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DLN: 93493224031586

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

2015

Open to Public Inspection

A F	or the	e 2015 ca		ng 01-01-2015 , and ending 12-31-2	015	_		
		applicable	C Name of organization PRESENTATION SENIOR COMMUNIT	Y		D Emplo	yer ide	ntification number
		change	% STEVE SPEARS			94-32	6420	Ð
∏ Na	me cha	ange	Doing business as					
Ini	tıal retu	urn				E Telepho	ne num	ber
Fin	ial urn/tei	rmınated	Number and street (or P O box if n 1999 BROADWAY SUITE 1000	nail is not delivered to street address) Room/	suite	(303)	830-3	300
_		l return	City or town state or province sou	ntn, and ZID or foreign neetal code		(303)	030-3	300
_		on pending	City or town, state or province, cou DENVER, CO 80202	ntry, and ZIP or foreign postal code		G Gross r	eceipts s	1,108,148
•		. ,	F Name and address of prii	acinal officer	114-3 7 .			,
			Doug Shoemaker			this a group oordinates?	return	TYes ▼No
			1999 BROADWAY SUITE 1 Denver, CO 80202	000		all subordı	nates	□Yes □No
			Deliver, 60 00202			luded? No." attach	a list	(see instructions)
I Ta	ıx-exer	mpt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527		oup exempt		
y W	ebsit	:e:► WW	VW MERCYHOUSING ORG			,		
			Corporation Trust Association	n	L Year of	formation 19	97 M	State of legal domicile CA
Pa	rt I	Sum	mary					
nce	_ C	OWN AND		n or most significant activities NCOME APARTMENT PROPERTY LO FIZENS WHO FALL BELOW CERTAII			ISCO,	CA THE PROPERTY
Governance								
¥05	2	Check th	is box 🔰 if the organization dis	scontinued its operations or disposed	of more than	25% of its	net as	sets
	3	Number	of voting members of the govern	ing body (Part VI, line 1a)			з	7
Activities &	1			of the governing body (Part VI, line 11			4	0
Ĕ	1			calendar year 2015 (Part V, line 2a)			5	0
्र	6	Total nur	mber of volunteers (estimate if n	ecessary)			6	
	7a	Total uni	related business revenue from P	art VIII, column (C), line 12			7a	0
	Ь №	let unrela	ated business taxable income fro	om Form 990-T, line 34			7b	
					Pı	rior Year		Current Year
a.	8			ne 1h)			0	0
Revenue	9			ne 2 g)		1,062,	-	1,107,568
Roy	10 11			n (A), lines 3, 4, and 7d)	•		0	580
	12			lines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), li	ne l			0
	12	12)	revenue add mies o amodgii 11	(mase equal) are viri, column (A), n		1,062,	524	1,108,148
	13	Grants	s and sımılar amounts paıd (Part	IX, column (A), lines 1-3)			0	0
	14			X, column (A), line 4)			0	0
88	15	Saları 5–10		ee benefits (Part IX, column (A), lines		211,	156	202,583
Expenses	16a		•	, column (A), line 11e)			0	0
ੜੇ	ь	Total fu	undraising expenses (Part IX, column (D), line 25) ► 0				
	17	O ther	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)		1,308,	570	1,292,889
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25)		1,519,	326	1,495,472
	19	Reven	ue less expenses Subtract line	18 from line 12	-	-457,	202	-387,324
Not Assets or Fand Balances					Beginning	of Current	Year	End of Year
Se el	20	Total	assets (Part X, line 16)			9,849,	230	9,452,823
A B	21		liabilities (Part X, line 26)			130,		121,214
žĒ	22	Netas	ssets or fund balances Subtract	line 21 from line 20		9,718,	933	9,331,609
	rt II		ature Block					
my k	nowle	dge and		amined this return, including accompander of the normal number (other				
		****				2016-04-16		
Sigr		Signa	ature of officer			Date		
Her	е	G P Type	e or print name and title					
			Print/Type preparer's name	Preparer's signature	Date C	hool: Fig.	PTIN	
Paid	Ч		KATHY BLACKBURN	KATHY BLACKBURN	٦	heck last if elf-employed	P00450	0629
	u pare	or	Firm's name F COHNREZNICK LLP		F	ım's EIN 🟲		
	pare On	1 +	Firm's address 🕨 525 N TRYON STREET	STE 1000	Р	hone no (704) 332-9	100
Jat	<i>,</i> UII	''y	CHARLOTTE, NC 2820	2				

May the IRS discuss this return with the preparer shown above? (see instructions)

orm	990 (2015)				Page 2
Par		ement of Program Servio	-	Part III	
1		ribe the organization's mission	······································		
				CATED IN SAN FRANCISCO, C W CERTAIN SET INCOME LEV	
2	the prior Forn	n 990 or 990-EZ?		e year which were not listed on	
		cribe these new services on Sc			
3	services? .	nization cease conducting, or m		wit conducts, any program	
	If "Yes," des	cribe these changes on Schedu	le O		
4	expenses Se		organizations are required to	its three largest program servic report the amount of grants and I	
4a	(Code) (Expenses \$	1,092,057 including grants of	f\$)(Revenue\$	1,107,568)
-	PRESENTATION OF CONSTRUC HUD AS TO RE	N SENIOR HOUSING COMMUNITY WAS TING AND OPERATING A RENTAL HOU	ORGANIZED ON JUNE 29, 1999 AS A SING PROJECT UNDER SECTION 202 DDS THE PROJECT CONSISTS OF 93	A CALIFORNIA NON-STOCK, NONPROFIT 2 OF THE NATIONAL HOUSING ACT SUC UNITS LOCATED IN SAN FRANCISCO, CA	CORPORATION FOR THE PURPOSE H PROJECTS ARE REGULATED BY
4b	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
	ř <u></u>				
	-				
4 c	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
4d	Other progra	am services (Describe in Sche	dule O)		
	(Expenses \$		ding grants of \$) (Revenue \$)
4e	Total progra	nm service expenses 🕨	1,092,057		

art IV	Chec	klist	of	Require	d	Scher	dule	5
					ч.		uui	

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L,</i> Part IV	20		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No
c	Part IV	28b		No
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			No
~~	organization? If "Yes," complete Schedule R, Part V, line 2	36		10
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2015)					Page
Pai	Statements Regarding Other IRS Filings and Tax Complianc Check if Schedule O contains a response or note to any line in this		V			г
	Check if Schedule o contains a response of note to any line in this	rait	<u> </u>	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	o ven	dors and reportable	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal emp Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	oloym	ent tax returns?	2b		
За	Did the organization have unrelated business gross income of \$1,000 or more during			3a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	_		3b		110
	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities account)?	gnatu	re or other authority	4a		No
b	If "Yes," enter the name of the foreign country ►	k and	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited in the party of the organization of the party of the party of the organization of the party of the party of the organization of the party of the party of the organization of the party	tax sh	elter transaction?	5b		Νo
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$10 organization solicit any contributions that were not tax deductible as charitable cont			6a		No
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?	nat su	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution services provided to the payor?		d partly for goods and	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services \boldsymbol{p}	rovide	ed?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal proper file Form 8282?	rty for •	which it was required to	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a p	ersor	nal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a perso	onal b	enefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the o					
_	required?			7g		
	Form 1098-C?	•		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess bu during the year?	sınes	s holdings at any time			
_		•		8		
	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 relative Foliar Foliar Section Foliar	ated p	erson/	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	10a 10b				
	facilities	100				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990) ın lıe	eu 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.					
а	Is the organization licensed to issue qualified health plans in more than one state? Nadditional information the organization must report on Schedule O	lote. S	See the instructions for	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax	k year	?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explana	ation ii	s Schedule O	14h		

Part VI Governance, Management, and Disclosur	Part VI	Governance.	Management.	and	Disclosur
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Se	ction 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 7			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
L5	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
L 7	List the States with which a copy of this Form 990 is required to be filed ► CA			
L8	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
L9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records ►STEVE SPEARS 1999 BROADWAY SUITE 1000 Denver, CO 80202 (303) 830-3300 Part VII

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot	not box h ar or/tr	checl c, unle n office rustee	ess er)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) VALERIE AGOSTINO	1 0	l x		x				0	191,556	22,766
DIRECTOR/VICE PRESIDENT	40 0	_ ^		^				0	191,556	22,766
(2) STEPHAN DAUES	1 0	x		x				0	130.946	6 121
DIRECTOR/VICE PRESIDENT	40 0	^		^				0	129,846	6,121
(3) AMY BAYLEY ASSISTANT SECRETARY/DIRECTOR	1 0	х		х				0	0	0
(4) BARBARA GUALCO	1 0	,,		,,					140 424	7.602
DIRECTOR/CHAIRMA/VP	40 0	×		Х				0	148,131	7,692
(5) Jennifer Dolin Director/Vice President	1 0	х		х				0	127,625	21,732
(6) Melissa Clayton Director/Vice President	1 0	х		х				0	174,565	25,759
(7) Sheela Jıvan Director/Vice President/vc	1 0	х		х				0	119,218	21,318
(8) JANE GRAF	1 0			х				0	323,742	12,150
VICE PRESIDENT	40 0									
(9) DOUGLAS SHOEMAKER PRESIDENT	1 0			х				0	196,245	20,449
(10) JOSEPH ROSENBLUM SECRETARY	1 0			х				0	85,134	24,357
(11) Bruce Saab	1 0									
Vice President	40 0			X				0	117,836	15,283
(12) Ed Holder Vice President	1 0			х				0	191,095	36,603
(13) Steve Spears Vice President	1 0			х				0	268,274	10,132
(14) Vince Dodds Treasurer	1 0			х				0	179,192	32,549
	70 0									

t VII	Section A. Officers	Directors,	Trustees,	Kev Emr	olovees	, and Highest	Compensated I	mplovees	(continued
-------	---------------------	------------	-----------	---------	---------	---------------	---------------	----------	------------

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion (han d n is l	ne l both	oox, an d	heck unless officer stee)	3	(E Repor comper from organiza	table nsation the tion (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)	organization and related organizations
1b c	Sub-Total	 s to Part VII, S	 ection A	٠.								
d	Total (add lines 1b and 1c) .						▶			0	2,252,459	256,911
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an	
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key	emplo	yee,	or highes	t compen		Yes No
4	For any individual listed on line organization and related organ individual										uch	4 Yes
5	Did any person listed on line 1 services rendered to the organ			•				,		anızatıon • • •	or individual for	5 No
Se	ction B. Independent Co	ntractors										
1	Complete this table for your fix compensation from the organiz											
	N	(A) ame and business	address							Des	(B) cription of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization \blacktriangleright 0

