

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



Internal Revenue Service

EXTENDED TO NOVEMBER 16, 2015

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

OMB No. 1545-0047

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.lrs.gov/form990 Open to Public Inspection

AF	or tr	ie 2014 calendar year, or tax year beginning and ending		
Bc	heck i	da.	D Employer identifie	cation number
	•	NDC HOUSING & ECONOMIC DEVELOPMENT		
	Addr chan	9 CORPORATION-GROUP RETURN		
]Nam chan	ge Doing business as	91-1	884698
	lrutio retur	Number and street (or P.O. box if mail is not delivered to street address) Room/si	ite E Telephone numbe	
	Final	710 708 THIRD AVENUE		682-1106
	term	n-	G Gross receipts \$	96,656,216.
	Ame	nded NIPW VODE NV 10017	H(a) Is this a group re	
	Appl			? XYes No
	pend	SAME AS C ABOVE		rcluded? Yes X No
1 T	ay-e			list. (see instructions)
		ite: N/A		n number > 9219
	_		ear of formation: 1988	
_	rt I		cal of formation. 1900 R	n State of legal doffliche. V A
Ч	1	Briefly describe the organization's mission or most significant activities: SEE SCHE	DIII.R O	
Activities & Governance	'	briefly describe the organization's mission of most significant activities.	DODE O	
ğ	2	Check this have		
9	2	Check this box if the organization discontinued its operations or disposed of n	1 1	
Ĝ	3		3	18
- ಇ	4	Number of independent voting members of the governing body (Part VI, line 1b)		
i i	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		
₹.	6	Total number of volunteers (estimate if necessary)	6	2
AG	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		0.
_	t	Net unrelated business taxable income from Form 990-T, line 34	<u></u> 7b	0.
		DECEIVED	Prior Year	Current Year
<u>e</u>	8	Contributions and grants (Part VIII, line 1h) RECEIVED	37,935,775.	15,267,161.
Ĕ	9	Program service revenue (Part VIII, line 2g)	128,848,038.	81,075,202.
Revenue	10	Invoctment income (Dort VIII column (A) Gass 2 4 April 7-1)	1,049,553.	-14,871,732.
-	11	Other revenue (Part VIII, column (A) lines 5 6d 8c bet 10c and that U (UI)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	167,833,366.	81,470,631.
	13	Grants and similar amounts paid (Part IX, column (A), lines GSDEN, UI	261,051.	1,552,618.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
υ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
툂		Total fundraising expenses (Part IX, column (D), line 25)		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	132 135 336	101,207,135.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		102,759,753.
i	19	Revenue less expenses Subtract line 18 from line 12	35,436,979.	-21,289,122.
28		rieverioe less expenses Subtract line 10 iron line 12		
ets or ances	20	Total consts (Dod V. Erro 16)	Beginning of Current Year 1274186183.	End of Year
Net Asse		Total assets (Part X, line 16)	1260682459.	1220666029.
#E	21	Total liabilities (Part X, line 26)		1215322198.
	22	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	13,503,724.	5,343,831.
	rt II			
Unat	er per	natties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
true,	corre	ect, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		HAT Va	11/16/1	5
Sign	1	Signature of officer	Date '	
Her	е	ADAM ENNIS, CFO		
		Type or print name and title		
		Print/Type preparer's name Preparer's sygnature	Dale / , Check	PTIN
Paid	ł	STEVEN LAPSKER	11/16/2015 sell-employs	ы №00850484
Prep	агег	Firm's name RSM US LLP	Firm's EIN	42-0714325
Use	Only	Firm's address 1185 AVENUE OF THE AMERICAS		
		NEW YORK, NY 10036-2602	Phone no. 21	2-372-1000
May	the	IRS discuss this return with the preparer shown above? (see instructions)		X Yes No
_		-07-14 I HA For Paperwork Reduction Act Notice see the separate instructions		Form 990 (2014)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Pai	t 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:
	SEE SCHEDULE O
	Did the annual to the control of the
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
•	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 \$ 612,945. including grants of \$) (Revenue \$)
	TO CONSTRUCT NEW LOW INCOME HOUSING AND TO DEVELOP, MANAGE, OPERATE,
	PROMOTE, FUND, AND SUPPORT EXISTING LOW INCOME HOUSING FOR PERSONS OF
	LIMITED FINANCIAL MEANS, HANDICAPPED PERSONS, ELDERLY PERSONS, AND
	OTHER PERSONS IN NEED OF SAFE ADEQUATE AFFORDABLE HOUSING AND TO ASSIST GENERALLY IN THE ALLEVIATION OF HOUSING SHORTAGES THROUGHOUT THE US
	SEE SCHEDULE O.
	SEE SCREDULE O.
4b	(Code) (Expenses \$ 95,442,959 · including grants of \$ 1,552,618 ·) (Revenue \$ 63,452,270 ·)
	TO ASSIST IN THE ERECTION AND MAINTENANCE OF PUBLIC BUILDINGS,
	MONUMENTS, FACILITIES, OR WORKS TO LESSEN THE BURDEN OF GOVERNMENT AND
	TO PROMOTE SOCIAL WELFARE.
	SEE SCHEDULE O.
4c	(Code) (Expenses \$ 2,383,001. including grants of \$) (Revenue \$ 2,015,620.)
	TO INITIATE AND CARRY OUT ACTIVITIES TO STIMULATE ECONOMIC DEVELOPMENT
	IN THE ECONOMICALLY DEPRESSED AREAS OF THE US. IN PARTICULAR, TO
	UNDERTAKE ACTIVITIES THAT: - RELIEVE POVERTY AND LESSEN NEIGHBORHOOD TENSION CAUSED BY A LACK OF
	JOBS IN DETERIORATED AND DEPRESSED AREAS BY PROVIDING TRAINING
	OPPORTUNITIES FOR THE UNEMPLOYED AND CREATING JOB OPPORTUNITIES FOR
	DISADVANTAGED GROUPS.
	- COMBAT COMMUNITY DETERIORATION AND ELIMINATE BLIGHT BY UNDERTAKING
	ACTIVITIES THAT STIMULATE THE ESTABLISHMENT OF NEW BUSINESSES AMONG
	DISADVANTAGED GROUPS AND WHICH REHABILITATE AND REVIVE EXISTING
	BUSINESSES OPERATED BY DISADVANTAGED GROUPS.
	SEE SCHEDULE O.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ▶ 98,438,905.
	Form 990 (2014)

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 1 'Yes, 'complete Schedule B, Schedule B, Schedule B, Schedule Of Contributors' 2 Is the organization engage in direct or indirect political campaging activities, or have a section 501(h) election in effect during the tax year? If 'Yes, 'complete Schedule C, Part II 3 X X X Section 501(e)(S) organization D, of 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 5 X 4 X 5 Section 501(e)(S) organization b. Of the organization of the tax year? If 'Yes, 'complete Schedule C, Part III 5 X 5 D de morganization maintain any done advised 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 C, Part III 5 X 7 Did the organization reserve or hold a conservation easement, enabling assements to preserve open space, the environment, hardors claim cases, or historis structures? If 'Yes, 'complete Schedule C, Part III 8 Did the organization maintain any done of works of art, instronal treasures, or other similar assessity If 'Yes, 'complete Schedule D, Part III 9 Did the organization maintain any done of works of art, instronal treasures, or other similar assessity If 'Yes, 'complete Schedule D, Part III 10 Did the organization shapes for through a related organization, hold assets in hemporarily restricted endowments, permanent endowments, or quasiendownents? If 'Yes, 'complete Schedule D, Part IVII 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 Part IVIII but organization report an amount for eventiments - propagain related in Part X, line 13 Part X, line 13 Part X, line 13 Part X, line 13 Part X in 14 D Part X in 15 Part				Yes	No
2 is the organization required to complete Schedule B, Schedule C Contributors 9 both the organization engage in direct or uniferior londical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 3 x 4 x 5 is the organization as earton 501(n)(4), 501(n)(5), or 501(n)(5) organization that receives membrarship dues, assessments, or similar amounts as defined in Neevine Procedure 98-197 If "Yes," complete Schedule C, Part II 6 bit the organization invariation any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 bit the organization receive or hold a conservation easament, including assements to preserve open space, the environment, historic land areas, or historic attributes? If "Yes," complete Schedule D, Part II 8 bit the organization maintain any donor advised funds or account histority; serve as a custodian for amounts not lated in Part X, or provide circled consensing, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part II 9 bit the organization interior of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis-endowments? If "Yes," complete Schedule D, Part IV 10 bit the organization interior of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis-endowments? If "Yes," complete Schedule D, Part VII 10 bit the organization report an amount for land, buildings, and equipment in Part X, line 10 If "Yes," complete Schedule D, Part VII 11 bit the organization report an amount for land, buildings, and equipment in Part X, line 10 If "Yes," complete Schedule D, Part VII 11 bit the organization included in consolidated financial statements for the tax year? 12 bit the organization included in consolidated fi	1		_	v	
3 Dit the organization angage 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 section 501(k) organizations. Did the organization engage in lobbying activities, or have a section 501(k) election in effect during the tax year? If "Yes," complete Schedule C, Part II is the organization a section 501(k) (4)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)	_	·			
public office? If "Yes," complete Schedule C, Part I Section 501(ki)3 organizations. Ddt the organization engage in lobbying activities, or have a section 501(ki) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(ki)4, 501(ki)5, or 501(ki)5 organization that neceives membership dues, assessments, or similar amounts as definion in Neemue Procedure 98-197 If "Yes," complete Schedule C, Part III organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Dd the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part III Dd the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Dd the organization maintain and plant in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X, in protein Schedule C, Part III Dd the organization report an amount in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X, line 19rt X, line 19r				21	-
4 Section 501(s)3) organizations. Did the organization engage in lobbying activities, or have a section 501(s)4) election in effect during the tax year? if "Yes," complete Schedule C, Part II is the organization a section 501(s)(4), 501(s)(5), or 501(s)(5) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part II organization marked any donor davised 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 II or Did the organization received not did a conservation assesment, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II organization marked in collections of works of art, historical treasures, or other similar assets? If "Yes, complete Schedule D, Part II organization marked in Part X, in a 121, for ascrow 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 V if the organization services? If "Yes," complete Schedule D, Part V if the organization services? If "Yes," complete Schedule D, Part V if the organization services or any of the following questions is "yes," then complete Schedule D, Part V if the organization services or any of the following questions is "yes," then complete Schedule D, Part V if the organization services or any of the following questions is "yes," then complete Schedule D, Part V if the organization report an amount for investments - other ascurties 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 X in the organization report an amount for orther inabilities in Part X, line 15 that is 5% or more of its total assets reported in	3		3		x
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section \$50(e)(4), 501(6)(6), or \$501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization membran collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for secrow 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 III Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-indowments? If "Yes," complete Schedule D, Part VIII If the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities in Part X, line 107 If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XIII Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part XIII Did the organization report an amount for investments - organization Part X, line 167 If "Yes," complete Schedule D, Part XIII Did the organization orbital assets in Part X, line 157 Inta is 5% or more of its total assets	4	•			
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 98:197 if "Yes," complete Schedule C, Part II 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 II Did the organization nearest or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization manutation collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 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 Did the organization and part X, or provide oredit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV II the organization server to any of the following questions is "Yes," then complete Schedule D, Part V II If the organization server to any other securities in Part X, line 10? If "Yes," complete Schedule D, Part V II I	-		4		Х
smilar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any smillar 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 I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures II" I "Yes," complete Schedule D, Part II I Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not lated in Part X, or provide credit counseling, debt management, credit repart, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for investments, organization, hold assets in temporarily restricted endowments, permanent endowments, or quise-indowments or grounded organization, hold assets in temporarily restricted endowments, permanent endowments, or quise-indowments or grounded organization, hold assets in temporarily restricted endowments, permanent endowments, or grounded organization, hold assets in temporarily restricted endowments, permanent endowments, or grounded organization in epot an amount for investments or the assets in the organization report an amount for investments or the assets in the propriet organization report an amount for investments or the assets in the organization report an amount for orbid resident in Part X, line 10 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III Did the organization report an amount for orbid resident 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, Par	5				
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 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 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization report an amount in Part X, line 21, for escrive 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 negotation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a reliated organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-indowments? If "Yes," complete Schedule D, Part IV III the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV III Did the organization report an amount for investments - program related 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 IV III Did the organization report an amount for other liabilities 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 X III X		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		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 III Did the organization mantain collections of works of art, historical treasures, or other similar assests? If "Yes," complete Schedule D, Part III 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 Did the organization or any of the following questions, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V II If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V III Did the organization report an amount for investments - program related in Part X, line 13? If "Yes," complete Schedule D, Part X III Did the organization report an amount for investments - program related in Part X, line 13? If "Yes," complete Schedule D, Part X III Did the organization report an amount for their assets in Part X, line 15? If "Yes," complete Schedule D, Part X III Did the organization report an amount for their assets in Part X, line 15? If "Yes," complete Schedule D, Part X III Did the organization report on Part X, line 15? If "Yes," complete Schedule D, Part X III Did the organization orbital assets reported in Part X, line 15? If "Yes," complete Schedule D, Part X III Did the organization orbital and assets reported in Part X, line 15? If "Yes," complete Schedule D, Part X III Did the organization report on Part X, line 15? If "Yes," complete Schedule D, Part X III Did the organization report on Part X, column	6				
the environment, Instonciand areas, or histonic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, Instoncial treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 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, VIII, VIII, V, 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 VIII 10 Did the organization report an amount for investments - organization septement of the total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 10 Did the organization report an amount for order assets 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 10 Did the organization report an amount for order 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 X 111 X Did the organization report an amount for order 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 X 111 X Did the organization report an amount for order 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 X 111 X Did the organization report an amount for order asset in Part X, line 15? If "Yes," complete Schedule D, Part X 111 X Did the organization report on Part K, line 15 that is 5% or more of its total assets		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 V 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 III If the organization report an amount for limiting, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V III If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V III It III III III III III III III I	7				
Schedule D, Part III 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 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 11 If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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 VIII b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments - other securities 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 Did the organization report an amount for investments - other securities 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 Did the organization report an amount for other liabilities 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 X III III III IX 11a X 11b X 11c X 11b X 11c X 11c X 11c X 11c X 11d X			7		<u> </u>
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 courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 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 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 11 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 V 11 Did the organization report an amount for other assets 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 V 11 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 X 11 Did the organization report an amount for other iliabilities in Part X, line 15? If "Yes," complete Schedule D, Part X 11 Did the organization included in consolidated financial statements for the tax year include a footnote that addresses the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X In and X 11 S Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X and XII is optional 13 Is the organization answered "No" to line 12a, then completing Schedule D, Part X and XII is optional 14 In year in a part of the organization included in consolidated, independent	8	-			v
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 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 11 if the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI 12 if the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 13 b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 14 b 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 15 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 VIII 16 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 16 Did the organization obtain separate, independent audited financial statements for the tax year in If "Yes," complete Schedule D, Part X III 17 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III 18 Did the organization medical missage and the organization answered "No" to line 12a, then completing Schedule D, Part X III and III 18 Did the organization medical management of the III and IV 19 Did the organization medical or norsolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule E, Parts II and IV 19 Did the organization medical or norsolidated, independent audited financial statements for the tax year? If "Yes," complete Sche	•		8		
# Y'es, *complete Schedule D, Part IV 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 ### He organization sanswer to any of the following questions is "Yes, *then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes, *complete Schedule D, Part VI 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 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 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 X III Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's islability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes, *complete Schedule D, Part X IIII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes, *complete Schedule D, Part X IIII Was the organization included in consolidated, independent audited financial statements for the tax year? II "Yes, *complete Schedule D, Parts X IIIIII X X 12a	9				
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 1 If the organization share to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VIII, VII, 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 1 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 1 Did the organization report an amount for investments - other securities 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 VII 1 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 X II 1 Did the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part X II 1 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X II and XII II X III			9		х
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 if the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, VIII, VIII, X, 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 b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 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 VII 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 VII 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 VII 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 X III d Did the organization separate or consolidated financial statements for the tax year complete Schedule D, Part X IIII Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII Was the organization aschool described in section 170(b)(1)(A)(b)(P) II "Yes," complete Schedule E D 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? II' "Yes," complete Schedule F, Parts I III III Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or	10	•			
as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 107 if "Yes," complete Schedule D, Part VII 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 167 if "Yes," complete Schedule D, Part VII 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 167 if "Yes," complete Schedule D, Part VII 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 167 if "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 257 if "Yes," complete Schedule D, Part X d Did the organization is liability for uncertain tax positions under Filn 46 (ASC 740)? if "Yes," complete Schedule D, Part X 110 Did the organization included in consolidated, independent audited financial statements for the tax year? if "Yes," and if the organization included in consolidated, independent audited financial statements for the tax year? if "Yes," and if the organization and school described in section 170(b)(1)(A)(ii)? if "Yes," complete Schedule D, Part X I and XII is optional is the organization as school described in section 170(b)(1)(A)(ii)? if "Yes," complete Schedule E 110 Did the organization maintain an office, employees, or agents outside of the United States? 111 Did I deed organization in the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? if "Yes," complete Schedule F, Parts II and IV 112 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 II and IV 113 Did the organization report on Part IX, column (A), line 3, more than \$5			10		X
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 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 VII 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 d Did the organization report an amount for other liabilities 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 X d Did the organization report an amount for other liabilities 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 X d Did the organization report an amount for other liabilities 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 X d Did the organization obtain separate or consolidated financial statements for the tax year in the organization or separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional life X 12a X 12b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X and XII is optional life by X life organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization naswered "No" to line 12a, then completing Schedule D, Parts X and XII is optional life by X life organization in a school described in section 170(b)(1)(A)(i)(i) If "Yes," complete Schedule	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			
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 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 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 X III e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III f Did the organization included in consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII 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 is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E b Did the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E b Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 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 G, Part II 18 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A) in the organization report more than \$15,000 of e		•••			
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 18? If "Yes," complete Schedule D, Part VII 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 18? If "Yes," complete Schedule D, Part VIII 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 18? If "Yes," complete Schedule D, Part XI 11c X 11d X	а			37	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 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 e Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X f Did the organization is 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 110 Under organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII so optional is 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 is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13			11a	^	
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 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 110	b		116		x
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization bitain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII 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 is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13	_	·	110	-	
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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III 2 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if 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 is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 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 17 Did the organization report more than \$15,000 of expenses f	Ü		11c	х	
Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e X 11d X 12 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 12b Did 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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 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 II and IV 16 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 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 II 18 Did the organization report 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 II 19 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organizati	d	, ·			
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 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 13 Is 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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the United States? 15 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 II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 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 II 17 Is Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 18 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			11d		X
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Is X It a Did the organization maintain an office, employees, or agents outside of the United States? In 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 Ib Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Ib 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 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines to and 8a? If "Yes," complete Schedule G, Part II 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Did the organization operate one or more hospital facilities? If "Yes	е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 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 13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 15 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 II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 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 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 18 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	f				
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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? 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 Ib Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Ib Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 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 Ib 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 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 cand 8a? If "Yes," complete Schedule G, Part II 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		•	11f		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 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the United States? 15 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 16 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 17 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 18 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 II 19 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization attach a copy of its audited financial statements to this return?	12a		40.		v
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 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 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 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 II 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Diff "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	h		12a		
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the United States? 14 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 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 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 II and IV 16 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 II 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	U		12h	x	
14a Did the organization maintain an office, employees, or agents outside of the United States? 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 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 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 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 17 IN	13				X
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 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 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 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 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 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 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a X End III III III III III III III III III I			14a		X
or more? If "Yes," complete Schedule F, Parts I and IV 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 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 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 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
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 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 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 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?					
foreign organization? If "Yes," complete Schedule F, Parts II and IV 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 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			14b		<u>X</u> _
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 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	15		45		🔻
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 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 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 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 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	46		15		├^
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 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	10		16		l x
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	17	•		 	
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 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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	-		17	L	Х
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 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	18				
complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b X		1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20a X 20b	19				
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?				├	
				-	
	D	ir res to line zoa, did the organization attach a copy of its addited financial statements to this return?		990	(2014)

