21/2006	7	SL	3,650 00	3,650 00	-	3,650 00	-
Patio furniture	3/29/2010	7	SL	2,131 44	1,065 72	304 49	1,370 21	761 23
TV/DVD player	2/3/2011	7	SL	451 52	172 01	64 50	236 51	215 01
Conference table	9/6/2011	7	SL	2,487 75	740 40	355 39	1,095 79	1,391 96
12 guest chairs	9/6/2011	7	SL	1,784 76	531 18	254 97	786 14	998 62
Benches	10/1/2011	7	SL	2,166 20	618 91	309 46	928 37	1,237 83
Bookcases - library	6/3/2012	7	SL	8,900 00	1,695 24	1,271 43	2,966 67	5,933 33
Furniture for lobby	8/21/2013	7	SL	5,559 72	66 19	794 25	860 43	4,699 29
Furniture for lounge	9/3/2013	7	SL	3,905 50	46 49	557 93	604 42	3,301 08
40" TV for library	10/30/2012	7	SL	599 18	78 46	85 60	164 06	435 12
				50,150 55	27,179 09	3,998 01	31,177 10	18,973 45

CROFT HOUSE, INC.
DEPRECIATION SCHEDULE
9/30/2014

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
FURNISHINGS								
Chain link fence	1/1/1980	10	SL	559 55	559 55	-	559 55	-
Drapes	4/15/1988	10	SL	154 50	154 50	-	154 50	-
Tilt skillet	9/28/1990	10	SL	3,667 65	3,667 65	-	3,667 65	-
Drapes	2/28/1992	7	SL	1,653 75	1,653 75	-	1,653 75	-
Drapes	5/5/1995	7	SL	8,860 32	8,860 32	-	8,860 32	-
Mini blinds	2/20/1996	7	SL	932 00	932 00	-	932 00	-
Carpeting (clubhouse)	6/8/1999	7	SL	11,647 71	11,647 71	-	11,647 71	-
Window treatments (clubhouse)	6/12/1999	7	SL	831 75	831 75	-	831 75	-
Stacking arm chairs	12/14/1998	7	SL	2,775 29	2,775 29	-	2,775 29	-
Beauty shop furniture	8/30/1999	7	SL	575 00	575 00	-	575 00	-
Computer- Neighborhood NW	9/9/1999	5	SL	748 00	748 00	-	748 00	-
Replace carpet and vinyl	10/15/2003	7	SL	20,199 52	20,199 52	-	20,199 52	-
Artwork	11/10/2003	7	SL	3,564 78	3,564 78	-	3,564 78	-
Furniture for all common areas	12/7/2003	7	SL	20,024 52	20,024 52	-	20,024 52	-
Artwork	4/21/2004	7	SL	2,409 38	2,409 38	-	2,409 38	-
Cabinets & countertops	9/20/2006	7	SL	3,757 70	3,757 70	-	3,757 70	-
Cabinets, sinks, countertops	4/15/2007	7	SL	91,392 00	83,776 00	7,616 00	91,392 00	-
Bathroom vanities	3/15/2007	7	SL	18,881 00	17,532 36	1,348 64	18,881 00	-
Carpets and tile	11/1/2010	7	SL	1,239 34	516 39	177 05	693 44	545 90
Carpets and tile	4/15/2011	7	SL	3,733 77	1,333 49	533 40	1,866 89	1,866 89
Carpets and tile	7/22/2011	7	SL	13,298 13	4,116 09	1,899 73	6,015 82	7,282 31
Carpets and tile	7/29/2011	7	SL	7,663 40	2,372 00	1,094 77	3,466 78	4,196 62
				218,569 06	192,007 75	12,669 59	204,677 34	13,891 72
OFFICE FURNITURE & EQUIPMENT								
Office Equipment	6/28/1992	10	SL	608 75	608 75	-	608 75	-
Sharp Typewriter	3/10/1988	10	SL	791 70	791 70	-	791 70	-
Laserjet & monitor	12/30/1998	5	SL	692 98	692 98	-	692 98	-
Desk, hutch, credenza, table	6/18/1999	7	SL	1,642 00	1,642 00	-	1,642 00	-
Chairs	8/25/1999	7	SL	941 85	941 85	-	941 85	-
Chairs, file cabinet, desk	9/20/1999	7	SL	1,373 35	1,373 35	-	1,373 35	-
Furniture	4/1/2000	7	SL	389 28	389 28	-	389 28	-
Printer	5/1/2001	5	SL	681 58	681 58	-	681 58	-
Copier	11/14/2002	5	SL	3,863 70	3,863 70	-	3,863 70	-
Dell Latitude D520 computer	6/2/2006	5	SL	2,269 46	2,269 46	-	2,269 46	-
Chair - front desk	2/2/2007	7	SL	94 08	89 60	4 48	94 08	-
Wireless headset	7/13/2007	5	SL	288 89	288 89	-	288 89	-
Dell Latitude D520 computer	1/12/2007	5	SL	1,926 63	1,926 63	-	1,926 63	-
Two fireproof file cabinets	6/5/2009	7	SL	4,654 50	2,881 36	664 93	3,546 29	1,108 21
2 Dell desktops & 1 laptop computer	2/3/2010	5	SL	4,071 09	2,985 47	1,085 62	4,071 09	-
Copier	9/14/2010	5	SL	5,821 17	3,589 72	1,164 23	4,753 96	1,067 21
2 laptops (resident use)	7/15/2011	5	SL	2,268 37	1,020 77	453 67	1,474 44	793 93
Fireproof vertical file cabinet	7/25/2011	7	SL	5,339 30	1,652 64	762 76	2,415 40	2,923 90
Executive desk	9/28/2011	7	SL	2,648 25	756 64	378 32	1,134 96	1,513 29
Task chairs	7/17/2012	7	SL	1,149 18	328 34	164 17	492 51	656 67
Fireking file cabinet - serv coord	8/14/2012	7	SL	2,669 65	762 76	381 38	1,144 14	1,525 51