Part V	/ 🛊 🛊 1	Statement o						
		Check if Schedu	ule O contains a respor	ise or note to any lir	(A)	(B)	(C)	
					Total revenue	Related or	Unrelated	Revenue
						exempt	business	excluded from
						function revenue	revenue	tax under sections
								512-514
s	1a	Federated camp	paigns 1a					
Grants	ь	Membership du	es 1b					
5.0	_	Eundraiging ava	ents 1c					
ons, Gifts, Grants Similar Amounts	C	_						
Giffs, iilar A	d	Related organiz	rations 1d					
E, C	e	Government grants	s (contributions) 1e					
Contributions, and Other Sim	f	All other contribution	ons, gifts, grants, and 1f					
Contributic and Other	-	sımılar amounts no	ot included above					
를등	g	Noncash contribution 1a-1f \$	ons included in lines					
<u> </u>	h	Total. Add lines	s 1 a - 1 f		0			
ه ت		Total: Add lines						
<u> </u>				Business Code				
Program Serwce Revenue	2a	RENT & SUBSIDIES	<u> </u>	531110	1,098,408	1,098,408		
Æ	ь	ANCILLARY SERVIC	CES	531110	9,160	9,160		
<u>.</u>	С		_					
Si Si	d							
Ω.	e							
Ē	f	All other progra	ım service revenue					
Š	•	All other progra	iiii seivice reveilue					
4	g	Total. Add lines	s 2a – 2f	🕨	1,107,568			
	3		ome (including dividend		580			580
			ar amounts)		0			580
	4		tment of tax-exempt bond p	proceeds	_			
	5	Royalties			0			
		_	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental						
	_	expenses Rental income	0	0				
	C	or (loss)	_	_				
	d	Net rental incor	me or (loss)		0			
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other						
		than inventory						
	ь	Less cost or other basis and						
		sales expenses						
	С	Gain or (loss)						
	d	Net gain or (los	s)		0			
<u> •</u>	8a	Gross income f	_					
듄		events (not inc	luding					
Other Revenue		\$ of contributions	reported on line 1c)					
α		See Part IV, lin						
he.			a					
ŏ			penses b					
			loss) from fundraising (events 🛌	0			
	9a		rom gaming activities					
		See Part IV, lin	a l					
	ь	less direct ev	penses b					
			(loss) from gaming activ	/ities	0			
		Gross sales of		· · · · · · · · · · · · · · · · · · ·				
		returns and allo						
			a					
	ь	Less cost of go	oods sold b					
	С	Net income or ((loss) from sales of inve	entory 🛌	0			
		Miscellaneous	s Revenue	Business Code				
	11a							
	ь							
	c c							
	d	All other revenu	ue					
	e		s 11a-11d	🕨				
				· · · · · · · · · · · · · · · · · · ·	0			
	117	fotal revenue	See Instructions	∟ I		ı		1

	IX Statement of Functional Expenses				Page 10
	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiza	ations must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in the				г
	ot include amounts reported on lines 6b, o, 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 and domestic governments See Part IV, line 21	0		,	•
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	202,583		202,583	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	85,802		85,802	
b	Legal	120		120	
c	Accounting	26,061		26,061	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0			
13	Office expenses	25,945		25,945	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,527		3,527	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	525,958	525,958		
23	Insurance	106,570	106,570		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	OPERATING AND MAINTENANCE	237,742	237,742		
b	UTILITIES	103,767	103,767		
c	RESIDENT SERVICES	85,259	85,259		
d	TAXES AND LICENSES	32,761	32,761		
e	All other expenses	59,377		59,377	
25	Total functional expenses. Add lines 1 through 24e	1,495,472	1,092,057	403,415	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 54.604 75.465 1 1 2 0 2 0 Savings and temporary cash investments 0 0 3 3 328 4 724 4 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees Complete Part II of ol 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of **Assets** 0 6 0 0 7 0 7 0 8 0 8 42,001 9 39.433 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 16,076,174 Complete Part VI of Schedule D 10a b 10b 7,971,918 8,606,010 10c 8,104,256 Less accumulated depreciation Λ Λ 11 11 0 12 0 12 Investments—other securities See Part IV, line 11 0 0 13 13 Investments—program-related See Part IV, line 11 . 14 0 14 0 15 1.146.287 15 1,232,945 16 Total assets. Add lines 1 through 15 (must equal line 34) 9,849,230 16 9,452,823 91,775 83,412 17 17 0 18 0 18 1,069 614 19 19 20 0 20 0 0 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 0 0 0 23 Secured mortgages and notes payable to unrelated third parties . 23 0 24 0 24 Unsecured notes and loans payable to unrelated third parties 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 37,453 37,188 25 130,297 26 121,214 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ▶

 and complete Balance lines 27 through 29, and lines 33 and 34. -466,206 -498.902 27 27 10, 185, 139 9,830,511 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 ž 33 9.718.933 9,331,609 33 Total liabilities and net assets/fund balances 9.849.230 9.452.823

Da	t XI Reconcilliation of Net Assets			<u>'</u>	age ±
Pal	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,1	.08,148
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,4	195,47
3	Revenue less expenses Subtract line 2 from line 1	3		- 3	887,324
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,7	18,93
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		9,3	31,609
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	• •	• •	Yes	. 区 No
1	Accounting method used to prepare the Form 990			Tes	140
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both	ate			
	Separate basis Consolidated basis 🔽 Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

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As Filed Data -

DLN: 93493224031586

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.irs.gov/form990.

Open to Public Inspection

		ne organization ON SENIOR COMMUNITY					Employer identifica	ition number		
PKESE	NIAIIC	ON SENIOR COMMONITY					94-3264209			
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	tions must co	mplete this p		ns.		
The o	rganı	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)			
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	o)(1)(A)(i).			
2	Г	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 (Form 990 or 990-EZ))								
3	Г	A hospital or a cooper								
4	_	A medical research or). Enter the		
	·	hospital's name, city,	and state		•					
5	_	An organization opera 170(b)(1)(A)(iv). (Co	omplete Part I	I)	•		-	escribed in section		
6	<u> </u>	A federal, state, or loc	=	=						
7	_	An organization that n described in section 1	70(b)(1)(A)(v	/i). (Complete Part II)	_	ental unit or from the g	eneral public		
8	<u> </u>	A community trust des						_		
9	₽	from gross investmen	es related to it t income and e 30, 1975 S	s exempt functions—s unrelated business table esection 509(a)(2).	ubject to certa xable income (l (Complete Part	in exceptions, ess section 51 III)	and (2) no more than 1 1 tax) from businesse	331/3% of its support		
11	<u>'</u>	An organization organ						ut the nurnoses of		
	_	one or more publicly s the box in lines 11a th	upported orga irough 11d tha	nizations described in at describes the type o	section 509(a of supporting or)(1) or section ganization and	509(a)(2) See sectio complete lines 11e, 1	n 509(a)(3). Check 1f, and 11g		
а	ı	Type I. A supporting o supported organization organization You mus	n(s) the power	to regularly appoint o	r elect a majori					
b	Γ	Type II. A supporting management of the su must complete Part IV	organization s pporting orgar	upervised or controlle	d in connection					
c	Γ	Type III functionally i	•		n operated in c	onnection with	, and functionally integ	grated with, its		
_	_	supported organization								
d	ı	Type III non-function								
		not functionally integr (see instructions) Yo o					ement and an attentiv	eness requirement		
е	Г	Check this box if the o					s a Type I, Type II, T	ype III functionally		
		ıntegrated, or Type III								
f	Ente	r the number of support	-				· · · · · · ·			
g		Provide the following i	nformation abo	out the supported orga	inization(s)					
Nan	ne of s	(i) supported organization	(ii)EIN	(iii) Type of	(iv) Is the orga		(v) A mount of	(vi) A mount of other		
IVali	16 01 3	apported organization		organization (described on lines 1-9 above (see instructions))	listed in your docume	governing	monetary support (see instructions)	support (see instructions)		
					Yes	No				

Pa	Support Schedule for (Complete only if you Part III. If the organize	checked the bo	x on line 5, 7,	or 8 of Part I o	or if the organiz	ation failed to d	jualify under
Se	ection A. Public Support	•	•		, ,		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
•	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	(4,72022	(-)	(9,2323	(=,===	(0)2020	(i)
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 ection B. Total Support						
	Calendar year						
(or	fiscal year beginning in) 🟲	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) ⊤otal
7	A mounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
14	ection C. Computation of Pul Public support percentage for 2019			11 column (f))		14	
15	Public support percentage for 201			: 11, Column (1))		14	
	33 1/3% support test—2015.If the	-	•	v on line 12 and	lino 14 is 22 1/20	15	this box
	and stop here. The organization qui 33 1/3% support test—2014. If the box and stop here. The organizatio	alıfıes as a publıc organızatıon dıd	ly supported organic not check a box	anızatıon on lıne 13 or 16a			► □
17a	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	—2015. If the organization meets the fa	anization did not o	check a box on lir tances test, chec	ck this box and st	op here. Explain	orted ▶□
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization	nızatıon meets th	e "facts-and-circ	umstances" test	c, check this box a	nd stop here.	
18	Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	- '