CORPORATION-GROUP 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		v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	23	Х	
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	X	
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
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		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	Х	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
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		<u>X</u>
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 "Yes,"			
	complete Schedule L, Part II	26		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			v
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u>
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)	00-		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
•	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			
	Schedule N, Part II	32		Х
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		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	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
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		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X 990	(2014)
		LOW	33U ((2014)

Form 990 (2014) CORPORATION-GROUP RETURN

Part V Statements Regarding Other IRS Filings and Tax Compliance

91-18	884	69	8
-------	-----	----	---

Page 5

•	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	0	res	140
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	ŏ	Ì	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Ť		
	(gambling) winnings to prize winners?	1c	İ	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u>'</u>	<u> </u>	\vdash
	filed for the calendar year ending with or within the year covered by this return	ol	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		l
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	1		┢
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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	 	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	100	 	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	}	x
b	If "Yes," enter the name of the foreign country	1 70	 	
_	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?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	 SC	-	┢
-	any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ca	 	┝▔
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	105		┢
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		x
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	1,5		╁
•	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	1.0	-	┝▔
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	·	X
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			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>		\vdash
	sponsoring organization have excess business holdings at any time during the year?	8		İ
9	Sponsoring organizations maintaining donor advised funds.	1		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			┢
а	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	7		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	7		
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.	7		
а	is the organization licensed to issue qualified health plans in more than one state?	13a	 	\vdash
_	Note. See the instructions for additional information the organization must report on Schedule O.	1.54	 	_
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1	1
_	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	┪		1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\vdash	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	\vdash	ᢡ
b				

91-1884698

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 18			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 2			
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	Х	
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
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	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?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
<u>Sec</u>	tion 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		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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?		٠,,	
a	The organization's CEO, Executive Director, or top management official	15a	Х	V
b	Other officers or key employees of the organization	15b		Х
46-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		х	
	taxable entity during the year?	16a		
D	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?	40L	х	
Sec	tion C. Disclosure	16b	Λ	
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed NONE			-
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) a	wadah	مار	
,_	for public inspection. Indicate how you made these available. Check all that apply.	vallati	n c	
	Own website Another's website X 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	l finan	cıal	
	statements available to the public during the tax year.		oidi	
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	ADAM ENNIS - 212-682-1106			
	708 THIRD AVENUE, NO. 710, NEW YORK, NY 10017			· · ·

Form 990 (2014)

91-1884698 Page 7

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

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.

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per week		, unle cer an					compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	Individual trustee or director	۰,			ated		organization	(W-2/1099-MISC)	from the
	related	nstee	Institutional trustee		, 8	Highest compensated employee	i	(W-2/1099-MISC)		organization
	organizations below	than th	bonal		nploy	yee yee				and related organizations
	line)	Individ	Institu	Officer	Key employee	E E	, E			0.9
(1) ANGELA BUTLER	1.00	┪	Ī				T			
BOARD MEMBER	49.00	X	l					2,933.	143,727.	18,076.
(2) ROBERT W. DAVENPORT	1.00									
CHAIRMAN/BD MEMBER	56.50	X		X				7,501.	367,553.	15,816.
(3) JOHN W. DOWNS	2.30									
BOARD MEMBER	42.70	X	L					11,597.	220,351.	38,224.
(4) STEPHANIE DUGAN	1.00	1		İ						
BOARD MEMBER	49.30	X	<u> </u>	<u> </u>	L	<u> </u>		2,876.	140,959.	33,139.
(5) JOHN A. FINKE	45.00	┨	l	l		1		204 040	22 522	26 524
VP/BD MEMBER		X	<u> </u>	X	L.	ļ	<u> </u>	301,840.	33,538.	36,794.
(6) THOMAS JACKSON	1.00	١.,	İ					2 207	161 535	24 402
BOARD MEMBER	49.00	X	<u> </u>	_	L	-	<u> </u>	3,297.	161,535.	34,403.
(7) DANIEL MARSH III	1.10	x		x				E 102	253,882.	72 220
PRES/BD MEMBER (8) JOHN PALYO	1.00	╇	-	₽	⊢	-		5,182.	233,002.	73,229.
BOARD MEMBER	49.00	X					l	4,187.	205,173.	34,078.
(9) PATRICIA THOMSON	1.00	Ĥ			┢	┢	╁	4,107.	203,173.	34,070.
BOARD MEMBER	49.00	\mathbf{x}						4,197.	205,649.	42,346.
(10) DAVID J. TREVISANI	35.00	╀	╁╴		H		H	-,,-	200,0220	
BOARD MEMBER	15.00	\mathbf{x}						104,042.	44,590.	35,603.
(11) ANN VOGT	5.50				T	1	† '''	· · · · · · · · · · · · · · · · · · ·		<u>-</u>
SEC/TREAS/BD MEMBER	50.00	X		Х				25,831.	232,484.	16,826.
(12) GERTRUDE SCRIVEN	0.50									
BOARD MEMBER	49.50	X		L	l	ļ	<u> </u>	1,409.	139,492.	17,506.
(13) ADAM ENNIS	15.00									
CFO/BD MEMBER	35.00	X		X				33,503.	78,173.	33,576.
(14) KEVIN GREMSE	1.00]								
BOARD MEMBER	49.30	_	<u> </u>	L	<u> </u>	L	<u> </u>	3,897.	190,963.	33,203.
(15) JOHN LINNER	2.50	↓								22 - 22 -
BOARD MEMBER	47.50		<u> </u>		<u> </u>	_	$oldsymbol{oldsymbol{\perp}}$	8,128.	154,440.	33,604.
(16) SVANTE MYRICK	0.30								_	_
DIRECTOR	0.20		├	<u> </u>	₽	\vdash	ـــ	0.	0.	0.
(17) INGRID NARDONI	7.50 42.80	_						20 706	117 040	25 025
BOARD MEMBER 432007 11-07-14	42.00	X	<u> </u>		<u> </u>	Ь	1	20,796.	117,848.	35,825. Form 990 (2014)

CORPORATION-GROUP RETURN

Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (F) (A) (D) (E) Position Average Reportable Reportable **Estimated** Name and title (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations trustee or director the compensation hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations and related ey employee ndividual below organizations line) (18) STEVEN THAYER 0.30 0.20 0. 0. DIRECTOR X 0. (19) SCOTT RODDE 0.90 4,661. 44.10 228,387. 33,123. X FIELD DIRECTOR 0.50 (20) MATTHEW WEXLER 1,599 158,261. 33,703. FIELD DIRECTOR 44.50 X 0.90 (21) CHUCK DEPEW 44.10 X 2,692. 131,900. 34,643. FIELD DIRECTOR 550,168. 3,208,905. 1b Sub-total 0. Ο. 0. c Total from continuation sheets to Part VII, Section A 3,208,905. 550,168. 633,717. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on Х line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization Х and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors** 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
TRAMMELL CROW COMPANY LLC, 3501 JAMBOREE ROAD, SUITE 230, NEWPORT BEACH, CA 92660	DEVELOPMENT SERVICES	22,689,634.
GILBANE BUILDING COMPANY 7 JACKSON WALKWAY, PROVIDENCE, RI 02903	GENERAL CONTRACTING SERVICES	15,385,662.
GHEMM COMPANY, INC	GENERAL CONTRACTING SERVICES	11,904,559.
CITY INVESTORS DEVELOPMENT LLC, 505 5TH	DEVELOPMENT SERVICES	
WRIGHT RUNSTAD & COMPANY		
Total number of independent contractors (including but not limited to those lister	DEVELOPMENT SERVICES and above) who received more than	2,853,593.
\$100,000 of compensation from the organization		

Form **990** (2014)