CROFT HOUSE, INC.
DEPRECIATION SCHEDULE
9/30/2014

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
<u>OFFICE FURNITURE & EQUIPMENT (CONTINUED)</u>								
Task chairs	8/28/2012	7	SL	383 06	109 45	54 72	164 17	218 89
Executive desk	1/25/2013	7	SL	2,134 65	203 30	304 95	508 25	1,626 40
Filing cabinet	3/26/2013	7	SL	247 16	17 65	35 31	52 96	194 20
Scanner	5/6/2013	5	SL	475 00	39 58	95 00	134 58	340 42
Desk for admin assistant	9/4/2013	7	SL	2,173 17	25 87	310 45	336 32	1,836 85
Latitude E6540 computer - mgr	3/1/2014	5	SL	1,825 86		213 02	213 02	1,612 84
Optplex 9020 computer -asst mgr	3/1/2014	5	SL	1,168 22		136 29	136 29	1,031 93
Latitude E6540 computer - svc crd	3/1/2014	5	SL	1,825 86		213 02	213 02	1,612 84
Computer replaced				(2,269 46)			(2,269 46)	-
Computer replaced				(1,926 63)			(1,926 63)	-
Computers replaced				(4,071 09)			(4,071 09)	-
				46,151 56	29,933 31	6,422 33	28,088 46	18,063 10

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
<u>MAINTENANCE EQUIPMENT</u>								
Storage cabinet	1/20/1999	5	SL	775 78	775 78	-	775 78	-
Carpet cleaner	7/24/1999	5	SL	133 01	133 01	-	133 01	-
Table saw	6/1/2000	5	SL	312 98	312 98	-	312 98	-
Pressure washer	10/1/2000	5	SL	733 00	733 00	-	733 00	-
Sewage machine	6/1/2001	5	SL	401 76	401 76	-	401 76	-
Paint sprayer	9/2/2003	5	SL	1,227 87	1,227 87	-	1,227 87	-
Steamvac	7/2/2006	5	SL	295 00	295 00	-	295 00	-
Lawn mower & trimmer	3/7/2007	5	SL	570 42	570 42	-	570 42	-
Hedge trimmer	1/31/2007	5	SL	153 00	153 00	-	153 00	-
Thermax steam cleaner	7/15/2010	5	SL	2,063 93	1,341 55	412 79	1,754 34	309 59
4000 PSI pressure washer	7/11/2014	5	SL	1,140 65		57 03	57 03	1,083 62
Pressure washer replaced				(733 00)			(733 00)	-
				7,074 40	5,944 37	469 82	5,681 19	1,393 21

DESCRIPTION	DATE ACQUIRED	LIFE (YRS)	METHOD	COST	PRIOR ACCUM	CURRENT EXPENSE	ENDING ACCUM	NET BOOK VALUE
<u>MISC FIXED ASSETS</u>								
Treadmill - exercise room	7/28/2006	5	SL	1,605 88	1,605 88	-	1,605 88	-
Exercise bike	7/28/2006	5	SL	423 87	423 87	-	423 87	-
Flagpole	1/28/2009	10	SL	1,460 00	681 33	146 00	827 33	632 67
Mini shopping carts for laundry	5/19/2010	5	SL	2,567 36	1,711 57	513 47	2,225 05	342 31
				6,057 11	4,422 66	659 47	5,082 13	974 98
				3,749,255 07	2,716,294 70	203,759 67	2,904,893 47	844,361 60

Application for Extension of Time To File an Exempt Organization Return

(Rev. January 2014)

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions Croft House, Inc	Employer identification number (EIN) or 57-0640593
	Number, street, and room or suite no. If a PO box, see instructions 356 York Street NE	Social security number (SSN)
File by the due date for filing your return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions Aiken, SC 29801	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ▶ NHE, Inc.

Telephone No ▶ (803) 536-1056 Fax No ▶ (803) 531-3048

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 5/15/2015, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year _____ or

▶ tax year beginning 10/1/2013, and ending 9/30/2014

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0
3b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0
3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)
 Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions Croft House, Inc	Employer identification number (EIN) or 57-0640593
	Number, street, and room or suite no If a PO box, see instructions 356 York Street NE	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions Aiken, SC 29801	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

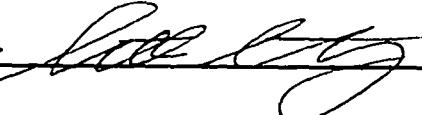
- The books are in the care of NHE, Inc
 Telephone No (803) 536-1056 Fax No (803) 531-3048
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until 8/15/2015
- For calendar year _____, or other tax year beginning 10/1/2013, and ending 9/30/2014
- If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return Change in accounting period
- State in detail why you need the extension The organization needs more time to obtain information necessary for filing a complete and accurate return

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a	\$	0
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title CPA Date 5/4/15
 Form **8868** (Rev 1-2014)