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

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

Se	ction A. Public Support							
	Calendar year	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 20	15	(f) Total
-	iscal year beginning in) F Gifts, grants, contributions, and	. ,	.,		.,			
1	membership fees received (Do							
	not include any "unusual	0	0	0	0		0	0
	grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services performed, or facilities furnished							
	in any activity that is related to	979,866	1,011,733	1,011,087	1,062,057	1	,107,568	5,172,311
	the organization's tax-exempt							
	purpose							
3	Gross receipts from activities							0
	that are not an unrelated trade or business under section 513							U
4	Tax revenues levied for the							
•	organization's benefit and either							0
	paid to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the organization without							0
	charge							
6	Total. Add lines 1 through 5	979,866	1,011,733	1,011,087	1,062,057	1	,107,568	5,172,311
7a	Amounts included on lines 1, 2,							
	and 3 received from disqualified							0
L	persons Amounts included on lines 2 and							
U	3 received from other than							
	disqualified persons that exceed							0
	the greater of \$5,000 or 1% of							Ū
	the amount on line 13 for the year							
c	Add lines 7a and 7b							0
8	Public support. (Subtract line 7c							F 172 211
	from line 6)							5,172,311
	·							
Se	ction B. Total Support							
	Calendar year	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 20	15	(f) ⊤otal
(or f	Calendar year iscal year beginning in) 🟲							
(or f	Calendar year iscal year beginning in) Amounts from line 6	(a)2011 979,866	(b) 2012	(c)2013 1,011,087	(d) 2014)15 ,107,568	(f) T otal 5,172,311
(or f	Calendar year iscal year beginning in) 🟲	979,866	1,011,733	1,011,087	1,062,057		,107,568	5,172,311
(or f	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties							
(or f 9 10a	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	979,866	1,011,733	1,011,087	1,062,057		,107,568	5,172,311
(or f	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	979,866	1,011,733	1,011,087	1,062,057		,107,568	5,172,311
(or f 9 10a	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes)	979,866	1,011,733	1,011,087	1,062,057		,107,568	5,172,311
(or f 9 10a	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	979,866	1,011,733	1,011,087	1,062,057		,107,568	5,172,311
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311 2,809 0
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311 2,809 0
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311 2,809 0 2,809
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311 2,809 0 2,809
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311 2,809 0 2,809
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	979,866 638	1,011,733 532	1,011,087 492	1,062,057 567		,107,568 580	5,172,311 2,809 0 2,809
(or f 9 10a b	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	979,866 638 638	1,011,733 532 532	1,011,087 492 492	1,062,057 567 567	1	580 580	5,172,311 2,809 0 2,809 0
(or f 9 10a b c 11 12	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	979,866 638 638	1,011,733 532 532 1,012,265	1,011,087 492 492 1,011,579	1,062,057 567 567 1,062,624	1	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120
(or f 9 10a b c 11	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	979,866 638 638	1,011,733 532 532 1,012,265	1,011,087 492 492 1,011,579	1,062,057 567 567 1,062,624	1	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120
(or f 9 10a b c 11 12 13 14	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	979,866 638 638 980,504 for the organizati	1,011,733 532 532 1,012,265 on's first, second	1,011,087 492 492 1,011,579	1,062,057 567 567 1,062,624	1	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120
(or f 9 10a b c 11 12 13 14 Se	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub	979,866 638 638 980,504 for the organizati	1,011,733 532 532 1,012,265 on's first, second	1,011,087 492 492 1,011,579 , third, fourth, or	1,062,057 567 567 1,062,624	1 section !	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120
(or f 9 10a b c 11 12 13 14 See 15	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pul	979,866 638 638 980,504 for the organizati	1,011,733 532 532 1,012,265 on's first, second ercentage (f) divided by line	1,011,087 492 492 1,011,579 , third, fourth, or	1,062,057 567 567 1,062,624	1 section !	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120 c) organization, 99 946 %
(or f 9 10a b c 11 12 13 14 See 15 16	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Put Public support percentage from 20	979,866 638 638 980,504 for the organization of the organization of the second of the	1,011,733 532 532 1,012,265 on's first, second ercentage (f) divided by line Part III, line 15	1,011,087 492 492 1,011,579 , third, fourth, or	1,062,057 567 567 1,062,624	1 section !	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120
(or f 9 10a b c 11 12 13 14 Se 15 16 Se	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inv	979,866 638 638 980,504 for the organization of the organization of the second of the	1,011,733 532 532 1,012,265 on's first, second ercentage (f) divided by line eart III, line 15 ome Percenta	1,011,087 492 492 1,011,579 , third, fourth, or 1	1,062,057 567 567 1,062,624 fifth tax year as a	1 section !	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120 1) organization, 99 946 % 99 936 %
(or f 9 10a b c 11 12 13 14 Se 15 16 Se 17	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Put Public support percentage for 201 Public support percentage from 20 ction D. Computation of Inv Investment income percentage for	979,866 638 638 638 638 638 638 638 638 638	1,011,733 532 532 1,012,265 on's first, second ercentage (f) divided by line Part III, line 15 ome Percenta column (f) divided	1,011,087 492 492 1,011,579 , third, fourth, or 1 13, column (f)) ge by line 13, colum	1,062,057 567 567 1,062,624 fifth tax year as a	1 section ! 15 16	,107,568 580 580 ,108,148	5,172,311 2,809 0 2,809 0 5,175,120 3) organization, 99 946 % 99 936 % 0 054 %
(or f 9 10a b c 11 12 13 14 Se 15 16 Se 17 18	Calendar year iscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Put Public support percentage from 20 ction D. Computation of Inv	980,504 for the organization of the organization of the second of the se	1,011,733 532 1,012,265 on's first, second ercentage (f) divided by line Part III, line 15 ome Percenta column (f) divided A, Part III, line 1	1,011,087 492 1,011,579 , third, fourth, or 13, column (f)) ge by line 13, colum	1,062,057 567 567 1,062,624 fifth tax year as a	1 section 5 16 17 18	,107,568 580 580 ,108,148 501(c)(3	5,172,311 2,809 0 2,809 0 5,175,120 5) organization, 99 946 % 99 936 % 0 054 % 0 064 %

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Section A. All Supporting Organizations			
I, complete Sections A and D, and complete	te Part V)		
11b of Part I, complete Sections A and C	If you checked 11c of Part I, com	iplete Sections A , D , and E If y	ou checked 11d of Par

			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.	За		ı
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.	3b		
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.	3с		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		ı
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised	4b		
c	by or in connection with its supported organizations. 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 $170(c)(2)(B)$ purposes.	4 c		
5a	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 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		
b	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		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ı
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 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 Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent 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? If "Yes," complete Part II 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 in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
C	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		
0a	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		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		l
	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		<u> </u>
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.	11c		

Pai	Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	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		
2	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.	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	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).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
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		
3	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.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
a	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 those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
Ŀ	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.			
	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? <i>Provide details in Part VI</i> .	3a		
Ŀ	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.

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	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		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
i	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	pt purposes of supported org	anızatıons	
4 A mounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
 Carryover from 2010 not applied (see instructions) 			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
c Excess from 2013			
d From 2014			
e From 2015			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts	And	Circum	stances	Test
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Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2015

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493224031586

OMB No 1545-0047

SCHEDULE D

(Form 990)

Inte

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

	venue Service	Information about Schedule D	(Form 990) and its instructions is at <u>www.ii</u>	<u>rs.gov/form990</u> .	Inspection
	e of the organ			Employer ident	ification number
KESE		COMMUNITY		94-3264209	
Part			Advised Funds or Other Similar F	unds or Accou	nts.
	Compl	ete if the organization answere	ed "Yes" on Form 990, Part IV, line 6.		
	Total numbe	er at end of year	(a) Donor advised funds	(b) Funds and	other accounts
	year)	value of contributions to (during			
	Aggregate v	value of grants from (during year)			
	Aggregate v	value at end of year			
			advisors in writing that the assets held in do the organization's exclusive legal control?	nor advised	┌ Yes ┌ No
			and donor advisors in writing that grant fund:		
		ermissible private benefit?	benefit of the donor or donor advisor, or for a	any other purpose	☐ Yes ☐ No
art	Ⅲ Conse	rvation Easements. Comple	ete if the organization answered "Yes"	on Form 990, Pa	rt IV, line 7.
F	ourpose(s) of	conservation easements held by th	e organization (check all that apply)		
Γ		on of land for public use (e g , recre	ation or education)	n historically impoi	tant land area
Γ	Protection	of natural habitat	Preservation of a	certified historic s	tructure
Γ	Preservation	on of open space			
	•		held a qualified conservation contribution in	the form of a conse	ervation
e	easement on t	he last day of the tax year			
ı T	Cotal number o	of conservation easements		2a Heid at	the End of the Year
		restricted by conservation easeme	ents	2b	
		servation easements on a certified		2c 2c	
			c) acquired after 8/17/06, and not on a		
		ure listed in the National Register		2d	
		servation easements modified, trai	nsferred, released, extinguished, or terminat	ed by the organizat	tion during the
t	ax year ►				
ľ	Number of stat	tes where property subject to cons	ervation easement is located ►		
		nızatıon have a wrıtten polıcy regar I enforcement of the conservatıon e	ding the periodic monitoring, inspection, har easements it holds?		Yes No
	Staff and volur /ear -	nteer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing conservation e	asements during the
,	·	enses incurred in monitoring inche	ecting, handling of violations, and enforcing o	conservation eacer	nents during the year
	+mount of exp ►\$	cinses incurred in monitoring, MSP6	comy, nanding of violations, and emorcing (conservation easer	nents during the year
	Does each cor	nservation easement reported on lii non 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se		Yes No
b	oalance sheet,		ts conservation easements in its revenue ar of the footnote to the organization's financia sements		
	IIII Organ	izations Maintaining Collec	tions of Art, Historical Treasures,	or Other Simil	ar Assets.
	Compl	ete if the organization answere	ed "Yes" on Form 990, Part IV, line 8.		
v	vorks of art, hi	istorical treasures, or other similar	FAS 116 (ASC 958), not to report in its reve assets held for public exhibition, education note to its financial statements that describ	, or research in furt	
v	vorks of art, hi		FAS 116 (ASC 958), to report in its revenue assets held for public exhibition, education these items		
(i)	Revenue incli	uded on Form 990, Part VIII, line 1	L	► \$	
		ed in Form 990, Part X		<u></u>	
I	f the organiza	tion received or held works of art, h	nistorical treasures, or other similar assets is SFAS 116 (ASC 958) relating to these items	for financial gain, p	
a _F	Revenue inclu	ded on Form 990, Part VIII, line 1		► \$	