Page 9

	_		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
·	•				-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a					
Gra Nou		b	Membership dues	1b					
ts,		C	Fundraising events	1c					
Ę į		d	Related organizations	1d	355,776.				
S.E	l		Government grants (contribut		14,896,385.		}		
e jë		f	All other contributions, gifts, gran						
듗뙅			similar amounts not included abo	ve 1f	15,000.				
Contributions, Gifts, Grants and Other Similar Amounts		g	Noncash contributions included in lines	1a-1f \$					
<u>a</u> <u>C</u>	_	h	Total. Add lines 1a-1f	<u> </u>	▶	15,267,161.			
Program Service Revenue					Business Code				
	2	а	INTEREST INCOME ON CAP	ITAL LEASE	531390	53,177,674.	53,177,674.		
		b	EXPENSE RECOVERIES		531390	13,488,149.	13,488,149.		
m S		C	PROGRAM RENTAL INCOME		531390	6,446,100.	6,446,100.		- <u>-</u>
gra		d	FEE INCOME		531390	2,912,772.	2,912,772.		
o d		e	US TREASURY REBATES		531390	2,800,000.	2,800,000.		
_	ŀ	T -	All other program service reve	enue	900099	2,250,507.	2,250,507.		
	١,	g	Total. Add lines 2a-2f			81,075,202.			
	3		Investment income (including	aiviaenas, inter	est, and				
	4		other similar amounts) Income from investment of tax	v averent band r					
	5		Royalties	x-exempt bond p	proceeds				
	3		noyanies	(i) Real	(v) Pomonal				
	<u>۾</u>	а	Gross rents	(I) Real	(II) Personal				
	ľ	b	Less: rental expenses		 				:
			Rental income or (loss)	-					
			Net rental income or (loss)	L	<u> </u>				
	٦		Gross amount from sales of	(i) Securities	(II) Other				· · · · · · · · · · · · · · · · · · ·
	•	_	assets other than inventory	() Cocantios	313,853.				
		b	Less: cost or other basis		·				
			and sales expenses		15,185,585.				
	ŀ	С	Gain or (loss)		-14,871,732.				
		d	Net gain or (loss)		•	-14,871,732.	-14,871,732.		
0	8	а	Gross income from fundraisin	g events (not				· · · · · · · · · · · · · · · · · · ·	
Jue			including \$	of					
) N			contributions reported on line	1c). See					
F			Part IV, line 18	. a					
Other Revenu		b	Less. direct expenses	b					
		C	Net income or (loss) from fund	draising events					
	9	а	Gross income from gaming ac	ctivities. See					
			Part IV, line 19	а					
			Less: direct expenses	b					1
			Net income or (loss) from gam	-					
	10	а	Gross sales of inventory, less	returns					
			and allowances	а					
			Less. cost of goods sold	. b					
	_	С	Net income or (loss) from sale		<u> </u>				
	_		Miscellaneous Revenu	<u> </u>	Business Code	ļ			
	11				<u> </u>				
		b							
		С	All all and		 				
		đ	All other revenue			·			
	40	е	Total. Add lines 11a-11d Total revenue . See instructions.			81 A70 621	66 202 470		
43200 11-07	9		TOTAL TOVERNO. SEE INSURCTIONS.		<u>P</u>	81,470,631.	66,203,470.	0.	0. Form 000 (2014)
11-07	-14								Form 990 (2014)

Form 990 (2014) CORPORATION-G
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	4 440	4		
	and domestic governments. See Part IV, line 21	1,552,618.	1,552,618.		
2	Grants and other assistance to domestic				
_	ındividuals. See Part IV, line 22				
3	Grants and other assistance to foreign	Í			
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,	-			
3	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):	2,572,004.		2,572,004.	
a	Management	2,372,004.		2,372,004.	
b	Legal Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	11,350.	11,350.		
12	Advertising and promotion				
13	Office expenses				
14	Information technology				· · · · · · · · · · · · · · · · · · ·
15	Royalties	2,618,753.	2,618,753.		
16 17	Occupancy Travel	2,010,7331	2,010,733.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	54,091,000.	54,091,000.		
21	Payments to affiliates	0 680 800	0 (80 800		
22	Depreciation, depletion, and amortization	8,678,728.	8,678,728.		
23	Insurance	882,156.	882,156.		
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 0.)				
а	OPERATING & MAINTENANCE	23,335,006.	23,335,006.		
b	OPERATING GROUND RENT	4,631,037.	4,631,037.		
c	ADMINISTRATIVE EXPENSES	1,748,844.		1,748,844.	
d	EQUIPMENT EXPENSE	723,775.	723,775.		
e	All other expenses	1,914,482.	1,914,482.		
25		102,759,753.	98,438,905.	4,320,848.	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 following SOP 98-2 (ASC 958-720)				
	Check here I if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)
Part X | Balance Sheet

Par	tΧ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
•	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	53,690,954.	1	11,359,400
	2	Savings and temporary cash investments	65,224,474.	2	92,580,614
	3	Pledges and grants receivable, net	7,916,836.	3	39,662
	4	Accounts receivable, net	3,368,348.	4	1,882,453
	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			
S		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	37,127,218.	7	24,406,172
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	929,110.	9	3,317,967
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 104, 963, 151.			
	ь	Less: accumulated depreciation 10b 16,508,993.	1025888630.	10c	88,454,158
	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	980,516.	13	967,481,009
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	79,060,097.	15	31,144,594
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1274186183.	16	1220666029
	17	Accounts payable and accrued expenses	2,336,324.	17	17,889,684
	18	Grants payable	750,000.	18	376,706
	19	Deferred revenue	18,045,606.	19	353,677
	20	Tax-exempt bond liabilities	1128415000.	20	1103847369
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
≝		key employees, highest compensated employees, and disqualified persons.			
Liabilities		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	19,722,840.	24	3,550,492
	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 .	91,412,689.	25	89,304,270
	26	Total liabilities. Add lines 17 through 25	1260682459.	26	1215322198
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 💹 and			
es		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	13,503,724.	27	5,343,831
Bai	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets		29	
显		Organizations that do not follow SFAS 117 (ASC 958), check here			
ō		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	40 500 50	32	
~	33	Total net assets or fund balances	13,503,724.	33	5,343,831
	34	Total liabilities and net assets/fund balances	1274186183.	34	1220666029 Form 990 (2014

Form **990** (2014)

Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
•	•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		, 47		
2	Total expenses (must equal Part IX, column (A), line 25)	2	102			
3	Revenue less expenses. Subtract line 2 from line 1	3	-21			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		,50		
5	Net unrealized gains (losses) on investments	5		<u>-13</u>	1,1	38.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		,09		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1	,16	9,5	93.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	5	,34	3,8	31.
Pai	t 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 X 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		Х
	if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis	.,			
	consolidated basis, or both					
	Separate basis X Consolidated basis Both consolidated and separate basis				ļ ,	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si					
	Act and OMB Circular A-133?	-		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
_				Form	990	(2014)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type !!! functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (ii) EIN listed in your (described on lines 1-9 support (see other support (see organization governing document? above or IRC section Instructions) Instructions) No (see instructions)) Total

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Pa	art II Support Schedule for						
	(Complete only if you checke				on failed to qualify	under Part III. If the	e organization
•	fails to qualify under the tests	isted below, plea	ase complete Part	III.)			
Se	ction A. Public Support			· -	· · · · · · · · · · · · · · · · · · ·		
Cal	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not]	
	ınclude any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf]			
3	The value of services or facilities				Ţ		
	furnished by a governmental unit to						
	the organization without charge			<u></u>		1.	
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a				1		
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		i				
	column (f)						
6	Public support. Subtract line 5 from line 4				†	<u> </u>	
	ction B. Total Support		·	•		<u> </u>	<u> </u>
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4			1	1	1	3:7
8	Gross income from interest,				 	†···	
	dividends, payments received on						
	securities loans, rents, royalties	1	ĺ				
	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			ļ			
	assets (Explain in Part VI.)		1				
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instructi	ons)	·		12	·
	First five years. If the Form 990 is for	•	•	rd. fourth, or fifth t	tax vear as a sectio		
	organization, check this box and stop	-	- mot, 0000110, till		an your do a scott	511 00 1 (0)(0)	
Se	ction C. Computation of Pub		rcentage				
14	Public support percentage for 2014 (line 6, column (f) d	ivided by line 11.	column (fl)		14	%
15	Public support percentage from 2013			ν,,	•	15	%
16a	33 1/3% support test - 2014. If the	•	•	on line 13, and line	14 is 33 1/3% or		
	stop here. The organization qualifies						▶ □
ŧ	33 1/3% support test - 2013. If the		•		d line 15 is 33 1/39	% or more, check th	nis box
	and stop here. The organization qual				10 10 10 00 1707	o or more, ericen a	▶ □
17:	10% -facts-and-circumstances tes	-			ne 13, 16a or 16b	and line 14 is 10%	or more
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"				<u>-</u>	at Fillow the organ	IIZZETO//
	10% -facts-and-circumstances tes	=			•	17a and line 15 :e	10% or
•	more, and if the organization meets the	_					
	organization meets the "facts-and-cire				•		.

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.)

Sac	 qualify under the tests listed better the propert 	elow, please comp	olete Part II.)				
	ndar year (or fiscal year beginning in)	(=) 2010	(b) 2011	(a) 2010	(4) 0012	(=) 2014	(A) Total
		(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and	ļ					
	membership fees received. (Do not	217,627.	224,538.	1116152	37035775	152767161	195591553
^	include any "unusual grants.")	211,021.	224,330.	4440432.	37933773.	132707101	193391333
2	Gross receipts from admissions, merchandise sold or services per-	ļ ļ					
	formed, or facilities furnished in						
	any activity that is related to the	89579101.	100355682	119372210	1 28848038	81075202	519230233
2		05575101.	100333002	117372210	120040050	010/3202.	515250255
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
	Tax revenues levied for the organ-						
4	ization's benefit and either paid to	ì					
	or expended on its behalf	1					
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6		89796728.	100580220	123818662	166783813	233842363	714821786
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	!					0.
ь	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	ļ					0.
c	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)				i		714821786
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	89796728.	100580220	123818662	166783813	233842363	(f) Total 714821786
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties			1			
	and income from similar sources	1550644.	10964515.	15408944.	1049553.		28973656.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	1550644.	10964515.	15408944.	1049553.		28973656.
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is				ļ		
	regularly carried on						· · · · · · · · · · · · · · · · · · ·
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Evolain in Part VI)	01247272	111544775	120007606	16702226	022042262	742705440
	Total support. (Add lines 9, 10c, 11, and 12)		•	•			
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a section	n 501(c)(3) organı	zation,
<u></u>	check this box and stop here	io Cupport Do	roomtogo	·			<u> </u>
	ction C. Computation of Publ			(0)		lae I	96.10 %
15	,, ,		-	column (t))	-	15	
	Public support percentage from 2013 ction D. Computation of Inve			· <u>·</u>		16	94.70 %
						1471	3.90 %
17				ne 13, column (I))		17	$\frac{3.90 \%}{5.00 \%}$
18	Investment income percentage from a 33 1/3% support tests - 2014. If the			on line 14 and has	a 15 ie mare that 1	18	
198		=					I7 is not ► X
	more than 33 1/3%, check this box a 33 1/3% support tests - 2013. If the				•		-
Ľ	line 18 is not more than 33 1/3%, ch	=					. —
20	Private foundation. If the organization		-	•		-	
<u> 20</u>	Fire organization.	m did flot trietk a	DON OF HILE 14, 18	a, or rab, crieck ti	INS DOV WHO SEC III		

Schedule A (Form 990 or 990-EZ) 2014 CORPORATION-GROUP RETURN

Part IV Supporting Organizations

- (Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

S

ec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		i
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3ь	1 1	•
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
•	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
40	Was any supported organization not organized in the United States ("foreign supported organization")? If			
70	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
L	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			\vdash
D	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
_		40	-	┢──
C	Did the organization support any foreign supported organization that does not have an IRS determination	}		
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	•		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			ĺ
_	purposes.	4c		
эa	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			1
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	_		
_	was accomplished (such as by amendment to the organizing document).	5a		<u> </u>
Þ	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
_	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<u>5c</u>		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class	l		
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	l _		
_	Part VI.	6		<u> </u>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			ļ
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent	l _		
_	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	-	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	i _		
_	If "Yes," complete Part I of Schedule L (Form 990)	8_		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	١ ـ		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	 	
þ	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which	۱		
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	-	├
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit	_		
_	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	├	
Oa	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
	organizations)? If "Yes," answer (b) below.	10a		<u> </u>
h	Did the organization have any excess business holdings in the tay year? (I lise Schedule C. Form 4720, to	ı	1	1

determine whether the organization had excess business holdings.)

NDC HOUSING & ECONOMIC DEVELOPMENT

Schedule A (Form 990 or 990-EZ) 2014 CORPORATION-GROUP RETURN 91-1884698 Page 5 Supporting Organizations (continued) Yes No 11 · Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? 11a **b** A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part vi Section B. Type I Supporting Organizations Yes No Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations No Yes Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). Section D. Type III Supporting Organizations No Yes 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions): The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete Ilne 3 below. Intering The The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) Activities Test. Answer (a) and (b) below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in part VI identify how these activities directly furthered their exempt purposes, those supported organizations and explain how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 3 Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3a b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

NDC HOUSING & ECONOMIC DEVELOPMENT

Schedule A (Form 990 or 990-EZ) 2014 CORPORATION-GROUP RETURN 91-1884698 Page 6

Pai	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			uctions. All
<u>. </u>	other Type III non-functionally integrated supporting organizations must co	mplete :	Sections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
<u>a</u>	Average monthly value of securities	1a		
<u>b</u>	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y-integr	ated Type III supporting ord	janization (see
	instructions)		3	•

Schedule A (Form 990 or 990-EZ) 2014

Par	t V Type III Non-Eupotionally Integrated 500	NoV2 KETOKN	onizations :	1-1004030 Page 7
Ь	Type in their tenedichary integrated coo	daylay aupporting org	anizations (continued)	1 - 2 - 14
	on D - Distributions			Current Year
1 2	Amounts paid to supported organizations to accomplish exe	- ' 		
2	Amounts paid to perform activity that directly furthers exem organizations, in excess of income from activity	pr purposes or supported		
	Administrative expenses paid to accomplish exempt purpos			
4		es of supported organization	18	
	Amounts paid to acquire exempt-use assets			
<u>-5</u> 6	Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI), See instructions.			
			 	
7	Total annual distributions. Add lines 1 through 6	h		
8	Distributions to attentive supported organizations to which t (provide details in Part VI). See instructions.	the organization is responsive	е	
	Distributable amount for 2014 from Section C, line 6			
9				
10	Line 8 amount divided by Line 9 amount		T (25)	(:::)
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
<u>b</u>				
<u> </u>				
d				
е	From 2013].		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7 \$			
a	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
<u>_</u> _b				
<u>_</u>				
	Excess from 2013			· · · · · · · · · · · · · · · · · · ·
	Excess from 2014			
		1	l	

Schedule A (Form 990 or 990-EZ) 2014

NDC HOUSING & ECONOMIC DEVELOPMENT

Schedule A	(Form 990 or 990-EZ) 2014 CORPORATION-GROUP RETURN	91-1884698	Page 8
Part VI	(Form 990 or 990-EZ) 2014 CORPORATION-GROUP RETURN Supplemental Information. Provide the explanations required by Part II, line 10, Part II,	line 17a or 17b; and Part III, line 1	2.
 -	Also complete this part for any additional information. (See instructions).	,	
	The complete this part for any additional information. (Coo metadeterla).		
•			
	·		
			•
		· · · · · · · · · · · · · · · · · · ·	
		·	
		<u></u>	
		 · · · · · · · · · · · · · · · · · · 	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
			_
	**************************************	· - · · · · · · · · · · · · · · · · · ·	
			

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.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

Pai	organizations Maintaining Donor Advisorganization answered "Yes" to Form 990, Part IV, III		s or Accounts. Complete if the
	organization answered Tes to Form 350, Partiv, iii	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of 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 advis	end funde
3	are the organization's property, subject to the organization's	_	Yes No
e	Did the organization inform all grantees, donors, and donor	_	
6	for charitable purposes and not for the benefit of the donor	- · ·	• • • • • • • • • • • • • • • • • • •
	• •	or donor advisor, or for any other purpose	Yes No
Pai	impermissible private benefit? t II Conservation Easements. Complete if the or	rganization answered "Ves" to Form 990. E	
	Purpose(s) of conservation easements held by the organiza		artiv, mic /.
1	Preservation of land for public use (e.g., recreation or		orically important land area
	Protection of natural habitat	·	cified historic structure
		Preservation of a cert	illed Historic structure
^	Preservation of open space	lifted concentation contribution in the form	of a concentation accomment on the last
2	Complete lines 2a through 2d if the organization held a qual	med conservation contribution in the form	or a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
_	Tetal number of concentation accoments		2a
a	Total number of conservation easements Total acreage restricted by conservation easements		2b
0	Number of conservation easements on a certified historic st	tructure included in (a)	2c
		• •	
ď	Number of conservation easements included in (c) acquired	raiter 6/17/06, and not on a historic struct	2d
_	listed in the National Register	cleaned extragruphed or terminated by th	<u></u>
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by thi	e organization during the tax
	year ▶Number of states where property subject to conservation e	enoment is legated	
4		<u> </u>	
5	Does the organization have a written policy regarding the policy regardi	_	Yes No
_	violations, and enforcement of the conservation easements		_
6	Staff and volunteer hours devoted to monitoring, inspecting	-	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about and eastern 170(b)(4)(D)(4)2	ove satisfy the requirements of section 170	Yes No
_	and section 170(h)(4)(B)(ii)?	tion comments in the revenue and expense	
9	In Part XIII, describe how the organization reports conserva include, if applicable, the text of the footnote to the organization	•	
		ation's illiancial statements that describes	the organization's accounting for
Pa	conservation easements. t III Organizations Maintaining Collections	of Art. Historical Treasures, or O	ther Similar Assets
	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116 (A		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc	·	
h	If the organization elected, as permitted under SFAS 116 (A		t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition,		
	relating to these items:	taranomi, or rossaron in laranomino of po	January provide the following amounts
	(i) Revenue 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 tr	reasures, or other similar assets for financia	
~	the following amounts required to be reported under SFAS		a. ga, provido
а	Payanua included in Form 900, Part VIII, line 1	, , ,	▶ \$
b	Assets included in Form 990, Part X		s
J	, woods moradou art our oos, r art /	•	F ¥

NDC HOUSING & ECONOMIC DEVELOPMENT 91-1884698 Page 2 CORPORATION-GROUP RETURN Schedule D (Form 990) 2014 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued) 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) а Public exhibition Loan or exchange programs Scholarly research Other b c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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 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 __ Yes _ No on Form 990, Part X? **b** If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c 1d d Additions during the year e Distributions during the year 1f Ending balance No 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 」Yes b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (e) Four years back (a) Current year (b) Prior year 1a Beginning of year balance Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 2 a Board designated or quasi-endowment Permanent endowment 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 Yes No by: (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? 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. (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value Description of property

basis (investment)

▶ 88,454,158. Schedule D (Form 990) 2014

3,203,000.

3,514,735.

234,638.

70,411,148.

11,090,637.

1a Land

b Buildings

d Equipment

e Other

basis (other)

3,203,000.

79,951,290.

10,327,949.

11,090,637.

390,275.

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

depreciation

9,540,142.

6,813,214.

155,637

c Leasehold improvements

NDC HOUSING	& ECONOMIC	DEVELOPMENT			
	I-GROUP RETUR	N	91-	-1884698	Page 3
Part VII Investments - Other Securities.					
`Complete if the organization answered "Yes"	to Form 990, Part IV, lin	e 11b. See Form 990, Part X,	line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio		-of-year market v	alue
(1) Financial derivatives			·		
(2) Closely-held equity interests			· · · · · · · · ·		
(3) Other					
(A)					
(B)					
(C)					
(D)	<u>† </u>			· ;	
(E)					
(F)	 				
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.	<u> </u>				
<u> </u>					
Complete if the organization answered "Yes" (a) Description of investment				-£	-1
	(b) Book value	(c) Method of valuatio	n: Cost or end	-of-year market v	alue
(1) SOCIAL INFRASTRUCTURE		- 			
(2) DEV. TO LESSEN THE BURDEN					
(3) OF GOVT	908,204,173				
(4) CDI BROOKLYN, INC.	55,550,000				
(5) NEW MARKET INVESTMENTS	30,953	• END-OF-YEAR	MARKET	VALUE	
(6) LOW INCOME HOUSING				·	
(7) PROJECTS	3,695,883	• END-OF-YEAR	MARKET	VALUE	
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	967,481,009	•			
Part IX Other Assets.					
Complete if the organization answered "Yes"	to Form 990, Part IV, line	e 11d. See Form 990, Part X,	line 15		
(a)	Description			(b) Book va	lue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)		•		
Part X Other Liabilities.					
Complete if the organization answered "Yes"	to Form 990, Part IV, line	e 11e or 11f. See Form 990, F	Part X. line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2) NET ORIGINAL ISSUE PREMIU	M.	19,403,393.			
(3) DUE TO GOVERNMENT		16,155,428.			
(4) LETTER OF CREDIT - M&T BA		14,540,387.			
(5) DEFERRED GROUND LEASE PAY	ABLE	9,616,111.			
(6) ADVANCE PAYABLE - AFFILIA	TE/HEDC	6,954,198.			
(7) CONSTRUCTION RETAINAGE PA		6,752,280.			
(8) CONSTUCTION DRAW PAYABLE		6,385,719.			
		· , , , 			

89,304,270. Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 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

Schedule D (Form 990) 2014

(8) (9)

	dule D (Form 990) 2014 CORPORATION-GROUP RETURN			ge 4
Pai	t XI Reconciliation of Revenue per Audited Financial State	ments With Reve		
	** Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a		
. 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:			
а	Net unrealized gains (losses) 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	-	
е	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.	1.1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	_ 4b		
_	Add lines 4a and 4b Table reviews Add lines 2 and 4a //hip must equal Form 990. Part / line 12.)		4c	
5 Dai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XII Reconciliation of Expenses per Audited Financial State	ments With Evne	5	
Га	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	-	nises per neturii.	
_		<u></u>		
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25		1	
2	Donated services and use of facilities	2a		
a	Prior year adjustments	2b		
b C	Other losses	2c 2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	_ <u>Zu</u>	2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		<u> </u>	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b	- L.:- J	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	•	5	
	t XIII Supplemental Information.		· · · · · · · · · · · · · · · · · · ·	_
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a	additional information.		
,				
			······································	

91-1884698 Page 5

Part XIII | Supplemental Information (continued) Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount DUE TO KEY BANK INTEREST RATE SWAP 4,213,662. DEFERRED RENT 1,287,745. 1,234,072. INSURANCE CLAIM PROCEEDS DEVELOPER FEES PAYABLE 952,380. RESERVE DEPOSITS 635,013. DUE TO UNIVERSITY OF WASHINGTON 603,063. DUE TO AFFILIATES 444,673. DUE TO CITY OF TACOMA 90,000. TENANT SECURITY DEPOSITS 35,365. DUE TO FUNDING PARTNERS CDP/LLC 781.

SCHEDULE (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.

OMB No 1545-0047 2014

Open to Public Inspection

Internal Revenue Service	▼ Informati	on about Schedule I	(Form 990) and its	instructions is a	t www in any/formage	9		Inspection
Name of the organization NDC HOUSING & ECOI		& ECONOMIC DEVELOPMENT	PMENT		•		Employer identification number	lentification number
Part I General Information on Grants and Assistance	ON - GROUP	NEI ORN					7	060#007
1 Does the organization maintain records to substantiate the amount of	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		
criteria used to award the grants or assistance?	stance?		A de ci ale ci ale ci al	0,000			X Yes	les No
Describe in Part IV the organization's procedures for monitoring the use or grant, full as in the Orinea States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Domestic Organi	zations and Domestic	Governments. C	omplete if the orga	Inization answered "Y	res" to Form 990, Part	IV, line 21, for an	
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II car	be duplicated if addit	ional space is need	ed.				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC 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
PROJECT RESTORE, LP 708 THIRD AVENUE, SUITE 710 NEW YORK, NY 10017	39-1943246	501(C)(3)	217,618.	0.			SUPPORT LOW-INCOME HOUSING	NCOME
ROGUE WINE BAR, LLC 88 WASHINGTON AVENUE NORWALK, CT 06854	26-3564181	501(C)(3)	15,000.	0			ECONOMIC DEVELOPMENT	LOPMENT
NDC HOUSING & ECONOMIC DEV. CORP. 709 THIRD AVENUE, SUITE 710 NEW YORK, NY 10017	11-2933129	501(C)(3)	1,320,000.	0.			TO SUPPORT OPERATIONS	ERATIONS
ĺ	ind government or	lsuoi	isted in the line 1 table				A 4	3.
LHA For Paperwork Reduction Act Notice, see the Instructions for For	s isted in the line, see the instruct	ions for Form 990.					Schedule I	Schedule I (Form 990) (2014)

NDC HOUSING & ECONOMIC DEVELOPMENT

CORPORATION-GROUP RETURN Schedule I (Form 990) (2014)

Page 2

91-1884698

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

(b) Type of grant or assistance	recipients	(e) Amount of cash grant	cash assistance	(book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required in	ed in Part I, line	2, Part III, column	 Part I, line 2, Part III, column (b), and any other additional information.	Iditional information.	
PART I, LINE 2:					
THE ORGANIZATION MONITORS THE USE OF		FUNDS BY	REQUIRING	GRANT FUNDS BY REQUIRING THE GRANTEE	
TO PROVIDE PERIODIC REPORTS THAT DESCR	IBE	THE USE OF	GRANT FUNDS.	.80	

SCHEDULE I, PART IV - ADDITIONAL INFORMATION

THE TWO (2) HUD SUPPORTIVE HOUSING PROGRAM GRANTS PROVIDE FUNDING FOR:

1) OPERATIONAL AND SUPPORTIVE SERVICES TO DISABLED HOMELESS INDIVIDUALS

AND FAMILIES ELIGIBLE TO LIVE IN 20 UNITS OF SCATTERED SITE TAX-CREDIT

FINANCED PERMANENT HOUSING IN MILWAUKEE, WISCONSIN AND;

432102 10-15-14

Schedule I (Form 990) (2014)

NDC HOUSING & ECONOMIC DEVELOPMENT

Sche	dule I	(Form 9	90)		CORPO	DRATION-	GROUP	RETURN			91-18	88469	8 Page 2
Pa	rt IV	Supp	lemen	tal Info	CORPO ormation)							
2).	нот	JSING	FOR	ном	ELESS	INDIVII	UALS A	ND FAM	ILIES	ELIGIBL	E TO LIVE	IN	29
UN:	ITS	OF S	CATT	ERED	SITE	TAX-CRI	DIT FI	NANCED	TRANS	SITIONAL	HOUSING	IN	
MI	LWAT	JKEE ,	WIS	CONS	IN.		_						
										· · · · · · · · · · · · · · · · · · ·			
						,							
									· · ·				
				••									
						•							
			., 	. <u></u>									
						<u></u>				 			
							,,,,,						
							,						
													<u> </u>
		<u> </u>					 .						
			_								-	<u></u>	

SCHEDULE J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990 NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number

91-1884698

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	ł		
	Travel for companions Payments for business use of personal residence]
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	l		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on 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, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
	and the state of t	-		
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			l
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
	Tom 550 of other organizations			İ
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:			ŀ
а	Receive a severance payment or change-of-control payment?	4a		х
h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
Ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40	-	
	The totally of lines 42 o, list the persons and provide the applicable amounts for each item in a art in.			ŀ
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations 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	1		
	contingent on the revenues of.	1		
а	The organization?	5a		X
b	Any related organization?	5b		X
	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			l
	contingent on the net earnings of:			
а	The organization?	6 a		X
b	Any related organization?	6b		X
	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	L	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Pagulations section 52 4059 6(a)2	۱ ۵	I	ı

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

Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

91-1884698

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred in prior Form 990
(1) ANGELA BUTLER	18	2,926.	0	7.	0	362.	3,295.	0
2	Ξ	143,	0	353.	0	17,714.	161,441.	0
(2) ROBERT W. DAVENPORT	Ξ	7,464.	0	37.	0	317.	7,818.	0
CHAIRMAN/BD MEMBER		365,	0	1,817.	0	15,499.	383,052.	0
(3) JOHN W. DOWNS	Į≘	11,	0	l	225.	1,686.	13,508.	0
BOARD MEMBER		217,	0	2,896.	4,275.	32,038.	256,664.	• 0
(4) STEPHANIE DUGAN	Į≘	2,	0	18.	0		١,	0
BOARD MEMBER		140,	0	900	0	32,477.	3,	0
(5) JOHN A. FINKE	≘	299,	0	2,744.	0		1,84	0
VP/BD MEMBER	(E)	33,	0	304.	0	3,560.	37,098.	0
(6) THOMAS JACKSON	≘	3,	0	21.	0	l	3,985.	0
BOARD MEMBER		160,	0	1,011.	0	3,	-	• 0
(7) DANIEL MARSH III	≘	١ ٠	0	32.	782.	33,441.	•	• 0
PRES/BD MEMBER	€	252,	0	1,552.	38,323.	683.	292,888.	0
(8) JOHN PALYO	≘	4,180.	0	7.	0		•	• 0
BOARD MEMBER		204,	0	353.	0	33,396.	•	• 0
(9) PATRICIA THOMSON	(i)	7 7	0	32.	l		-	0
BOARD MEMBER	E	204,	0	1,552.	8,567.	2	, 14	• 0
(10) DAVID J. TREVISANI	€	103,320.	0	722.	0	•	-	• 0
BOARD MEMBER	€	44,	0	310.	0	10,680.	-	0
(11) ANN VOGT	Ξ	2,	0	103.	0	-	27,	• 0
SEC/TREAS/BD MEMBER	Ξ	231,555.	0 •	929.	0	15,143.	247,627.	0
(12) GERTRUDE SCRIVEN	(3)	1,379.	0	3	0	174.		0
BOARD MEMBER	(ii)	136,	0	3,018.	0.	17,332.	`	• 0
(13) KEVIN GREMSE	(1)	3,890	0	7.	0	664.	4,561.	•0
BOARD MEMBER	≘	190,	0	353.	0	32,539.	223,502.	0
(14) JOHN LINNER	(3)	.976,7	0	152.	0	1,	808'6	0
BOARD MEMBER	(ii)	151,544.	0	2,896.		•	•	0
(15) INGRID NARDONI	(1)	19,	•	235.		5,	· ~I	0
BOARD MEMBER	≘	108,	8,500.	1,333.	0	30,451.	-1	0
(16) SCOTT RODDE	(i)	-	0			ļ	-	0
FIELD DIRECTOR	▤	225,400.	0.	2,987.	0.	32,460.	260,847.	0
432112							Sched	Schedule J (Form 990) 2014

Schedule J (Form 990) 2014

91-1884698

Page 2

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.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents		in column (b) reported as deferred in prior Form 990
(17) MATTHEW WEXLER	9	1,595.	0	4.	0	337.		
	E	Ī	0	35		33,366.	19	0.
(18) CHUCK DEPEW	Ξ	7	0	21.		693.		0
FIELD DIRECTOR	: 🗊	1	0.	1,011.	0	33,950.	165,850.	0
	Ξ							
1	(ii)							
	Θ							
1	▣							
	Θ							
	[(ii)							
	Ξ							
	Ξ							
	Ξ							
	€							
	Ξ							
	(iii)							
	[(j)							!
	[(ii)							;
	(1)							
	(ii)							
	(!)							
	(III)							
	(:)							
	<u> </u>							
] (!)							
	(iii)							
	(i)							
	⊞							
	Ξ							
	▣							
	ε							
	⊞							
432112				Ċ			Schedu	Schedule J (Form 990) 2014

432112 10-13-14

38

Schedule J (Form 990) 2014 CORPC

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.