b Assets included in Form 990, Part X

Part	Organizations Maintainin (continued)	g Collections of A	rt, His	torical	Treasure	s, or (Other Similar A	ssets
	Using the organization's acquisition, accollection items (check all that apply)	cession, and other rec	ords, ch					e of its
a	Public exhibition		d	☐ Loa	an or exchar	nge prog	rams	
b	Scholarly research		e	┌ otl	her			
c	Preservation for future generations	;						
	Provide a description of the organization	n's collections and exp	olaın how	they fur	ther the org	anızatıoı	n's exempt purpose	ın
	During the year, did the organization so assets to be sold to raise funds rather							┌ No
Part	Complete if the organization Part X, line 21.		Form 9	990, Par	t IV, line 9	, or re	ported an amour	nt on Form 990,
	Is the organization an agent, trustee, c included on Form 990, Part X?	ustodian or other interi	mediary	for contr	ibutions or d	other as	sets not Yes	□ No
b	If "Yes," explain the arrangement in	Part XIII and complete	e the foll	owing tal	ble		Am	ount
c	Beginning balance	and complete			<u>-</u>	10		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount	on Form 990 Part X I	ine 21 f	nr escro	w or clistodi	سا اعددما	int liability? F Ves	□ No
Zu	Did the organization merade an amount	011 1 01111 3 3 0 , 1 are x , 1	1110 21,1	01 030101	W OI CUSCOUI	ar accou	inchability , Tes	, 140
Ь	If "Yes," explain the arrangement in Pa	rt XIII Check here if t	he expla	ination ha	as been pro	vided in	Part XIII	
Pari								
		(a)Current year		or year			(d)Three years back	(e)Four years back
1a	Beginning of year balance							
b	Contributions							
	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 th	e current vear end hala	nce (lini	e 1a coli	umn (a)) hel	d as		
	Board designated or quasi-endowment	·		c 19, con	a (a /) (i c i	4 45		
	Permanent endowment >	-						
c ·	Temporarily restricted endowment 🕨	a should agual 1.000/						
3a .	The percentages on lines 2a, 2b, and 2 Are there endowment funds not in the p organization by		ızatıon t	hat are h	eld and adn	nınıstere	d for the	Yes No
	(i) unrelated organizations						<u> </u>	n(i)
	(ii) related organizations						<u></u>	(ii) Bb
4	Describe in Part XIII the intended use:	s of the organization's e	endowme	ent funds				
Part				00 B- I	TV 1 4 -		F 000 B- LV	. I
	Complete if the organization Description of property	answered Yes to I	Cos	(a) st or other	basis Cost o	(b) r other ba	Accumulated	(d)Book value
1- '				(ınvestmen	it) ((other)	200	4 507 655
	and		.			1,587,9		1,587,989
	easehold improvements		. <u>–</u>			14,191,0	7,674,73	6,516,267
d E	quipment					5,8	5,88	30 0
e 0)ther					291,3	305 291,30	0.5

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

8,104,256

(including name of security)	pry	(b) Book value	(c)Method of valuation Cost or end-of-year market valu
)Financial derivatives			
Closely-held equity interests			
)O ther			
_			_
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)	, 🕨		
Tt VIII Investments—Program Related			
Complete if the organization answer	red 'Yes' on Form 990,		
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market valu
art IX Other Assets. Complete if the organiza (a) De	ation answered 'Yes' on Fo	rm 990, Part IV, line	(b) Book value
TENANT SECURITY DEPOSIT (a) Description (b) RESTRICTED PROPERTY RESERVES (c) TENANT SECURITY DEPOSIT (c) RESIDUAL RECEIPTS RESERVE	ation answered 'Yes' on Fo	rm 990, Part IV, line	(b) Book value 626,73 37,96
ART IX Other Assets. Complete if the organization (a) Description (a) Descript	ne 15.) rganization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Decomplete if the organization of the complete in the complete in the organization of the complete in the complete	nation answered 'Yes' on Fo scription		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Description of liability Other Assets. Complete if the organiza (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
ATT IX Other Assets. Complete if the organization (a) Description of liability. Other Assets. Complete if the organization (a) Description of liability. (a) Description of liabilities. (a) Description of liability.	ne 15.) rganization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
RESTRICTED PROPERTY RESERVES OTENANT SECURITY DEPOSIT ORESIDUAL RECEIPTS RESERVE OPERATING RESERVES OTENANT SECURITY DEPOSIT ORESIDUAL RECEIPTS RESERVE OPERATING RESERVES Part X Other Liabilities. Complete if the office of See Form 990, Part X, line 25. (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
RESTRICTED PROPERTY RESERVES OTENANT SECURITY DEPOSIT ORESIDUAL RECEIPTS RESERVE OPERATING RESERVES Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,7 37,9 7,8 560,3
RESTRICTED PROPERTY RESERVES OTENANT SECURITY DEPOSIT ORESIDUAL RECEIPTS RESERVE OPERATING RESERVES Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the o See Form 990, Part X, line 25. (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,7 37,9 7,8 560,3 1,232,9
RESTRICTED PROPERTY RESERVES OTENANT SECURITY DEPOSIT ORESIDUAL RECEIPTS RESERVE OPERATING RESERVES OTENANT SECURITY DEPOSIT ORESIDUAL RECEIPTS RESERVE OPERATING RESERVES Part X Other Liabilities. Complete if the office of See Form 990, Part X, line 25. (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
ARESTRICTED PROPERTY RESERVES OTENANT SECURITY DEPOSIT OTENANT RESERVES Tal. (Column (b) must equal Form 990, Part X, col.(B) line Of See Form 990, Part X, line 25. (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
(a) Description of liability Other Assets. Complete if the organization (a) Description of liability Other Assets. Complete if the organization (a) Description of liability (a) Description of liabilities.	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Description of liability Other Assets. Complete if the organiza (a) Description of liability (a) Description of liability (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Description of liability Other Assets. Complete if the organiza (a) Description of liability (a) Description of liability (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Description of liability Other Assets. Complete if the organiza (a) Description of liability (a) Description of liability (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
(a) Design (b) RESTRICTED PROPERTY RESERVES) TENANT SECURITY DEPOSIT) RESIDUAL RECEIPTS RESERVE) OPERATING RESERVES otal. (Column (b) must equal Form 990, Part X, col.(B) lim Part X Other Liabilities. Complete if the o See Form 990, Part X, line 25.	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Description of liability Other Assets. Complete if the organiza (a) Description of liability (a) Description of liability (a) Description of liability	ne 15.) organization answered 'Yes' on Fo		(b) Book value 626,73 37,96 7,88 560,36
Other Assets. Complete if the organiza (a) Description of liability Other Assets. Complete if the organiza (a) Description of liability (a) Description of liability (a) Description of liability	ne 15.) organization answered 'Yes' on Fo	Yes' on Form 990,	(b) Book value 626,73 37,96 7,88 560,36

	1	1,108,148
		,= ,= . •
Add lines 2a through 2d	2e	
Subtract line 2e from line 1	3	1,108,148
Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Other (Describe in Part XIII)		
Add lines 4a and 4b	4c	
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,108,148
	s per Ret	urn.
	1	1,495,472
· · · · · · · · · · · · · · · · · · ·		
 		
Other losses		
	2e	
	3	1,495,472
Other (Describe in Part XIII)		
Add lines 4a and 4b	4c	
	Recoveries of prior year grants Other (Describe in Part XIII)	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Return Reference	Explanation
FIN 48 (ASC 740) PART X, QUESTION 2	The Corporation has elected tax exempt status under Section 501(c)(3) of the Internal Revenue Code and did not have any unrelated business income for the year ended December 31, 2015. Due to its tax exempt status, the Corporation is not subject to income taxes. The Corporation is required to file and does file tax returns with the Internal Revenue Service and other taxing authorities. Accordingly, these financial statements do not reflect a provision for income taxes and the Corporation has no other tax positions which must be considered for disclosure. Income tax returns filed by the corporation are subject to examination by the internal revenue service for a period of three years. While no income tax returns are currently being examined by the internal revenue service, tax years since 2012 remain open.

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

DLN: 93493224031586

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information

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

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

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

2015

Open to Public Inspection

Internal Revenue Service Name of the organization PRESENTATION SENIOR COMMUNITY

Employer identification number

94-3264209

Pa	rt I	Questions Regarding Compensation					
						Yes	No
1a				ny of the following to or for a person listed on Form ride any relevant information regarding these items			
	F	irst-class or charter travel	Γ	Housing allowance or residence for personal use			
	Гт	ravel for companions	Γ	Payments for business use of personal residence			
	Гт	ax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
		Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b		of the boxes in line 1a are checked, did the orgonsement or provision of all of the expenses de			1b		
2		ne organization require substantiation prior to re tors, trustees, officers, including the CEO/Exec		sing or allowing expenses incurred by all prector, regarding the items checked in line 1a?	2		
3	organ	ate which, if any, of the following the filing organ nization's CEO/Executive Director Check all the by a related organization to establish compensa	at appl				
	Γ c	Compensation committee	Γ	Written employment contract			
	Г	ndependent compensation consultant		Compensation survey or study			
	F	orm 990 of other organizations	✓	Approval by the board or compensation committee			
4		ig the year, did any person listed on Form 990, I elated organization	Part VI	I, Section A, line ${f 1}{f a}$ with respect to the filing organization			
а	Recei	ıve a severance payment or change-of-control p	aymen	nt?	4a		No
b	Partic	cipate in, or receive payment from, a supplemen	tal non	qualified retirement plan?	4b		No
c	Partic	cipate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		No
	If"Ye	es" to any of lines 4a-c, list the persons and pro	vide th	ne applicable amounts for each item in Part III			
	Only !	501(c)(3), 501(c)(4), and 501(c)(29) organizat	ions m	ust complete lines 5-9.			
5		ersons listed on Form 990, Part VII, Section A, ensation contingent on the revenues of	line 1a	a, did the organization pay or accrue any			
а	The o	organization?			5a		No
b	Anyr	related organization?			5b		No
	If"Ye	es," on line 5a or 5b, describe in Part III					
6		ersons listed on Form 990, Part VII, Section A, ensation contingent on the net earnings of	line 1a	a, did the organization pay or accrue any			
а	The o	organization?			6a		No
b	Anyr	related organization?			6b		No
	If"Ye	es," on line 6a or 6b, describe in Part III					
7	•	ersons listed on Form 990, Part VII, Section A, ents not described in lines 5 and 6? If "Yes," d		· · · · · · · · · · · · · · · · · · ·	7		No
8				accured pursuant to a contract that was stions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9		es" on line 8, did the organization also follow the	rebutt	able presumption procedure described in Regulations	9		110