PART I, LINE 4B:
NDC HAS ESTABLISHED A NONQUALIFIED DEFERRED COMPENSATION PLAN FOR THE
FIT
DEFINED IN SECTION 457(F) OF THE INTERNAL REVENUE CODE. THE AMOUNTS
REFLECTED AS 'NONQUALIFED' IN PART I, LINE 4 REPRESENT CONTRIBUTIONS MADE
NQUALIFIED DEFERRED COMPENSA
ANIZATION FOR THE BENEFIT OF THESE RESPECTIVE EMPLOY
VEORMATION REGARDING THIS PLAN.
Schedule J (Form 990) 2014

 \leftarrow ENTITY ×

×

×

×

4,565,000. 19,035,000. 2,086,771. 1,285,687. 15,662,542. (i) Pooled financing Yes No Employer identification number OMB No 1545-0047 2014 Open to Public 2005 ž Inspection ' (g) Defeased (h) On behalf 91-1884698 £ × × × Δ of issuer Yes Yes × ž × × × × 15,960,000. 14,218,764. 285,956 275,000 1,136,080 319,200 Yes × × × ŝ 2009 ပ (f) Description of purpose Information about Schedule K (Form 990) and its instructions is at www. Its. apv/form990. Yes 21230000.CONSTRUCTION 19035000.CONSTRUCTION 37317749.CONSTRUCTION 15960000.CONSTRUCTION ► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, 19,714,522. 21,230,000 372,076 112,175 5,015,000 1,031,227 × ž 2007 0 Supplemental Information on Tax-Exempt Bonds Yes explanations, and any additional information in Part VI. × (e) Issue price 3,470,000. 37,317,749. 33,771,832. 2.612.756 933,161 × × ŝ 2010 02/12/09 11/11/05 07/16/08 12/01/03 (d) Date issued Yes HOUSING & ECONOMIC DEVELOPMENT 26-1159878881566AN3 4-1742033|650861AB3| 16-1214039890099CN2 91-1874730|939783PX8| (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? CORPORATION-GROUP RETURN (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? ► Attach to Form 990. Has the final allocation of proceeds been made? Working capital expenditures from proceeds IND IDA Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds WASH. ST. HOUSING OF NEWBURGH Proceeds in refunding escrows NDC Issuance costs from proceeds Year of substantial completion COUNTY (a) Issuer name Part III Private Business Use TES PROPERTIES Other unspent proceeds Amount of bonds retired Total proceeds of issue FINANCE COMM. Other spent proceeds B DEV. AGENCY Name of the organization **Bond Issues** D TOMPKINS Proceeds Department of the Treasury Internal Revenue Service SCHEDULEK (Form 990) Part II Part I S ø 7 œ 6 9 ŧ 12 5 4 9 F

Schedule K (Form 990) 2014

×

×

×

40

482121 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

bond-financed property?

N

Are there any lease arrangements that may result in private business use of

Was the organization a partner in a partnership, or a member of an LLC,

which owned property financed by tax-exempt bonds?

ž

Yes

ŝ

Yes

ž

Yes

ŝ

Yes

œ

ENTITY 2

51,821,643. 13,370,000. 59,205,939. 6,283,618. 1,100,678. Schedule K (Form 990) 2014 (i) Pooled financing Yes No × × × **Employer identification number** × OMB,No 1545-0047 × 2014 Open to Public 2005 å ŝ Inspection (g) Defeased(h) On behalf 91-1884698 Ž × ٥ of issuer Yes Yes Yes × × × × × ŝ × × × × 2,810,000. 17,430,227. 10,879,910. 4,879,822 1,073,055 424,440 173,000 Yes × × × ŝ ŝ 2006 (f) Description of purpose O explanations, and any additional information in Part VI.

Information about Schedule K (Form 990) and its instructions is at www.lrs.gov/form990. Yes Yes CONSTRUCTION 191525824. CONSTRUCTION 17430227. CONSTRUCTION ▼ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, 62828180.REFUNDING 189,389,053. 191,525,824. 2,136,771 × ŝ ŝ 2009 8 m Supplemental Information on Tax-Exempt Bonds 59205939. Yes Yes (e) Issue price 62,828,180. 61,916,518. 475,149. 513 18,275,000 425,000 × × £ ŝ 11 12/05/06 04/05/06 01/22/04 03/08/07 (d) Date issued Yes Yes × × 41 & ECONOMIC DEVELOPMENT 20-5535917|65486MAAS 3-395279314983NBD2 20-074106289852NAA9 26-0073671899697AS5 482121 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of CORPORATION-GROUP RETURN Was the organization a partner in a partnership, or a member of an LLC, (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? ► Attach to Form 990. which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? HOUSING Working capital expenditures from proceeds III Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds NDC Proceeds in refunding escrows Year of substantial completion Issuance costs from proceeds COUNTY (a) Issuer name Part III Private Business Use B NJB PROPERTIES C TSB PROPERTIES Other unspent proceeds Amount of bonds retired bond-financed property? Total proceeds of Issue Other spent proceeds Name of the organization Bond Issues A CDP KING Proceeds Department of the Treasury Internal Revenue Service SCHEDULE K (Form 990) D TOP Part II Part I ß 9 က œ O 우 원 4 5 9 Ø

ന ENTITY

> Department of the Treasury Internal Revenue Service SCHEDULEK (Form 990)

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, Supplemental Information on Tax-Exempt Bonds

2014 Open to Public

OMB,No 1545-0047

Employer identification number

91-1884698

Inspection

explanations, and any additional information in Part VI.

Information about Schedule K (Form 990) and its instructions is at www.les.gov/form990. NDC HOUSING & ECONOMIC DEVELOPMENT ► Attach to Form 990.

(i) Pooled financing Yes No × × × × (g) Defeased (h) On behalf ž × × of issuer Yes × × ŝ × × × Yes × (f) Description of purpose 159465000.CONSTRUCTION 44027371.CONSTRUCTION 306214461.CONSTRUCTION 28995000.REFUNDING (e) Issue price 11/29/05 08/13/09 05/26/11 12/11/13 (d) Date issued 91-149300293975WCB9 91-1493002<mark>93975WEH4</mark> 26-2473717302716AU9 27-3473882<mark>|</mark>20368RAR5| (c) CUSIP # CORPORATION-GROUP RETURN (b) Issuer EIN ECONOMIC DEV DEV D CDP LOS ANGELES COUNTY ECONOMIC (a) Issuer name C FYI PROPERTIES WASHINGTON WASHINGTON **Bond Issues** A FIN. AUTH B FIN. AUTH Proceeds Part II Part

		⋖		8		ပ		Δ	
_	1 Amount of bonds retired	1,50	1,500,000.		45,685,000.	12,48	12,480,000.	7,6	7,660,000.
~	Amount of bonds legally defeased			113,	000,00				
ო	Total proceeds of issue	28,99	28,995,000.	159,4	465,000.	306,21	306,214,161.	44,0	44,027,371.
4	Gross proceeds in reserve funds			3	80,659.				
ۍ ا	Capitalized interest from proceeds								
ဖြ	Proceeds in refunding escrows								
-	Issuance costs from proceeds	40	405,166.	2,17	2,179,466.	4,39	4,398,514.	1,2	1,271,507.
80	Credit enhancement from proceeds								
6	Working capital expenditures from proceeds								
우	Capital expenditures from proceeds			157,20	157,204,875.	301,81	301,815,947.	42,7	42,755,864.
=	Other spent proceeds	28,58	28,589,834.						
2	Other unspent proceeds								
<u>E</u>	Year of substantial completion			7	2008	2	2011		2012
		Yes	No	Yes	No	Yes	No	Yes	No
4	Were the bonds issued as part of a current refunding issue?	X			×		×		×
₽	Were the bonds issued as part of an advance refunding issue?		X		x		×		×
9	Has the final allocation of proceeds been made?	X			X		X		X
1	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X			X		×		×
Pa	Part III Private Business Use				,				
		A		8		C		D	
-	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No

Schedule K (Form 990) 2014

×

×

×

42

422121 10-15-14 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

bond-financed property?

N

Are there any lease arrangements that may result in private business use of

which owned property financed by tax-exempt bonds?

×

×

×

ENTITY

Schedule K (Form 990) 2014 109,205,000. 183,203. (i) Pooled financing Yes × × × × 1,021,797 Employer identification number OMB No 1545-0047 × 2014 Open to Public å ŝ Inspection (g) Defeased (h) On behalf 91-1884698 ž × ۵ ۵ of issuer Yes Yes Yes × × × ž × × × × 51,579,296. 1,020,679 50,558,617 Yes × × × S. × ŝ 4 (f) Description of purpose Ç O Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
 Attach to Form 990. Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Yes Yes 26093889. CONSTRUCTION 44948240.CONSTRUCTION 51579296. CONSTRUCTION 109205000.REFUNDING 44,948,240 1,019,851 43,928,389 ş× × × ŝ 8 œ Supplemental Information on Tax-Exempt Bonds Yes Yes (e) Issue price 26,093,889. 544,205. 25,549,684. × × × × ş ž 2014 07/24/14 12/19/12 10/03/13 07/11/14 ⋖ (d) Date issued Yes Yes 43 NDC HOUSING & ECONOMIC DEVELOPMENT 46-2556598768870AP2 5-545474620401WAT9 45-3455657|19075HAV4| 91-1493002|93975WEC4 432121 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) CUSIP# Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of CORPORATION-GROUP RETURN Was the organization a partner in a partnership, or a member of an LLC, (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? Working capital expenditures from proceeds WASHINGTON ECONOMIC DEV COMMUNITY PROPERTIES Credit enhancement from proceeds Capital expenditures from proceeds RIVERSIDE COMMUNITY Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion INC (a) Issuer name Part III Private Business Use COB PROPERTIES Other unspent proceeds bond-financed property? Amount of bonds retired Total proceeds of Issue Other spent proceeds INC B PROP. DEV., Name of the organization **Bond Issues** D FIN. AUTH Proceeds Department of the Treasury Internal Revenue Service A ALASKA, SCHEDULEK (Form 990) PartII Part Ŋ ဖ œ 0 9 N 현 4 ო ٢ 15 9

IN.	
RETUR	
OUP	
-GF	
CORPORATION-	0-1-1-1
	CORPORATION-GROUP RETURN

91-1884698 Schedule K (Form 990) 2014

Page 2

Н

ENTITY

Part III Private Business Use (Continued)								,
ı	¥		8)	င	a	
3a Are there any management or service contracts that may result in private	Yes	No	Yes	οN	Yes	N _o	seA	No
business use of bond-financed property?		X		X		X		×
b if "Yes" to line 3a, does the organization routinely engage bond counsel or other outside						·		
counsel to review any management or service contracts relating to the financed property?						•		
c Are there any research agreements that may result in private business use of bond-financed property?		×		×		×		×
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by								
entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carried on by your organization, another				-				
section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X		X		X		×
8a Has there been a sale or disposition of any of the bond-financed property to a non-		×		X		×		×
						:		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If Yes to line 6a, was any remedial action taken pursuant to regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nongualified								:
Regulations sections 1.141-12 and 1.145-27		Х		X		×		×
Part IV Arbitrage								
	∀	-	8	_		S	ā	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	N _S	Yes	N _o	Yes	S.	Yes	No
Penalty in Lieu of Arbitrage Rebate?		×		×		×		×
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		×		×		×		×
b Exception to rebate?		×		×		×		×
c No rebate due?	×			×	×			×
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?		×		×	×			×
4a Has the organization or the governmental issuer entered into a qualified				1				
hedge with respect to the bond issue?		×		×		×		×
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
432122 10-15-14						Sc	Schedule K (Form 990) 2014	m 990) 2014

Ŀ	
ŒN	
Ξ	
Σ	
Д.	
VELOPMEN	
4	
긔	
>	
ν	
	1
	i
U	3
Ĥ.	1
Σ	
റ	i
ž	
\overline{c}	1
ŭ	į
ECONOMIC	
_	1
ß	į
~	
ליז	1
ING	i
o	ı
נה	i
5	
ቨ	
×	
HOUSING	
כז	

CORPORATION-GROUP RETURN Schedule K (Form 990) 2014

Page 2

2

ENTITY

91-1884698

Schedule K (Form 990) 2014 % % % % × × £ ş Yes Yes % % % % 윈× 윈× × × × × × × × C Yes Yes % % % % ĝ 윈서 × × × × × 8 0 Yes Yes % % % % 윋× ≗× × × × × X × Yes Yes × counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property? d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside governmental person other than a 501(c)(3) organization since the bonds were issued? Enter the percentage of financed property used in a private business use as a result of b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed 8a Has there been a sale or disposition of any of the bond-financed property to a nonc If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government bonds of the issue are remediated in accordance with the requirements under counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another If "Yes" to line 2c, provide in Part VI the date the rebate computation was Are there any management or service contracts that may result in private Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Has the organization or the governmental issuer entered into a qualified Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1.141-12 and 1.145-2? business use of bond-financed property? If "No" to line 1, did the following apply? Part III Private Business Use (Continued) Is the bond issue a variable rate issue? hedge with respect to the bond issue? Penalty in Lieu of Arbitrage Rebate? d Was the hedge superintegrated? e Was the hedge terminated? 432722 10-15-14 1.141-12 and 1.145-27 Total of lines 4 and 5 **b** Exception to rebate? a Rebate not due yet? **b** Name of provider c No rebate due? c Term of hedge Part IV Arbitrage performed æ 7 6 6 4 ß စ ო