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 VALERIE AGOSTINO DIRECTOR/VICE PRESIDENT	(i)	0	0	0	0	0	0	0
, and the second	(ii)	191,556	0	0	6,873	15,893	214,322	0
2 BARBARA GUALCO DIRECTOR/CHAIRMA/VP	(i)	0	0	0	0	0	0	0
, .	(ii)	148,131	0	0	5,396	2,296	155,823	0
3 JANE GRAF VICE PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	323,742	0	0	10,219	1,931	335,892	0
4 DOUGLAS SHOEMAKER PRESIDENT	(i)	0	0	0	0	0	0	0
	(ii)	196,245	0	0	5,148	15,301	216,694	0
5 Ed HolderVice President	(i)	0	0	0	0	0	0	0
	(ii)	191,095	0	0	5,917	30,686	227,698	0
6 Melissa Clayton Director/Vice President	(i)	0	0	0	0	0	0	0
	(ii)	174,565	0	0	4,606	21,153	200,324	0
7 Steve SpearsVice President	(i)	0	0	0	0	0	0	0
	(ii)	268,274	0	0	6,552	3,580	278,406	0
8 Vince DoddsTreasurer	(i)	0	0	0	0	0	0	0
	(ii)	179,192	0	0	7,567	24,982	211,741	0

Schedule J (Form 990) 2015

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2015

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DLN: 93493224031586

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
PRESENTATION SENIOR COMMUNITY	94-3264209

Return Reference	Explanation
Part VI Section B #15a & #15b	The process for determining compensation for the President, chairman, officers, and directors is determined by an Employee Benefits committee, which is appointed by the board of directors of Mercy Housing, Inc. To ensure competitiveness, wages are compared to other affordable housing organizations, both for- and not-for-profit, or the local market for positions applicable to a broader competitive market. Mercy Housing, Inc. will comply with all applicable federal and state labor laws and regulations. The process will be administered according to the relevant human resource operational policies and by the human resource department with direction from the senior leadership team. The CEO will make a report to the board of trustees on implementation of the wage and benefit program annually. Periodically the human resources committee within the Mercy Housing, Inc. board of trustees will review executive salaries to ensure competitiveness and reasonableness with external markets and for internal equity in relation to general employee wages and benefits, individual and organizational performance, and the financial resources of the organization

Return Reference	Explanation
part vi section c #19	the organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request

Return Reference	Explanation
part VI Section B #11	Each member is given the opportunity to review the return before it is filed

Return Reference	Explanation
Part VI Section B #12C	The audit committee of Mercy Housing, Inc. reviews periodically the conflict of interest disclosures and determines whether any action is required

Return Reference	Explanation
1 '	Responsibility for selection of an independent accountant and oversight of the annual audit is reserved by the Mercy Housing, Inc. Board of Trustees

Return Reference	Explanation
part vi section a #7a & #7b	The Board of Trustees of Mercy Housing, Inc. has authority over presentation senior community in various aspects of operations and management. The reserved rights held by the Mercy Housing Board of Trustees, which may be further delegated to the President and CEO of Mercy Housing, Inc., include approval of the following activities: revisions to articles and bylaws, mergers and acquisitions, establishment of new entities, pledging, mortgaging or disposing of all or substantially all assets, obligations of new operating and mortgage debt, and, appointment or removal of governing board members and officers.

Return Reference	Explanation
part vi section A #6	PRESENTATION SENIOR COMMUNITY is a nonstock, nonprofit corporation with MERCY HOUSING CALIFORNIA as the sole member

Return Reference	Explanation
PART VII	Sister Amy Bayley, RSM, serves as an officer/director of PRESENTATION SENIOR COMMUNITY and performs services for Mercy Housing Inc. Mercy Housing, Inc. and the Sisters of Mercy of the Americas West MidWest have entered into a contract whereby Amy Bayley has been assigned to Mercy Housing, Inc. to perform services and provide leadership for Mercy Housing, Inc. and its subsidiaries. Sister Bayley is a member of a religious community and has taken a vow of poverty and therefore does not receive any personal income. Sister Bayley is not an employee of Mercy Housing, Inc. or PRESENTATION SENIOR COMMUNITY. Mercy Housing, Inc. makes payments directly to the Sisters of Mercy of the Americas West MidWest for monthly stipend payments and benefits relating to the services performed by Sister Bayley. The Sisters of Mercy of the Americas West MidWest are responsible for providing the living expenses of Sister Bayley. For 2015 Mercy Housing, Inc. paid \$99,925 for the annual stipend fee and benefits equivalent.

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DLN: 93493224031586

OMB No 1545-0047

2015

SCHEDULE R (Form 990)

Name of the organization PRESENTATION SENIOR COMMUNITY

Related Organizations and Unrelated Partnerships

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

Open to Public

Employer identification number

Inspection

Department of the Treasury Internal Revenue Service

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

				94-32642	209			
Part I Identification of Disregarded Entities Complete	ıf the organızatıon	answered "Yes" or	n Form 990, Pa	rt IV, line 33.				
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Dı	(f) irect controlling entity		
Part II Identification of Related Tax-Exempt Organizat	ions Complete if th	o organization an	sworod "Vos" o	n Form 000 D	vet TV/ Ju	no 24 hospuso it	had on	
or more related tax-exempt organizations during the t	ax year.				11 L I V , 11			
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	rion (e) Public charity (if section 501	status (c)(3))	(f) Direct controlling entity	Section (13) co	
							Yes	No
See Additional Data Table							$\overline{}$	Τ
							\perp	
							<u> </u>	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y			Schedule R (For	n 990) 2	015

	cation of Related Organizations Taxable as a Partnership Complete if the orga		es" on Form 990,	Part IV, line 34
because	it had one or more related organizations treated as a partnership during the tax year	·.		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income			ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging	(k) Percentage ownership
				311)			Yes	No		Yes	No	
See Additional Data Table												
Down TV Identification of Polated Oversitations Tayable a	Co		on Tures C	amalata if th	0.0000000	tion and	, a na d	"\\ o o !"	02 F0422 O	00 [) n = +	TV luna

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.

Prır	(b) mary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	No	
ble										
										ł

Part V Transactions With Related Organizations Complete if the organization	answered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Ι,	Yes	No
${f 1}$ During the tax year, did the organization engage in any of the following transactions with one or	more related organizations lis	sted in Parts II-IV				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)				1b		No
c Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m `	Yes	
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
• Sharing of paid employees with related organization(s)				10	Yes	
p Reimbursement paid to related organization(s) for expenses				1p '	Yes	
q Reimbursement paid by related organization(s) for expenses				1q		No
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must co	omplete this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount inv	olved	
1)mercy housing management group	m	96,691	cash			
2)MERCY HOUSING MANAGEMENT GROUP	0	202,583	CASH			

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

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

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations	_	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											1	1	İ
			<u> </u>	_		-	1	I		<u> </u>			

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2015

Denver, CO 80202 94-2366315 Software ID: Software Version:

EIN: 94-3264209

Name: PRESENTATION SENIOR COMMUNITY

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (f) (b) (c) (d) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile Exempt Code Public charity Direct controlling Section 512 (state section status (b)(13) entity or foreign country) (if section 501(c) controlled entity? (3)) Yes ow-inc hsng СА 501 (c)(3) 11a NΑ Νo 2101 Telegraph Avenue Inc 1999 Broadway Suite 1000 Denver, CO 80202 94-3222935 ow-inc hsng CA 501 (c)(3) NΑ All Hallows Community 1999 Broadway Suite 1000 Denver, CO 80202 94-2722870 СО 501 (c)(3) NΑ Νo low-ınc hsng Allegre Point Senior Residences 1999 Broadway Suite 1000 Denver, CO 80202 20-4295472 ΑZ 501 (c)(3) NΑ Νo low-inc hsng Avondale Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 86-0980810 501 (c)(3) low-ınc hsng ΑZ NΑ Νo Camelot Casitas 1999 Broadway Suite 1000 Denver, CO 80202 86-0980809 NΑ CA 501 (c)(3) Νo low-ınc hsng Cantebria Senior Homes 1999 Broadway Suite 1000 Denver, CO 80202 94-3361794 NΑ ΑΖ 501 (c)(3) Νo ow-inc hsng Casa de Merced 1999 Broadway Suite 1000 Denver, CO 80202 86-0808941 ow-inc hsng ΑZ 501 (c)(3) 11a NΑ Νo Casa de Shanti 1999 Broadway Suite 1000 Denver, CO 80202 86-0728526 NΑ low-inc hsng СА 501 (c)(3) Νo Central Coast Housing 1999 Broadway Suite 1000 Denver, CO 80202 77-0117473 low-ınc hsng ОН 501 (c)(3) NΑ Νo Charles Crest Corporation (Charles Crest 1999 Broadway Suite 1000 Denver, CO 80202 34-1399869 ow-ınc hsng ОН 501 (c)(3) NΑ Νo Charles Crest II Corporation 1999 Broadway Suite 1000 Denver, CO 80202 34-1714407 501 (c)(3) ΟН NΑ Νo low-ınc hsng Charles Meadows Corporation 1999 Broadway Suite 1000 Denver, CO 80202 34-1552671 ow-inc hsng СО 501 (c)(3) NΑ Νo Decatur Place 1999 Broadway Suite 1000 Denver, CO 80202 84-1062097 low-ınc hsng ΚY 501 (c) (3) NΑ Νo Dublin Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 02-0655254 501 (c)(3) ΙD NΑ Νo low-inc hsng Eagle Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 03-0410639 CA501 (c)(3) 11a NΑ ow-inc hsng Νo EHCC Housing Corp (Eden House) 1999 Broadway Suite 1000 Denver, CO 80202 94-3234538 501 (c)(3) NΑ ow-ınc hsng ΑZ Νo El Mirage Senior 1999 Broadway Suite 1000 Denver, CO 80202 86-0847975 $\mathsf{C}\mathsf{A}$ 501 (c)(3) NΑ Νo ow-inc hsng Fairfax Nonprofit Housing Development Co 1999 Broadway Suite 1000 Denver, CO 80202 94-2772546 СА 501 (c)(3) 11a NΑ ow-inc hsng Florin Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 68-0336533 $\mathsf{C}\mathsf{A}$ 501 (c)(3) NΑ ow-inc hsng Νo Francis of Assisi Community 1999 Broadway Suite 1000