NDC HOUSING & ECONOMIC DEVELOPMENT

 \mathbf{c}

ENTITY

Page 2 % % % × × ĝ ŝ Ω Yes Yes × % ፠ % % 윈× 2 × X × × × × Yes Yes × 91-1884698 % % % % 2× 윈× × × × × Yes Yes % % % % 윈서 윈× × × × × × × × Yes Yes × counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property? d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside governmental person other than a 501(c)(3) organization since the bonds were issued? Enter the percentage of financed property used in a private business use as a result of b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed 8a Has there been a sale or disposition of any of the bond-financed property to a nonc If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government CORPORATION-GROUP RETURN counsel to review any research agreements relating to the financed property? bonds of the issue are remediated in accordance with the requirements under Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another 3a Are there any management or service contracts that may result in private If "Yes" to line 2c, provide in Part VI the date the rebate computation was Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and 4a Has the organization or the governmental issuer entered into a qualified Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1.141-12 and 1.145-2? business use of bond-financed property? If "No" to line 1, did the following apply? Part III Private Business Use (Continued) Is the bond issue a variable rate issue? Penalty in Lieu of Arbitrage Rebate? Schedule K (Form 990) 2014 1.141-12 and 1.145-27 Total of lines 4 and 5 **b** Exception to rebate? a Rebate not due yet? c No rebate due? Part IV Arbitrage performed S) N 4 ဖ O က

Schedule K (Form 990) 2014

×

×

×

×

hedge with respect to the bond issue?

b Name of provider

c Term of hedge

d Was the hedge superintegrated?

e Was the hedge terminated?
10-15-14

Н	
>	
8	
Ξ	
죠	
Ö.	
LOP	
B	
>	
凶	
Д	
	1
U	į
ᄇ	ļ
Σ	ı
\mathbf{g}	ĺ
Ä	
\mathbf{g}	ŀ
ECONOMIC	į
4	
ĸ	i
~	•
ט	
ž	
H	ı
S	1
\Box	
0	ı
IDC HOUSING	1
٠.	
\simeq	
H	

4

ENTITY

Page 2 % % % × × × ဍ ŝ Yes Yes % % % % 윈x 윈× × × × × × × × × O O Yes Yes 91-1884698 % % % % ₽× 윈× × × × × × × × × 8 Yes Yes % % % % 윈× ş × × × × × × × × × × Yes Yes counsel to review any management or service contracts relating to the financed property? c Are there any research agreements that may result in private business use of bond-financed property? d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside governmental person other than a 501(c)(3) organization since the bonds were issued? Enter the percentage of financed property used in a private business use as a result of b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed 8a Has there been a sale or disposition of any of the bond-financed property to a nonc If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Has the organization established written procedures to ensure that all nonqualified entities other than a section 501(c)(3) organization or a state or local government CORPORATION-GROUP RETURN bonds of the issue are remediated in accordance with the requirements under counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by unrelated trade or business activity carried on by your organization, another 3a Are there any management or service contracts that may result in private If "Yes" to line 2c, provide in Part VI the date the rebate computation was Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and 4a Has the organization or the governmental issuer entered into a qualified Does the bond issue meet the private security or payment test? section 501(c)(3) organization, or a state or local government Regulations sections 1.141-12 and 1.145-2? business use of bond-financed property? if "No" to line 1, did the following apply? Part III Private Business Use (Continued) Is the bond issue a variable rate issue? hedge with respect to the bond issue? Penalty in Lieu of Arbitrage Rebate? Schedule K (Form 990) 2014 1.141-12 and 1.145-2? Total of lines 4 and 5 b Exception to rebate? a Rebate not due yet? b Name of provider c No rebate due? Part IV Arbitrage performed Ŋ 4 ဖ O N ო

Schedule K (Form 990) 2014

d Was the hedge superintegrated?

c Term of hedge

e Was the hedge terminated? 432722 10-15-14

& ECONOMIC DEVELOPMENT	
DE	5
NOMIC	בור בי
S S	CTTC
႘	ç
IDC HOUSING	זימוזשמת מוזכמט זיכדשגיםכניםני
20	Ç

Page 3

Н

ENTITY

91-1884698

NDC HOUSING & ECONOMIC CORPORATION-GROUP RETURN

Schedule K (Form 990) 2014

× × ŝ ŝ ۵ Yes Yes 24.0000000 CREDIT AGRICOLE COR နှ ŝ × × O O Yes Yes × × ₽× ĝ × × × 8 Yes Yes Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions). ŝ 2× × × ⋖ Yes Yes d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation is not available under applicable 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? 6 Were any gross proceeds invested beyond an available temporary period? Part V Procedures To Undertake Corrective Action Part IV Arbitrage (Continued) **b** Name of provider section 1487 c Term of GIC regulations?

Schedule K (Form 990) 2014

432123 10-15-14

C DEVELOPMENT	
ECONOMI	
ય	
HOUSING	
5	

~

ENTITY

CORPORATION-GROUP RETURN

× ŝ ŝ Yes Yes ŝ 윈서 × × × ပ O Yes Yes 91-1884698 윈서 ş × × × œ 0 Yes Yes Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) ŝ ₽× × × × Yes Yes d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation is not available under applicable 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? 6 Were any gross proceeds invested beyond an available temporary period? Part V Procedures To Undertake Corrective Action Part IV Arbitrage (Continued) Schedule K (Form 990) 2014 b Name of provider section 148? c Term of GIC regulations?

DEVELOPMENT	
& ECONOMIC DEVELOR	CONTRACT CONTRACTOR
ય્ય	į
NDC HOUSING	THE PROPERTY OF
NDC	ָרָ הַלְּי

91-1884698 CORPORATION-GROUP RETURN Part IV Arbitrage (Continued) Schedule K (Form 990) 2014

Page 3

က

ENTITY

Schedule K (Form 990) 2014 × × ŝ ŝ ۵ Yes Yes 윈× ž × × O ပ Yes Yes 2 × ş × × 8 Yes Yes Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) £ 2 × × × × Yes Yes d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation is not available under applicable 6 Were any gross proceeds invested beyond an available temporary period? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? Procedures To Undertake Corrective Action **b** Name of provider c Term of GIC section 1487 regulations? Part V 432123 10-15-14

DEVELOPMENT	- C-1
ECONOMIC I	I-GROUP RETURN
ଧ	Ä
NDC HOUSING	CORPORATION-

Page 3

ぜ

ENTITY

91-1884698

× × × ŝ ŝ Yes Yes 윈× ž × × × O Yes Yes 윈× ŝ × × × œ 8 Yes Yes Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions). SCHEDULE K, PART IV, ARBITRAGE, LINE 2C: ŝ ŝ × × × × 03/31/2015 DATE THE REBATE COMPUTATION WAS PERFORMED: 07/15/2015 DATE THE REBATE COMPUTATION WAS PERFORMED: 04/02/2015 DATE THE REBATE COMPUTATION WAS PERFORMED: 04/21/2015 DATE THE REBATE COMPUTATION WAS PERFORMED: 04/29/2015 DATE THE REBATE COMPUTATION WAS PERFORMED: 08/27/2015 09/30/2015 COMPUTATION WAS PERFORMED: 12/16/2014 Yes Yes ISSUER NAME: WASHINGTON ECONOMIC DEV. FIN. AUTH. AUTH. ISSUER NAME: WASH. ST. HOUSING FINANCE COMM. d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? FIN. DATE THE REBATE COMPUTATION WAS PERFORMED: DATE THE REBATE COMPUTATION WAS PERFORMED: Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation is not available under applicable ISSUER NAME: WASHINGTON ECONOMIC DEV. 6 Were any gross proceeds invested beyond an available temporary period? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? ISSUER NAME: CDP LOS ANGELES COUNTY CDP KING COUNTY III ISSUER NAME: FYI PROPERTIES TES PROPERTIES Part V Procedures To Undertake Corrective Action ISSUER NAME: TOP DATE THE REBATE ISSUER NAME: ISSUER NAME: Part IV Arbitrage (Continued) Schedule K (Form 990) 2014 b Name of provider section 148? c Term of GIC (A) (A) (A) (Y) (A) **E** <u>E</u> (A)

Schedule K (Form 990) 2014

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990 NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

FORM 990, PART I, LINE 1 NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION'S MISSION IS TO CREATE QUALITY AFFORDABLE HOUSING FOR THE DISADVANTAGED, TO STIMULATE ECONOMIC DEVELOPMENT AND CREATE JOBS IN LOW INCOME AREAS AND TO ERECT PUBLIC BUILDINGS TO LESSEN THE BURDENS OF GOVERNMENT AND PROMOTE SOCIAL WELFARE. FORM 990, PART III, LINE 1 NDC HOUSING AND ECONOMIC DEVELOPMENT CORPORATION WAS ORGANIZED FOR THE FOLLOWING CHARITABLE PURPOSES: TO CONSTRUCT NEW AND SUPPORT EXISTING SAFE AND ADEQUATE LOW-INCOME HOUSING FOR DISADVANTAGED PERSONS; THEREBY ASSISTING GENERALLY IN THE ALLEVIATION OF HOUSING SHORTAGES THROUGHOUT THE UNITED STATES; TO STIMULATE ECONOMIC DEVELOPMENT IN ECONOMICALLY DISTRESSED AREAS OF THE COUNTRY; AND TO ASSIST IN THE ERECTION AND MAINTENANCE OF PUBLIC BUILDINGS, MONUMENTS OR FACILITIES TO LESSEN THE BURDENS OF GOVERNMENTS, AND TO PROMOTE SOCIAL WELFARE. FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT LOW INCOME HOUSING: HEDC IS A NATIONAL LEADER IN PROVIDING LOW INCOME HOUSING THROUGH BOTH DEVELOPMENT AND INVESTMENT. WORKING IN PARTNERSHIP WITH NONPROFIT ORGANIZATIONS AND SERVICE PROVIDERS AROUND THE NATION, HEDC HAS DEVELOPED, FINANCED, OPERATED, AND/OR MANAGED A

INCOME HOUSING TOTALING \$1.1 BILLION OF INVESTMENT IN LOW INCOME

TOTAL OF 8,600 UNITS OF QUALITY, SAFE, ADEQUATE, AND AFFORDABLE LOW

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT **Employer identification number** CORPORATION-GROUP RETURN 91-1884698 COMMUNITIES IN 30 STATES ACROSS THE NATION. IN 2014 THROUGH OUR LOW INCOME HOUSING DEVELOPMENT AND INVESTMENT ACTIVITIES, HEDC CONSTRUCTED OR RENOVATED 458 UNITS OF QUALITY, SAFE, ADEQUATE, AND AFFORDABLE HOUSING FOR LOW INCOME PERSONS AND FAMILIES, THE ELDERLY, AND PEOPLE WITH SPECIAL NEEDS. INVESTMENT AND DEVELOPMENT ACTIVITIES TOTALED \$87 MILLION. FROM A NATIVE AMERICAN TRIBAL HOUSING PROJECT FOR FAMILIES IN MACY, NE (CDP MACY) TO A LOW INCOME TRANSITIONAL HOUSING PROJECT IN MILWAUKEE, WI (CD PARTNERS) TO A HOUSING PROJECT FOR SENIORS IN RURAL UPSTATE NEW YORK (CDP SYRACUSE), HEDC'S WORK IN 2014 RESULTED IN STABILIZING AND PRESERVING OVER 160 UNITS OF AT RISK HOUSING. CRITICAL TO THE RURAL AND URBAN AREAS OF OUR COUNTRY IS THE CONTINUED DEVELOPMENT OF QUALITY AFFORDABLE HOUSING. THE SUCCESS OF THESE PROJECTS IS DEPENDENT ON THE PARTNERS AND THEIR ABILITY TO MANAGE THESE PROJECTS. IN ALL THREE OF THESE PROJECTS, HEDC PLAYED A PARTNERSHIP ROLE STEPPING IN TO PROVIDE MANAGEMENT SUPPORT TO THE GENERAL PARTNERS AND THE PROPERTY MANAGERS. WHILE THE ROLE FOR HEDC WAS A BIT DIFFERENT IN EACH CASE THE END RESULT WAS TURNING AT RISK HOUSING TO BETTER MANAGED HOUSING AND PRESERVING AT RISK SUBSIDIES TO ALLOW FORMERLY HOMELESS RESIDENTS, LOW INCOME SENIORS

THE FOLLOWING IS A SAMPLING OF HEDC AFFORDABLE HOUSING PROJECTS

AND NATIVE AMERICAN FAMILIES TO REMAIN IN THEIR HOMES.

COMPLETED IN 2014:

Employer identification number 91-1884698

MCKINSTRY PLACE - DETROIT, MICHIGAN - WITH THE HIGHEST UNEMPLOYMENT RATE OF ANY MAJOR CITY IN THE COUNTRY, PERHAPS NO OTHER CITY IS MORE DISTRESSED THAN THE ONCE VIBRANT MOTOR CITY. HOUSING HAS BEEN PARTICULARLY HARD HIT. YET THE SOUTHWEST NEIGHBORHOOD IS GROWING, HOME TO INCREASING NUMBERS OF HISPANIC AND MIDDLE EASTERN IMMIGRANTS. COMMERCIAL STRIPS IN THE NEIGHBORHOOD ARE MARGINALLY HEALTHY, STOREFRONTS ARE OCCUPIED AND THERE IS ACTIVITY ON THE STREETS. IN THE SOUTHWEST NEIGHBORHOOD, HEDC COMPLETED A SECOND DEVELOPMENT MCKINSTRY PLACE A 25 UNIT QUALITY AFFORDABLE FAMILY HOUSING DEVELOPMENT. THE SCATTERED SITE "ENTERPRISE GREEN CERTIFIED" AFFORDABLE HOUSING PROJECT IN THE MEXICANTOWN AREA OF SOUTHWEST DETROIT IS COMPRISED OF TWO- AND THREE-BEDROOM UNITS FEATURING ENERGY EFFICIENT APPLIANCES (INCLUDING WASHERS AND DRYERS), CENTRAL AC, FRONT PORCHES AND FULL YARDS. EIGHT UNITS WITH PROJECT-BASED SECTION 8 RENTAL ASSISTANCE ARE DESIGNED FOR PERSONS WITH PHYSICAL DISABILITIES. WITH NO HARD DEBT, THE PROJECT IS ABLE TO OFFER QUALITY AFFORDABLE UNITS TO 12 HOUSEHOLDS AT 30, 40 AND 50% AMI; THE REMAINING UNITS ARE RESTRICTED AT 60%, AND ALL ARE WELL BELOW MARKET.