Form 990, Schedule R, Part II - Identification of Relat			1	1	1	1 .	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b) (cont	g) on 512 (13) rolled aty?
						Yes	No
Garden Park Apt Community 1999 Broadway Suite 1000 Denver, CO 80202 68-0484147	low-ınc hsng	CA	501 (c) (3)	11a	NA		No
Gault Street Senior 1999 Broadway Suite 1000 Denver, CO 80202 75-2983979	low-ınc hsng	СА	501 (c) (3)	9	NA		No
Guadalupe Senior Village 1999 Broadway Suite 1000 Denver, CO 80202 86-0897709	low-inc hsng	ΑZ	501 (c) (3)	9	NA		No
Homes for Greeley 1999 Broadway Suite 1000 Denver, CO 80202 84-1349918	low-ınc hsng	со	501 (c) (3)	9	NA		No
Independence Hill Inc 1999 Broadway Suite 1000 Denver, CO 80202 72-1545927	low-ınc hsng	ID	501 (c) (3)	11a	NA		No
Intercommunity Housing Ferndale 1999 Broadway Suite 1000 Denver, CO 80202 91-1667138	low-ınc hsng	WA	501 (c)(3)	9	NA		No
John W King Senior Community 1999 Broadway Suite 1000 Denver, CO 80202 94-3282891	low-ınc hsng	СА	501 (c) (3)	9	NA		No
Kane County Neighborhood Stabilization C 1999 Broadway Suite 1000 Denver, CO 80202 27-2239991	low-ınc hsng	IL	501 (c) (3)	9	NA		No
Macleav Non-Proft Housing Development 1999 Broadway Suite 1000 Denver, CO 80202 94-2762529	low-ınc hsng	CA	501 (c) (3)	9	NA		No
Maria B Freitas Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3190261	low-ınc hsng	СА	501 (c) (3)	9	NA		No
Marin Homes for Independent Living 1999 Broadway Suite 1000 Denver, CO 80202 94-2787430	low-ınc hsng	CA	501 (c) (3)	11a	NA		No
Marin Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-1358291	low-ınc hsng	CA	501 (c) (3)	11a	NA		No
Marlton Affordable Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 91-2164481	low-ınc hsng	CA	501 (c)(3)	11a	NA		No
Marshside Village Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-1910771	low-ınc hsng	SC	501 (c)(3)	9	NA		No
McAuley Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1548500	low-ınc hsng	КҮ	501 (c) (3)	9	NA		No
Mercy Bond Properties AZ I 1999 Broadway Suite 1000 Denver, CO 80202 94-3142767	low-ınc hsng	ΑZ	501 (c)(3)	11a	NA		No
Mercy Bond Properties Colorado I 1999 Broadway Suite 1000 Denver, CO 80202 94-3286321	low-ınc hsng	со	501 (c)(3)	11a	NA		No
Mercy Bond Properties Nebraska I 1999 Broadway Suite 1000 Denver, CO 80202 68-0378674	low-ınc hsng	NE	501 (c)(3)	11a	NA		No
Mercy Community Housing Georgia 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689	low-ınc hsng	GA	501 (c) (3)	11a	NA		No
Mercy Gardens 1999 Broadway Suite 1000 Denver, CO 80202 33-0809069	low-inc hsng	СА	501 (c) (3)	9	NA		No

Form 990, Schedule R, Part II - Identification of Rela			1	1	1	ı	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b) cont	g) on 512 (13) rolled uty?
						Yes	No
Mercy Holly Park East 1999 Broadway Suite 1000 Denver, CO 80202 84-1347445	low-ınc hsng	СО	501 (c) (3)	11a	NA		No
Mercy Housing CA Holding Co 1999 Broadway Suite 1000 Denver, CO 80202 94-2834861	low-ınc hsng	СА	501 (c)(3)	11a	NA		No
Mercy Housing California 1999 Broadway Suite 1000 Denver, CO 80202 94-3081666	low-inc hsng	СА	501 (c)(3)	9	NA		No
Mercy Housing California Family Properti 1999 Broadway Suite 1000 Denver, CO 80202 33-0998451	low-ınc hsng	CA	501 (c)(3)	11a	NA		No
Mercy Housing California Senior Properti 1999 Broadway Suite 1000 Denver, CO 80202 20-3177114	low-ınc hsng	IL	501 (c)(3)	9	NA		No
Mercy Housing California Special Needs 1999 Broadway Suite 1000 Denver, CO 80202 94-3088260	low-ınc hsng	СА	501 (c)(3)	11a	NA		No
Mercy Housing CalWest 1999 Broadway Suite 1000 Denver, CO 80202 94-2963228	low-ınc hsng	СА	501 (c)(3)	9	NA		No
Mercy Housing Lakefront 1999 Broadway Suite 1000 Denver, CO 80202 36-3453183	low-ınc hsng	IL	501 (c)(3)	7	NA		No
MERCY HOUSING MANAGEMENT GROUP 1999 Broadway Suite 1000 Denver, CO 80202 82-0376108	low-ınc hsng	IL	501 (c)(3)	9	NA		No
Mercy Housing Midwest 1999 Broadway Suite 1000 Denver, CO 80202 47-0772351	low-ınc hsng	NE	501 (c)(3)	9	NA		No
MERCY HOUSING MOUNTAIN PLAINS 1999 Broadway Suite 1000 Denver, CO 80202 20-1583332	low-ınc hsng	СО	501 (c)(3)	9	NA		No
Mercy Housing Northwest 1999 Broadway Suite 1000 Denver, CO 80202 91-1546525	low-ınc hsng	WA	501 (c)(3)	9	NA		No
Mercy Housing Northwest Idaho Inc 1999 Broadway Suite 1000 Denver, CO 80202 36-3453183	low-ınc hsng	ID	501 (c)(3)	11a	NA		No
Mercy Housing Ohio Inc 1999 Broadway Suite 1000 Denver, CO 80202 20-2373936	low-ınc hsng	ОН	501 (c)(3)	11a	NA		No
Mercy Housing Pembroke Inc 1999 Broadway Suite 1000 Denver, CO 80202 13-4224803	low-ınc hsng	GA	501 (c)(3)	9	NA		No
Mercy Housing Southeast 1999 Broadway Suite 1000 Denver, CO 80202 56-1993872	low-ınc hsng	NC	501 (c)(3)	9	NA		No
Mercy Housing Southwest 1999 Broadway Suite 1000 Denver, CO 80202 86-0743192	low-ınc hsng	AZ	501 (c)(3)	9	NA		No
Mercy Housing West 1999 Broadway Suite 1000 Denver, CO 80202 68-0254564	low-ınc hsng	СА	501 (c)(3)	9	NA		No
Mercy Housing 2904 N 45th St Omaha 1999 Broadway Suite 1000 Denver, CO 80202 37-1068780	low-ınc hsng	NE	501 (c)(3)	9	NA		No
Mercy Housing Inc 1999 Broadway Suite 1000 Denver, CO 80202 47-0646706	low-ınc hsng	СА	501 (c)(3)	9	NA		No

Form 990, Schedule R, Part II - Identification of Relat			1	1	1	1 .	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b)(g) on 512 (13) rolled :ity?
						Yes	No
Mercy Loan Fund 1999 Broadway Suite 1000 Denver, CO 80202 84-1559406	low-ınc hsng	CA	501 (c) (3)	9	NA		No
Mercy Manor Inc 1999 Broadway Suite 1000 Denver, CO 80202 61-1344092	low-ınc hsng	TN	501 (c) (3)	9	NA		No
Mercy Midtown Inc 1999 Broadway Suite 1000 Denver, CO 80202 68-0002157	low-ınc hsng	СА	501 (c)(3)	9	NA		No
Mercy Moscow Inc (Hawthorne) 1999 Broadway Suite 1000 Denver, CO 80202 82-0475388	low-ınc hsng	ID	501 (c) (3)	9	NA		No
Mercy Oaks Village 1999 Broadway Suite 1000 Denver, CO 80202 75-3134134	low-ınc hsng	CA	501 (c) (3)	9	NA		No
Mercy Oakwood Gardens 1999 Broadway Suite 1000 Denver, CO 80202 84-1344220	low-ınc hsng	ΑZ	501 (c) (3)	9	NA		No
Mercy Place Belmont Inc 1999 Broadway Suite 1000 Denver, CO 80202 80-0034784	low-ınc hsng	NC	501 (c) (3)	9	NA		No
Mercy Portfolio Services 1999 Broadway Suite 1000 Denver, CO 80202 26-4002114	low-ınc hsng	со	501 (c) (3)	9	NA		No
Mercy Properties Arizona 1999 Broadway Suite 1000 Denver, CO 80202 86-0772987	low-ınc hsng	AR	501 (c) (3)	9	NA		No
Mercy Properties California 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-ınc hsng	CA	501 (c)(3)	11a	NA		No
Mercy Properties II Inc 1999 Broadway Suite 1000 Denver, CO 80202 82-0485862	low-ınc hsng	ID	501 (c)(3)	11a	NA		No
Mercy Properties WA II 1999 Broadway Suite 1000 Denver, CO 80202 30-0117515	low-ınc hsng	WA	501 (c) (3)	9	NA		No
Mercy Properties Washington 1999 Broadway Suite 1000 Denver, CO 80202 91-1903782	low-ınc hsng	WA	501 (c) (3)	11a	NA		No
Mercy Properties Inc (MPI) 1999 Broadway Suite 1000 Denver, CO 80202 84-1173689	low-ınc hsng	СА	501 (c) (3)	9	NA		No
Mercy Senior Housing Oxnard 1999 Broadway Suite 1000 Denver, CO 80202 94-3224446	low-ınc hsng	СА	501 (c) (3)	9	NA		No
Mercy Southeast Idaho Inc 1999 Broadway Suite 1000 Denver, CO 80202 84-1284293	low-ınc hsng	СА	501 (c) (3)	9	NA		No
Mercy Village Joplin 1999 Broadway Suite 1000 Denver, CO 80202 37-1459692	low-ınc hsng	МО	501 (c)(3)	9	NA		No
Mesa Senior Meadows 1999 Broadway Suite 1000 Denver, CO 80202 86-0897708	low-ınc hsng	AZ	501 (c)(3)	9	NA		No
Most Holy Redeemer Senior Housing Corpor 1999 Broadway Suite 1000 Denver, CO 80202 94-3044873	low-ınc hsng	CA	501 (c) (3)	9	NA		No
Neary Lagoon Inc 1999 Broadway Suite 1000 Denver, CO 80202 77-0214799	low-ınc hsng	СА	501 (c) (3)	9	NA		No

Form 990, Schedule R, Part II - Identification of Relat			1		I	1	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section (b) cont	g) on 512 (13) rolled city?
						Yes	No
Notre Dame Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3209503	low-ınc hsng	CA	501 (c) (3)	9	NA		No
Oceana Senior Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-3167825	low-inc hsng	СА	501 (c) (3)	9	NA		No
Padre Apartments Community 1999 Broadway Suite 1000 Denver, CO 80202 84-0789830	low-inc hsng	СА	501 (c) (3)	11a	NA		No
Peoria Place 1999 Broadway Suite 1000 Denver, CO 80202 86-0980811	low-inc hsng	ΑZ	501 (c)(3)	9	NA		No
Plazas de Merced 1999 Broadway Suite 1000 Denver, CO 80202 86-0758961	low-inc hsng	ΑZ	501 (c) (3)	9	NA		No
Presentation Senior Community 1999 Broadway Suite 1000 Denver, CO 80202 94-3264209	low-ınc hsng	CA	501 (c)(3)	9	NA		No
Riverview - St Mary's Inc(St Mary's 1999 Broadway Suite 1000 Denver, CO 80202 62-1782683	low-inc hsng	TN	501 (c) (3)	9	NA		No
Roseland Place Inc NFP 1999 Broadway Suite 1000 Denver, CO 80202 26-2330256	low-ınc hsng	IL	501 (c) (3)	9	NA		No
Roseland Village Inc 1999 Broadway Suite 1000 Denver, CO 80202 26-4723017	low-ınc hsng	IL	501 (c)(3)	9	NA		No
Russell Manor 1999 Broadway Suite 1000 Denver, CO 80202 93-1189914	low-inc hsng	CA	501 (c)(3)	9	NA		No
Sacred Heart Village I Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1411531	low-inc hsng	КҮ	501 (c)(3)	9	NA		No
Sacred Heart Village II Inc 1999 Broadway Suite 1000 Denver, CO 80202 61-1339396	low-inc hsng	KY	501 (c)(3)	9	NA		No
Sacred Heart Village III Inc 1999 Broadway Suite 1000 Denver, CO 80202 61-1367719	low-inc hsng	ОН	501 (c)(3)	9	NA		No
San Juan Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 68-0378676	low-inc hsng	CA	501 (c)(3)	11a	NA		No
Savannah Gardens Senior Residences Inc 1999 Broadway Suite 1000 Denver, CO 80202 27-3400284	low-inc hsng	GA	501 (c) (3)	9	NA		No
Siena Springs (Siena Springs I) 1999 Broadway Suite 1000 Denver, CO 80202 31-1052772	low-inc hsng	ОН	501 (c)(3)	9	NA		No
Siena Springs II 1999 Broadway Suite 1000 Denver, CO 80202 31-1591780	low-inc hsng	ОН	501 (c)(3)	9	NA		No
South of Market Mercy 1999 Broadway Suite 1000 Denver, CO 80202 94-3199902	low-inc hsng	CA	501 (c)(3)	11a	NA		No
St Catherine Residence Inc 1999 Broadway Suite 1000 Denver, CO 80202 39-0857537	low-ınc hsng	WI	501 (c) (3)	1	NA		No
St Elizabeth Housing Corp 1999 Broadway Suite 1000 Denver, CO 80202 94-2705149	low-inc hsng	CA	501 (c) (3)	11a	NA		No

Form 990, Schedule R, Part II - Identification of Relate	ed Tax-Exempt Or	ganizations					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity		on 512 (13) rolled
					l	Yes	No
St Mary's Villa at Riverview II Inc (1999 Broadway Suite 1000 Denver, CO 80202 31-1723287	low-ınc hsng	TN	501 (c)(3)	11a	NA		No
St Mary's Villa Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1548512	low-ınc hsng	КҮ	501 (c)(3)	9	NA		No
St Theresa Village Inc 1999 Broadway Suite 1000 Denver, CO 80202 31-1411529	low-ınc hsng	ОН	501 (c)(3)	9	NA		No
Sterling Senior Housing 1999 Broadway Suite 1000 Denver, CO 80202 14-1866405	low-inc hsng	WA	501 (c)(3)	9	NA		No
Sunset Lane Apartments LLC 1999 Broadway Suite 1000 Denver, CO 80202 45-3959651	low-ınc hsng	CA	501 (c)(3)	11A	NA		No
Tierra Del Sol Inc 1999 Broadway Suite 1000 Denver, CO 80202 75-3004763	low-ınc hsng	CA	501 (c) (3)	9	NA		No
Transbay Block 6 LLC 1999 Broadway Suite 1000 Denver, CO 80202 46-5357713	low-ınc hsng	CA	501 (c)(3)	9	NA		No
Villa Caridad Senior Housing 1999 Broadway Suite 1000 Denver, CO 80202 68-0387620	low-ınc hsng	CA	501 (c)(3)	9	NA		No
Visitacion Valley Affordable Housing 1999 Broadway Suite 1000 Denver, CO 80202 94-3273336	low-ınc hsng	CA	501 (c) (3)	11a	NA		No
Vista Alegre 1999 Broadway Suite 1000 Denver, CO 80202 86-0947230	low-ınc hsng	AZ	501 (c) (3)	9	NA		No
Walnut Grove 1999 Broadway Suite 1000 Denver, CO 80202 68-0233835	low-ınc hsng	CA	501 (c) (3)	11a	NA		No
Willow Street Apartments 1999 Broadway Suite 1000 Denver, CO 80202 84-1334167	low-ınc hsng	СО	501 (c) (3)	9	NA		No

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (e) General Legal (f) (g) Predominant Disproprtionate Code V-UBI amount (k) (b) (a) Share of end-Share of total Domicile Direct or Name, address, and EIN of allocations? Percentage Primary activity income(related ın Managing (State Controlling ıncome of-year assets ownership Box 20 of Schedule related organization unrelated. Entity Partner? or excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes No Yes No 1028 Howard St Associates low-inc hsng СА RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 94-3160742 104th Street LP ΙL RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 27-2755027 1100 Ocean Avenue LP RELATED low-inc hsng CA Νo Ina 1999 Broadway Suite 1000 Denver, CO 80202 45-4437017 1101 Howard St Associates low-inc hsng СА RELATED Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3160341 111 Jones Street Assoc CA RELATED Νo Νo low-inc hsng na (111 Jones St) 1999 Broadway Suite 1000 Denver, CO 80202 94-3142765 1475 167th Avenue Assoc СА RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 94-3249328 16th & Church Street Assoc low-inc hsng CAna RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3135262 RELATED 180 Properties ΙL Νo Νo low-inc hsng lna 1999 Broadway Suite 1000 Denver, CO 80202 27-0561021 1760 Bush LP low-inc hsng СА na RELATED Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-3449006 $\mathsf{C}\mathsf{A}$ 1880 Pine LP RELATED Νo low-inc hsng na Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-1291546 2000 Illinois Aurora LLC RELATED ΙL Νo Νo low-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 46-2558442 2101 Telegraph Avenue low-inc hsng СА RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 94-3222935 RELATED 2220 10th Avenue Assoc $\mathsf{C}\mathsf{A}$ low-inc hsng na Νo Νo (Santana Apts) 1999 Broadway Suite 1000 Denver, CO 80202 94-3140163 2698 California LP СА RELATED Nο Νo llow-inc hsna Ina 1999 Broadway Suite 1000 Denver, CO 80202 47-3462784 2814 Fifth Street СА RELATED Νo low-inc hsng na Νo Associates LP 1999 Broadway Suite 1000 Denver, CO 80202 68-0340317

Form 990, Schedule R, P	art III - Identif		of Related C)rganizations	Taxable as a	a Partnership	·	\ <u></u>	1			ı
(a) Name, address, and EIN of related organization	Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	Income	(g) Share of end- of-year assets	lalloca		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Mana Partn	neral or aging iner?	(k) Percentage ownership
365 Fulton LP (Parcel G)	low-inc hsng	CA	na	RELATED			163	No	 		No	
1999 Broadway Suite 1000 Denver, CO 80202 26-1539223												
	low-inc hsng	IL	na	RELATED			,	No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 36-3762788				!			'					
5042 Winthrop Apartments LP	low-ınc hsng	IL	na	RELATED				No	,		No	1
1999 Broadway Suite 1000 Denver, CO 80202 36-3855358				!								
55 Laguna LP	low-inc hsng	CA	na	RELATED			[No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 45-3582721				!								
901 West 63rd LP (Englewood Apartments)	low-inc hsng	IL	na	RELATED				No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 26-1233617												
	low-ınc hsng	GA	na	RELATED			,	No	,		No	1
1999 Broadway Suite 1000 Denver, CO 80202 20-4465851				!								
	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 20-4465972				!					!			
	low-inc hsng	GA	na	RELATED				No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 26-2252791				!								
Allegre Mercy Redevelopment LLLP	low-ınc hsng	WA	na	RELATED			1	No	,		No	1
1999 Broadway Suite 1000 Denver, CO 80202 45-3540725				!								
	low-ınc hsng	GA	na	RELATED				No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 27-0194197				!			'					
Appıan Way Mercy LLC	low-ınc hsng	WA	na	RELATED			'	No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 91-1546525												
Aromor Mercy LLC (Aromor Apartments)	low-ınc hsng	СО	na	RELATED			\[\text{'}	No			No	
1999 Broadway Suite 1000 Denver, CO 80202 30-0296042												
	low-ınc hsng	WA	na	RELATED			,	No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 20-1031378												
Belray Apartments	low-ınc hsng	IL	na	RELATED			·	No	,		No	1
1999 Broadway Suite 1000 Denver, CO 80202 36-4027474							!					
	low-ınc hsng	CA	na	RELATED			,	No	,		No	
1999 Broadway Suite 1000 Denver, CO 80202 65-1308081				!					!			