FREELAND, WA - SUNNY VIEW VILLAGE APARTMENTS IS THE NEW CONSTRUCTION OF

26 ONE, TWO AND THREE BEDROOM APARTMENTS. FREELAND IS LOCATED ON

WHIDBEY ISLAND IN ISLAND COUNTY, WASHINGTON. SINCE 1993 THERE HAS BEEN

LITTLE INVESTMENT IN MULTI-FAMILY HOUSING ON WHIDBEY ISLAND, WITH ONLY

239 APARTMENTS BUILT. DURING A 2013 POINT IN TIME SURVEY, ISLAND

COUNTY HAD 126 HOMELESS INDIVIDUALS AND FAMILIES, AND ANOTHER 285 WHO

WERE LIVING WITH FAMILY OR FRIENDS. SUNNY VIEW WILL ADD 19 UNITS AT 50%

AMI AND 6 UNITS AT 60% AMI. SUNNY VIEW WILL SET ASIDE 7 OF ITS 25

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT **Employer identification number** CORPORATION-GROUP RETURN 91-1884698 UNITS FOR HOMELESS/VERY LOW INCOME FAMILIES. THESE 7 UNITS WILL HAVE PROJECT BASED SECTION 8 RENTAL SUBSIDIES. VIA A MEMORANDUM OF UNDERSTANDING WITH THE HOUSING AUTHORITY OF ISLAND COUNTY (THE PROJECT'S SPONSOR), THE NON-PROFIT OPPORTUNITY COUNCIL WILL PROVIDE REFERRALS, CASE MANAGEMENT AND OTHER SERVICES AT NO COST TO THE PROJECT. THESE SERVICES WILL CONTINUE UNTIL RESIDENTS EITHER NO LONGER NEED THEM OR THEY TRANSITION TO THE HOUSING AUTHORITY'S FAMILY SELF-SUFFICIENCY PROGRAM. THE PROJECT IS DESIGNED IN ACCORDANCE WITH THE WASHINGTON STATE EVERGREEN SUSTAINABLE DEVELOPMENT STANDARDS. THREE OF THE FOUR BUILDINGS WILL HAVE 8 UNITS AND THE FOURTH BUILDING WILL INCLUDE 2 UNITS, THE COMMON LAUNDRY FACILITY AND A SMALL MEETING UNITS WILL RANGE IN SIZE FROM 610 TO 975 SQUARE FEET AND HAVE A ROOM. PRIVATE DECK OR PATIO.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT

LESSENING THE BURDENS OF GOVERNMENT: HEDC ALSO PARTNERS WITH UNITS OF

LOCAL GOVERNMENT TO ERECT AND MAINTAIN PUBLIC BUILDINGS, MONUMENTS,

FACILITIES, AND WORKS TO LESSEN THE BURDENS OF GOVERNMENT AND TO

PROMOTE SOCIAL WELFARE. IN TOTAL, HEDC HAS DEVELOPED AND FINANCED MORE

THAN THIRTY PROPERTIES COSTING MORE THAN \$2 BILLION ON BEHALF OF LOCAL

GOVERNMENT INCLUDING PUBLIC BUILDINGS AND CITY HALLS, EDUCATIONAL AND

MEDICAL RESEARCH FACILITIES, STUDENT HOUSING, AND PUBLIC

INFRASTRUCTURE.

DURING 2014, HEDC UNDERTOOK THE FOLLOWING PROJECTS UNDER THE MISSION OF LESSENING THE BURDENS OF GOVERNMENT.

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT **Employer identification number** 91-1884698 CORPORATION-GROUP RETURN BOTHELL CITY HALL - BOTHELL, WA THE CITY OF BOTHELL WAS REQUIRED TO OFFER A CENTER OF BUSINESS TO ITS CITIZENRY. THE NEW LOCATION EVOLVED OUT OF A COMMUNITY-LED PUBLIC PLANNING PROCESS, WHICH PLACED THE NEW CITY HALL ACROSS FROM THE EXISTING POLICE FACILITIES AND MUNICIPAL COURT BUILDING, CREATING A LOCAL GOVERNMENT DISTRICT COMMON IN MANY MUNICIPALITIES ACROSS THE COUNTRY. THE NEW LOCATION ALSO PLACES CITY HALL ALONG THE COMMUNITY'S HISTORIC MAIN STREET. THE SITE IS ADJACENT TO THE FUTURE TRANSIT-FRIENDLY 185TH STREET CONNECTOR, WHICH CONNECTS DOWNTOWN TO THE REGION THROUGH MAJOR METRO, SOUND TRANSIT AND COMMUNITY TRANSIT ROUTES. BOTHELL CITY HALL WILL BE A LEED GOLD STRUCTURE OF APPROXIMATELY 60,000 SQUARE FEET OF OFFICE AND 300 SPACES OF UNDERGROUND PARKING. BOTHELL SELECTED HEDC'S PUBLIC-PRIVATE PARTNERSHIP MODEL BECAUSE OF ITS ABILITY TO EXPEDITE DELIVERY, OFFER A TURN-KEY PRODUCT AND PROVIDE FOR A TRANSPARENT DEVELOPMENT PROCESS. INDIO CRIMINAL JUSTICE LAW BUILDING - RIVERSIDE, CA THE INDIO CRIMINAL JUSTICE LAW BUILDING LOCATED IN THE CITY OF INDIO, RIVERSIDE COUNTY, CA WAS COMPLETED IN 2014. THE PROJECT INVOLVED THE DEVELOPMENT OF A 90,000 SF CRIMINAL JUSTICE LAW BUILDING THAT HOUSES THE RIVERSIDE COUNTY DISTRICT ATTORNEY, PUBLIC DEFENDER, COUNTY COUNSEL, LAW LIBRARY AND OTHER RELATED USES. THE COUNTY SELECTED HEDC BECAUSE OF ITS ABILITY TO EXPEDITE DELIVERY TO ACCOMMODATE ITS

WAYS. FIRST, THE PROJECT PROVIDED A COST-EFFECTIVE, TIMELY OPTION FOR

SCHEDULED NEED TO RELOCATE STAFF FROM THE EXISTING OFFICES LOCATED AT

THE JAIL SITE. THE PROJECT IS GREATLY BENEFITING THE COUNTY IN TWO

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT **Employer identification number** CORPORATION-GROUP RETURN 91-1884698 RIVERSIDE COUNTY TO UPGRADE AND MODERNIZE ITS ADMINISTRATIVE OFFICES FOR ITS CRIMINAL JUSTICE ADMINISTRATIVE DIVISIONS. SECONDLY, THE RELOCATION OF THE CURRENT COUNTY JUSTICE ADMINISTRATIVE OFFICES CREATED A DEVELOPMENT OPPORTUNITY TO INCREASE AND IMPROVE CORRECTIONAL FACILITIES, WHICH WILL REDUCE THE INCIDENCE OF EARLY RELEASE ASSOCIATED WITH OVERCROWDING IN THE CA PENAL SYSTEM. THE PROJECT WAS A RUNNER-UP FOR THE INTERNATIONAL P-3 AWARDS. THE LEED GOLD PROJECT ALSO INCLUDES A PARKING STRUCTURE AND SUSTAINABLE LANDSCAPING. FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT STIMULATE ECONOMIC DEVELOPMENT IN ECONOMICALLY DEPRESSED AREAS - HEDC WORKS WITH NONPROFIT ORGANIZATIONS AND SERVICE PROVIDERS AND UNITS OF LOCAL GOVERNMENT TO STIMULATE ECONOMIC DEVELOPMENT IN ECONOMICALLY DEPRESSED NEIGHBORHOODS ACROSS THE NATION. WORKING THROUGH THE NEW MARKETS TAX CREDIT PROGRAM AND WITH OTHER FINANCING, HEDC CREATES EMPLOYMENT AND ENTREPRENEURIAL OPPORTUNITIES FOR DISADVANTAGED GROUPS AND INDIVIDUALS, COMBATS COMMUNITY DETERIORATION, AND ELIMINATES SLUMS AND BLIGHT THROUGH NEW INVESTMENT IN LOW INCOME COMMUNITIES TO REHABILITATE AND REVITALIZE NEIGHBORHOODS. UNDER THE NEW MARKETS TAX CREDIT (NMTC) PROGRAM, HEDC HAS SPONSORED 86

PROJECTS TOTALING OVER \$1.7 BILLION OF NEW INVESTMENTS, CREATED OVER 8,600 PERMANENT JOBS FOR DISADVANTAGED INDIVIDUALS, AND BROUGHT BADLY NEEDED GOODS AND SERVICES TO LOW INCOME COMMUNITIES.

IN 2014, USING NEW MARKETS TAX CREDITS AND OTHER FINANCING, HEDC

COMPLETED 2 PROJECTS TOTALING \$22 MILLION OF INVESTMENTS. ONCE BOTH OF Schedule O (Form 990 or 990-EZ) (2014) Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

THESE PROJECTS ARE COMPLETED THEY WILL CREATE 498 PERMANENT JOBS FOR DISADVANTAGED INDIVIDUALS, AND OFFER ENTREPRENEURIAL OPPORTUNITIES TO

HIGHLIGHTS OF HEDC PROJECTS THAT WERE COMPLETED IN 2014 INCLUDED:

12TH AVENUE ARTS - SEATTLE, WA

DISADVANTAGED INDIVIDUALS.

HEDC WORKING WITH CAPITOL HILL HOUSING IMPROVEMENT PROGRAM (CHHIP) DEVELOPED AN UNDERUTILIZED, CITY-OWNED PARKING LOT INTO A 150,000 SQ. FT. MIXED USE, TRANSIT-ORIENTED DEVELOPMENT. 12TH AVENUE ARTS IS THE REALIZATION OF A DECADE-LONG EFFORT BY RESIDENTS TO RESTORE THE CULTURAL AND ARTISTIC VIBRANCY OF THE COMMUNITY AND WILL BE A KEY COMPONENT OF THE ONGOING REVITALIZATION OF THE CAPITOL HILL NEIGHBORHOOD. THE FACILITY HAS 6,200 SQ. FT. OF AFFORDABLE ARTS AND PERFORMANCE THEATER SPACE, 17,000 SQ. FT. OF OFFICE SPACE FOR NONPROFIT GROUPS, 6,000 SQ. FT. OF PEDESTRIAN ORIENTED RETAIL, 88 UNITS OF AFFORDABLE HOUSING AND A SECURE PARKING STRUCTURE WITH 111 PARKING STALLS FOR THE EXCLUSIVE USE OF THE CITY'S POLICE DEPARTMENT. THE RESIDENTIAL COMPONENT OF THE PROJECT WAS FINANCED IN PARTNERSHIP WITH NDC'S CORPORATE EQUITY FUND LIHTCS AND TAX EXEMPT BOND FINANCING. NMTCS WERE USED TO FINANCE THE NON-RESIDENTIAL COMPONENT OF THE PROJECT

ROSWELL PARK CANCER INSTITUTE - BUFFALO, NY

ROSWELL PARK CANCER INSTITUTE (RPCI), IS AMERICA'S FIRST CANCER CENTER FOUNDED IN 1898 BY DR. ROSWELL PARK. THE NON-PROFIT INSTITUTE HAS BEEN

PROVIDING HOSPITAL CARE TO A MEDICALLY UNDERSERVED AREA IN BUFFALO, NY

Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

FOR OVER 100 YEARS. WITH THE ASSISTANCE OF THE NDC AND THE NMTC

PROGRAM, RPCI IS CONSTRUCTING A 140,000 SQUARE FOOT CLINICAL SCIENCE

CENTER (CSC) BUILDING ON ITS CAMPUS. THE 11-STORY CSC BUILDING WILL

CONNECT THE MAIN HOSPITAL TO A NEW RESEARCH CENTER AND EXPAND THE

INSTITUTE'S CANCER PREVENTION PROGRAM SPACE BY 100%. BENEFITS INCLUDE

SPACE FOR ADMINISTRATIVE OFFICES PREVIOUSLY HELD IN THE MAIN HOSPITAL

AND SPACE FOR UP TO 10,000 ADDITIONAL COMMUNITY MAMMOGRAM SCREENINGS TO

BE PERFORMED EACH YEAR. THE INSTITUTE ALSO PLANS TO WORK WITH SEVERAL

AREA NONPROFIT AND GOVERNMENTAL ORGANIZATIONS TO RECRUIT LOW-INCOME

EMPLOYEES TO FILL JOBS CREATED BY THE PROJECT.

MAKAH FISHING PIER - NEAH BAY, WA

THE MAKAH MARINA SUPPORTS OVER 90 SMALL BUSINESSES IN THE NORTHWEST

WASHINGTON COASTAL TOWN OF NEAH BAY. THROUGH THESE OPERATIONS THE MAKAH

TRIBE UTILIZES THE PIER TO CREATE ABOUT \$7 MILLION A YEAR IN ECONOMIC

BENEFITS THROUGH DOCK LEASING, MOORAGE AND FUEL SALES. THE PIER HAD

DETERIORATED RAPIDLY IN RECENT YEARS, SINCE ITS LAST MAJOR REPAIR WAS

COMPLETED IN 1976. THROUGH THE USE OF NEW MARKETS TAX CREDITS THE DOCK

WAS STRUCTURALLY UPGRADED AND A NEW ICEHOUSE WAS BUILT, RESULTING IN

REDUCED OPERATING COSTS AND SAVINGS OF \$21,000 PER YEAR IN MAINTENANCE

COSTS. THE NEW FACILITY WILL ALSO ALLOW FOR EASIER LOADING AND

UNLOADING OF EQUIPMENT AND GREATER READINESS FOR DISASTER RESPONSE

OPERATIONS. THANKS TO THE UPGRADED MARINA THE LIVELIHOOD OF THOUSANDS

HAS BEEN IMPROVED AND PRESERVED.

Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Employer identification number 91-1884698

ANN VOGT & INGRID NARDONI, BOARD MEMBERS, HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 6:

NDC IS SOLE VOTING MEMBER OF NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION WITH POWER TO ELECT AND REMOVE DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7A:

NDC IS SOLE VOTING MEMBER OF NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION WITH POWER TO ELECT AND REMOVE DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11:

THE FORM 990 WAS PREPARED BY OUTSIDE TAX PREPARERS IN CONSULTATION WITH MANAGEMENT AND AUDITORS. A DRAFT OF THE FULL FORM 990 WAS PROVIDED TO THE ENTIRE BOARD FOR REVIEW. A COMPLETE COPY OF THE FINAL FORM 990 WAS PROVIDED TO THE ORGANIZATION'S ENTIRE BOARD BEFORE IT WAS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL MEMBERS OF THE HEDC BOARD OF DIRECTORS AND EXECUTIVE EMPLOYEES ARE
REQUIRED TO ANNUALLY EXECUTE A CONFLICT OF INTEREST AND COMPENSATION

GUIDELINES ACKNOWLEDGEMENT STATING THAT THEY HAVE RECEIVED, READ AND

UNDERSTAND, AND AGREE TO COMPLY WITH THE CONFLICT OF INTEREST AND

COMPENSATION GUIDELINES. THE CONFLICT OF INTEREST AND COMPENSATION

GUIDELINES DOCUMENT REQUIRE BOARD MEMBERS AND EXECUTIVE EMPLOYEES TO

DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST IMMEDIATELY. THE CHAIRPERSON

OF THE BOARD WILL UPON NOTIFICATION OF SUCH AN EVENT APPOINT A

DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE

PROPOSED TRANSACTION VIOLATIONS OF THE CONFLICT OF INTEREST POLICY CAN

RESULT IN APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION. ALSO, ALL BOARD

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014) Page 2 Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT **Employer identification number** CORPORATION-GROUP RETURN 91-1884698 MEMBERS BY EXECUTING THE CONFLICT OF INTEREST AND COMPENSATION GUIDELINES DOCUMENT ACKNOWLEDGE THAT THEY SHARE THE RESPONSIBILITY OF HEDC TO REMAIN FAITHFUL TO THE ORGANIZATION'S CHARITABLE PURPOSES. FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION PROCESS FOR TOP OFFICIAL: THE BOARD OF DIRECTORS OF NDC HAS A STANDING COMPENSATION REVIEW COMMITTEE, THE MEMBERS OF WHICH ARE ALL INDEPENDENT DIRECTORS. THE COMMITTEE ENGAGES A THIRD PARTY INDEPENDENT CONSULTANT TO REVIEW THE COMPENSATION OF THE PRESIDENT EVERY TWO YEARS. THE COMMITTEE REVIEWS AND DISCUSSES THE FINDINGS AT A SPECIAL SESSION WITH ALL BOARD MEMBERS PRESENT EXCEPT THE PRESIDENT. FORM 990, PART VI, SECTION C, LINE 19: HEDC VOLUNTARILY MAKES AVAILABLE ITS GOVERNING DOCUMENTS, FORM 1023, AND FORM 990 UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D). FORM 990 IS AVAILABLE ON WWW.GUIDESTAR.ORG. FORM 990, PART VII, SECTION A & SCHEDULE J, PART II NDC HAS ESTABLISHED BOTH A QUALIFIED PENSION PLAN AND A NONQUALIFIED DEFERRED COMPENSATION PLAN FOR THE BENEFIT OF ITS EMPLOYEES. THE NONQUALIFIED DEFERRED COMPENSATION PLAN IS DEFINED IN SECTION 457(F) OF THE INTERNAL REVENUE CODE. THE BENEFITS UNDER THE NONQUALIFIED PENSION PLAN ARE GENERALLY NOT VESTED UNTIL COMPLETION OF SUBSTANTIAL REQUIREMENTS. HOWEVER, THE

BENEFITS UNDER THIS NONQUALIFIED DEFERRED COMPENSATION PLAN BECOME TAXABLE TO THE INDIVIDUAL UPON VESTING, EVEN THOUGH THE BENEFIT MAY NOT BE PAYABLE UNTIL A LATER YEAR OR YEARS. THE TAXABLE AMOUNT IS THE

Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT **Employer identification number** CORPORATION-GROUP RETURN 91-1884698 RESPECTIVE INDIVIDUAL'S LUMP SUM EQUIVALENT OF THE DEFERRED BENEFIT. DURING 2014 THE FOLLOWING INDIVIDUALS RECEIVED THEIR BENEFIT UNDER THE NDC 457(F) NON QUALIFIED DEFERRED COMPENSATION PLAN: JOHN DOWNS RECEIVED \$4,050 DANIEL MARSH III RECEIVED \$39,105 PATRICIA THOMSON RECEIVED \$8,742 FORM 990, PART VII & SCHEDULE J THE AMOUNTS REFLECTED ON FORM 990, PART VII, SECTION A AND SCHEDULE J ARE ALLOCATED AMOUNTS BASED ON AVERAGE HOURS AS COMPENSATION FOR SERVICES PROVIDED TO THE ORGANIZATION AND PAID BY NATIONAL DEVELOPMENT COUNCIL AS COMMON PAYMASTER UNDER EMPLOYER IDENTIFICATION NUMBER 13-6532871. BOARD MEMBERS ARE NOT COMPENSATED FOR THEIR BOARD SERVICE, THEY ARE COMPENSATED FOR THEIR SERVICE AS EMPLOYEES OF RELATED ORGANIZATIONS. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: WRITE OFF OF BOND PREMIUM 1,169,593. FORM 990, PART XI, LINE 8, PRIOR PERIOD ADJUSTMENTS: PRIOR PERIOD ADJUSTMENTS OF \$12,090,774 LARGELY CONSISTS OF FOUR ITEMS: 1) ADJUSTMENTS TO REMOVE THE BEGINNING NET ASSETS OF ENTITIES THAT WERE INCLUDED IN THE HEDC GROUP FORM 990 IN 2013 BUT FILED SEPARATELY FOR 2014 AND THUS ARE NOT INCLUDED IN THE HEDC GROUP FORM 990 FOR 2014; 2) ADJUSTMENTS TO ACCOUNT FOR LEASE TRANSACTIONS AS CAPITAL LEASES INSTEAD OF OPERATING LEASES; 3) ADJUSTMENTS TO RECOGNIZE INTEREST EXPENSE ON Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN	Employer identification number 91-1884698
BONDS PAYABLE IN ACCORDANCE WITH THE EFFECTIVE INTEREST	METHOD; 4)
ADJUSTMENTS TO SEPARATELY ACCOUNT FOR AND AMORTIZE BOND	DISCOUNTS AND
PREMIUMS USING THE EFFECTIVE INTEREST METHOD.	
	_

SCHEDULE R (Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 38, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

Open to Public Inspection 2014

OMB'No 1545-0047

Employer identification number 91-1884698

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN Name of the organization Department of the Treasury Internal Revenue Service

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

Part

Nar	(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
					<u></u>		
Part II Ide	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.	ions Complete if the organization ans	swered "Yes" on Form 990,	Part IV, line 34 beca	use it had one o	or more related tax-e)	empt

		2	2	2	3	2	7
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	iz(b) iz
of related organization	•	foreign country)	section	status (if section	entity	entity?	у2
				501(c)(3))		Yes	å
NATIONAL DEVELOPMENT COUNCIL - 13-6532871							
708 THIRD AVENUE, SUITE 710							
NEW YORK, NY 10017 SEE ATTACHED	таснер	NEW YORK	501(C)(3)	LINE 9	N/A		×
NDC SUPPORT I, INC 13-4156877					NATIONAL		
708 THIRD AVENUE, SUITE 710					DEVELOPMENT		
NEW YORK, NY 10017 SEE ATTACHED	TACHED	VIRGINIA	501(C)(3)	LINE 11A, I	COUNCIL		×
GROW AMERICA FUND, INC 13-3641265					NATIONAL		
708 THIRD AVENUE, SUITE 710					DEVELOPMENT		
NEW YORK, NY 10017 SEE ATTACHED	ТАСНЕD	VIRGINIA	501(C)(3)	LINE 9	COUNCIL		×
NDC HOUSING & ECONOMIC DEVELOPMENT CORP					NATIONAL		
GROUP - 91-1884698, 708 THIRD AVENUE, SUITE					DEVELOPMENT		
710, NEW YORK, NY 10017 ASSIST	ASSIST GOV/HOUSING	VIRGINIA	501(C)(3)	LINE 9	COUNCIL		×

64

91-1884698

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Schedule R (Form 990)

Part II Continuation of Identification of Related Tax-Exempt Organizations

						,	
(a)	(q)	(၁)	(Q)	(e)	Œ	(6)	6
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlle	(2 (2 (2 (3 (4)
of related organization		foreign country)	section	status (if section	entity	organizatı	on?
				501(c)(3))		Yes	S.
YONKERS LARKIN GARAGE, INC 80-0730609					NATIONAL		
708 THIRD AVENUE, SUITE 710					DEVELOPMENT		
NEW YORK, NY 10017	ASSIST GOV	NEW YORK	501(C)(3)	LINE 9	COUNCIL		×
NICKERSON AREA PROPERTIES - 30-0099064					NATIONAL		
1218 3RD AVENUE, SUITE 1403					DEVELOPMENT		
SEATTLE, WA 98101	ASSIST GOV	WASHINGTON	501(C)(3)	LINE 9	COUNCIL		×
KINGSBOROUGH HOUSING DEVELOPMENT FUND -					NATIONAL		
14-1734500, 708 THIRD AVENUE, SUITE 710, NEW					DEVELOPMENT		
YORK, NY 10017	HOUSING	NEW YORK	501(C)(3)	LINE 9	COUNCIL		×
						_	
	•						
432222		L.					

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN

Schedule R (Form 990) 2014

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.

Page 2

91-1884698

organizations treated as a partnership during the tax year.	irtnersnip during tne ta	ıx year.											
(a)	(q)	(0)	(p)	(θ)	(6	(J)	(6)		Œ	(0)	6	(K)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	<u> </u>		Share of total income	Share of end-of-year		Disproportionate allocations?	Code V-UBI amount in box	General of managing partner?	General or Percentage managing ownership partner?	ntage ship
		foreign country)		sections (512-514)		daseli	Yes	å	K-1 (Form 106) Yes No		
				_									
									ļ		-		
								_					
	_												
											_		
								-					
									_		 		
				_									
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.	ganizations Taxable a	as a Corport ag the tax	oration or Trust Co	omplete if the	e organization	answered "Ye	s" on Form 9	90, Part IV	line 34 t	oecause it had	one or m	ore relat	 8
(a)			(q)	(c)	(D)	(e)		€		(6)	Ξ		
Name, address, and ElN of related organization	N. c	Pring	Primary activity	Legal domicite (state or foreign	Direct controlling entity	Iling Type of entity (C corp, S corp,		Share of total income		Share of Pend-of-year c	Percentage ownership	512(b)(13) controlled entity?	×3€39
				country)		5	nor)			dosels		χθχ	욷
									•				
					:								
												-	
			•										
									+				
									_	_		_	

Schedule R (Form 990) 2014

99

432162 08-14-14

NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION-GROUP RETURN Schedule R (Form 990) 2014

36.
ō
, 35b,
¥,
<u>l</u>
≥
Part IV
990
orm 990,
Fo
유
,χes,
answered
n an
ğ
niž
g
the or
+
lete
ם
Ŝ
izations
atic
ıniz
rga
Related Or
ate
굞
윤
Σ×
sactions
acti
ans
Ŧ
art
B

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	%
1 During the tax year, did the organization engage in any of the following transactior	is with one or more re	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	>			a		×
 b Gift, grant, or capital contribution to related organization(s) 				0	×	
c Gift, grant, or capital contribution from related organization(s)				2	×	
d Loans or loan guarantees to or for related organization(s)				₽	X	
				1		×
					┢	
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)				19	_	×
h Purchase of assets from related organization(s)				ŧ		×
i Exchange of assets with related organization(s)				ij		×
j Lease of facilities, equipment, or other assets to related organization(s)				į		×
k Lease of facilities, equipment, or other assets from related organization(s)				*		×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ę	×	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoı			두		×
o Sharing of paıd employees with related organization(s)				9	+	×
n Beimbursement nauf to related organization(s) for exnenses				ę	×	
				╀		×
				2	\dagger	
					××	
				2	4	
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.	who must complete the	is 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	volved		
(1)						
(2)						
(6)					:	
(4)						
(5)						
(9)						
432163 08-14-14	67		Schedule R (Form 990) 2014	R (Form 9	990) 2	2014

91-1884698

Page 4

NDC HOUSING & ECONOMIC DEVELOPMENT

CORPORATION-GROUP RETURN

Schedule R (Form 990) 2014

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)	(q)	(0)	(a) (b)	()	(6)	3	6	8	(X
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income partners sec (related, unrelated, 501(c)(3) excluded from tax under ons? Sections 512-514)	Share of total income	Share of end-of-year assets	Disproportonate allocations?	Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065)	General or managing partner?	Percentage ownership

Schedule R (Form 990) 2014

Part VII | Supplemental Information

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

SCHEDULE R - PART II, ADDITIONAL INFORMATION

NATIONAL DEVELOPMENT COUNCIL

THE NATIONAL DEVELOPMENT COUNCIL'S (NDC'S) THREE PRIMARY EXPEMPT PURPOSES ARE TO: 1) ENCOURAGE AND FOSTER BUSINESS OWNERSHIP BY MEMBERS OF DISADVANTAGED GROUPS, 2) CONDUCT PROGRAMS TO INFORM AND AID COMMUNITIES IN OBTAINING AND UTILIZING GOVERNMENTAL AND OTHER FUNDS FOR SUPPORT OF LOCAL ECONOMIC DEVELOPMENT AND 3) PROVIDE HOUSING FOR LOW INCOME PERSONS

NDC IS THE SOLE MEMBER OF NDC HOUSING & ECONOMIC DEVELOPMENT CORPORATION WITH POWER TO ELECT AND REMOVE DIRECTORS.

NDC SUPPORT I, INC. IS ORGANIZED AND OPERATED, SUPERVISED OR CONTROLLED BY (AS DEFINED BY SECTION 509(A)(3) OF THE INTERNAL REVENUE CODE OF THE REGULATION THEREUNDER), AND EXCLUSIVELY FOR THE BENEFIT OF, OR TO PERFORM FUNCTIONS OF, OR TO CARRY OUT THE CHARITABLE PURPOSE OF NATIONAL COUNCIL FOR COMMUNITY DEVELOPMENT, INC. DBA NATIONAL DEVELOPMENT COUNCIL (NDC), A CHARITABLE ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A PUBLICLY SUPPORTED ORGANIZATION DESCRIBED IN SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE.

GROW AMERICA FUND, INC.

GROW AMERICA FUND, INC IS A CHARITABLE ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND A PUBLICLY SUPPORTED ORGANIZATION AS DESCRIBED IN SECTION 509(A)(2) OF THE INTERNAL REVENUE CODE. GROW AMERICA FUND, INC. IS A CERTIFIED COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION. ITS PRIMARY ACTIVITY IS TO MAKE LOANS TO SMALL