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General Legal (f) (g) Predominant Disproprtionate Code V-UBI amount (k) (b) (a) Share of total Domicile Direct Share of endor Name, address, and EIN of allocations? Percentage Primary activity income(related ın Managing (State Controlling ıncome of-year assets ownership Box 20 of Schedule related organization unrelated. Entity Partner? or excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes No Yes No Bishops Block (Bishops IΑ RELATED Νo Νo low-inc hsng na Block) 1999 Broadway Suite 1000 Denver, CO 80202 01-0477157 Bluff Mercy LLC low-inc hsng CO na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 27-0954394 Boise Senior 202 Owner LP ΙD RELATED Νo Νo llow-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 27-0992784 Boundary Village WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 RELATED Brentwood Green Valley СА Νo Νo low-inc hsna na Apts 1999 Broadway Suite 1000 Denver, CO 80202 94-3135990 Britton Street Assoc(Britton low-inc hsng RELATED CA Nο Nο Ina Court) 1999 Broadway Suite 1000 Denver, CO 80202 94-3300509 RELATED Cambridge Apartments low-inc hsng WA Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 Cascade Apartments low-inc hsng WA RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Cascade Village WA RELATED Νo Νo low-inc hsng lna 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 Cedarwood I WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 RELATED Cedarwood IV WA Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Centro Partners СА RELATED Νo Νo low-inc hsna Ina 1999 Broadway Suite 1000 Denver, CO 80202 77-0295344 Cheney Gardens low-inc hsng WA na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 Coastside Senior Housing LP low-inc hsng СА RELATED Nο Νo na 1999 Broadway Suite 1000 Denver, CO 80202 45-2262853 Colonia San Martin СА RELATED Νo low-inc hsng na Νo Associates LP 1999 Broadway Suite 1000 Denver, CO 80202 83-0481233

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General (d) (f) Legal (g) Predominant Disproprtionate Code V-UBI amount (k) (b) (a) Share of total Domicile Direct Share of endor Name, address, and EIN of Primary activity allocations? Percentage income(related ın Managing (State Controlling ıncome of-year assets ownership Box 20 of Schedule related organization unrelated. Entity Partner? or excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes No Yes No Commons on Main LP ОН RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 20-8033896 Countryside Senior ΙL RELATED Νo Νo low-inc hsng na Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 26-1483851 Danville Veterans Housing ΙL RELATED Νo Νo low-inc hsng na LLC 1999 Broadway Suite 1000 Denver, CO 80202 35-2441770 Dorothy Day Community LP СА RELATED Νo Νo low-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 65-1308078 Dove Family Housing RELATED Νo low-inc hsng CAna Νo Associates LP 1999 Broadway Suite 1000 Denver, CO 80202 33-0975782 RELATED Eden House LP CAΝo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 46-2704216 El Monte LP RELATED low-inc hsng СА Νo Νo lna 1999 Broadway Suite 1000 Denver, CO 80202 46-1360554 Evergreen Manor low-inc hsng WA RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Evergreen Vista 1 Owner LP low-inc hsng WA RELATED Νo Νo lna 1999 Broadway Suite 1000 Denver, CO 80202 27-4160484 Family Tree & Lincoln Way WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 46-2841485 RELATED Ferndale Villa low-inc hsng WA Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 RELATED Fircrest WA Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Florin Wood Assoc RELATED Νo Νo low-inc hsng CAna 1999 Broadway Suite 1000 Denver, CO 80202 68-0318012 Franciscan Homes III LP low-inc hsng ΟН na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 31-1394513 RELATED Franciscan Homes IV LP low-inc hsna ОН lna Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 31-1463371

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General or Legal (d) (f) (g) Predominant Disproprtionate Code V-UBI amount (k) (b) (a) Share of end-Share of total Domicile Direct Name, address, and EIN of allocations? Percentage Primary activity income(related, ın (State Controlling ıncome of-year assets Managing Box 20 of Schedule ownership related organization unrelated, Entity Partner? or excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes No Yes No Galewood SLF Associates LP low-inc hsng ΙL RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 20-1882654 RELATED Grayslake senior housing ΙL Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 26-3800351 Greenwich Park Apartments RELATED low-inc hsng WI Νo Νo lna LLC 1999 Broadway Suite 1000 Denver, CO 80202 32-0453460 Harold Washington ΙL RELATED Νo Νo low-inc hsng na Apartments 1999 Broadway Suite 1000 Denver, CO 80202 36-3556291 HWA-850 EASTWOOD LP ΙL RELATED low-inc hsng na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 27-1257130 Impact Family Village GP LLC RELATED Νo low-inc hsng WA Nο lna 1999 Broadway Suite 1000 Denver, CO 80202 36-4715432 Impact Family Village LP WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 80-0769567 RELATED Νo WA Νo Intercommunity Mercy low-inc hsng na Washington II 1999 Broadway Suite 1000 Denver, CO 80202 91-1572690 JFK Tower LP СА RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 47-3477829 Johnston Center Outlots LLC WI RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 27-0162550 RELATED Johnston Center Re-Use LP ΙL Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 30-0529359 Junipero Serra LP СА RELATED Νo Νo low-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 65-1308082 RELATED Kankakee Station Street low-inc hsng ΙL na Νo Νo Senior Housing L 1999 Broadway Suite 1000 Denver, CO 80202 46-1841937 RELATED Kennedy Estates Hsg Assoc low-inc hsng $\mathsf{C}\mathsf{A}$ na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 68-0355465 RELATED La Playa Residential low-inc hsna СА lna Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0278613

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General Legal (g) Predominant Disproprtionate Code V-UBI amount (k) (a) (b) Share of total Direct Share of endor Domicile Name, address, and EIN of allocations? Percentage Primary activity income(related ın Managing (State Controlling ıncome of-year assets ownership Box 20 of Schedule related organization unrelated. Entity Partner? excluded from K-1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No RELATED Lake Stevens low-inc hsng WA na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Lake Village East RELATED low-inc hsng WA na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 WA RELATED Νo Mabton Gardens low-inc hsng na Νo 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 Magnolia Limited Partnership low-inc hsng ΙL RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 36-3822288 Malden Limited Partnership RELATED Νo low-inc hsng IL Νo na ΙI 1999 Broadway Suite 1000 Denver, CO 80202 20-8746121 Marlton Affordable Hsg СА RELATED Νo Νo low-inc hsng na Assoc 1999 Broadway Suite 1000 Denver, CO 80202 04-3594636 СО Mason Apartments (Mason RELATED Νo Νo low-inc hsng na School Apts) 1999 Broadway Suite 1000 Denver, CO 80202 42-1301449 Mercy Alston Lake LLC SC RELATED Νo Νo low-inc hsna na 1999 Broadway Suite 1000 Denver, CO 80202 20-2948887 ΝE RELATED Νo Mercy Crestview Village low-inc hsng Νo na Housing LP 1999 Broadway Suite 1000 Denver, CO 80202 26-4578510 Mercy Eden House LLC RELATED low-inc hsng СА na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 46-4227209 MERCY FAMILY PLAZA LP СА RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 94-3094867 Mercy Housing Arizona I ΑZ RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 86-0791473 Mercy Housing Arizona II RELATED ΑZ Νo Νo low-inc hsna na (Page Commons) 1999 Broadway Suite 1000 Denver, CO 80202 33-1075152 Mercy Housing Ca XXXIII СА RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 43-2100410 Mercy Housing Ca XXXVII RELATED Νo CA Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 68-0631916

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (e) Legal (d) (f) General (g) Disproprtionate Code V-UBI amount Predominant (k) (a) Direct Share of total Share of end-Domicile or Name, address, and EIN of allocations? Percentage Primary activity income(related ın Controlling ıncome of-year assets Managing (State ownership related organization unrelated, Box 20 of Schedule Partner? Entity or excluded from K-1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No СА Mercy Housing California 46 low-inc hsng RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 27-2321382 Mercy Housing California 47 low-inc hsng RELATED CAΝo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 27-2930358 Mercy Housing California 48 low-inc hsng СА RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 27-3117667 Mercy Housing California 49 low-inc hsng CARELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 27-3277379 Mercy Housing California 50 low-inc hsng RELATED CAna Νo Νo LP(St Anth 1999 Broadway Suite 1000 Denver, CO 80202 27-3381997 RELATED Mercy Housing California 51 low-inc hsng CAΝo Νo na LP (200 6th 1999 Broadway Suite 1000 Denver, CO 80202 94-2963228 RELATED Mercy Housing California 52 low-inc hsng CAΝo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 45-2751062 RELATED Mercy Housing California 53 low-inc hsng CAΝo Νo na LP (Madonna 1999 Broadway Suite 1000 Denver, CO 80202 45-2050339 Mercy Housing California 54 low-inc hsng CARELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 94-2963228 RELATED Mercy Housing California 55 low-inc hsng CAΝo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 45-3710672 RELATED Mercy Housing California 56 low-inc hsng СА Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 45-4659051 RELATED Mercy Housing California 57 low-inc hsng GΑ Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 45-4711412 Mercy Housing California 58 low-inc hsng RELATED CAΝo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 45-4486957 Mercy Housing California 59 | low-inc hsng RELATED CAΝo Νo na LP 1999 Broadway Suite 1000 Denver, CO 80202 46-2537487 Mercy Housing California 60 low-inc hsng RELATED CAΝo Νo na LP 1999 Broadway Suite 1000 Denver, CO 80202 46-1239561

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (e) Legal General (g) Disproprtionate Code V-UBI amount (k) Predominant (b) (a) Domicile Direct Share of total Share of end-٥r Name, address, and EIN of allocations? Percentage Primary activity income(related ın (State Controllingıncome of-year assets Managing Box 20 of Schedule ownership related organization unrelated. Entity Partner? excluded from K-1 Foreign (Form 1065) tax under Country sections 512-514) Yes Yes No No Mercy Housing California 61 low-inc hsng СА RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 46-3636570 Mercy Housing California 62 low-inc hsng CARELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 46-3424351 Mercy Housing California 63 low-inc hsng СА na RELATED Νo 1999 Broadway Suite 1000 Denver, CO 80202 46-3921420 Mercy Housing California 64 low-inc hsng CAna RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 46-5015672 Mercy Housing California 65 low-inc hsng CARELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 47-1120541 Mercy Housing California 66 low-inc hsng CARELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 47-3441276 RELATED Mercy Housing California 67 low-inc hsng CAΝo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 47-3628711 RELATED Mercy Housing California 68 low-inc hsng CAna Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-4992813 Mercy Housing California 71 low-inc hsng CAna RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-5468338 RELATED Mercy Housing California 72 low-inc hsng Νo Νo CA na 1999 Broadway Suite 1000 Denver, CO 80202 81-1758210 Mercy Housing California I low-inc hsng CAna RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 84-1210914 RELATED Mercy Housing California II low-inc hsng CA na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3187825 Mercy Housing California III low-inc hsng RELATED CAna Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3187826 Mercy Housing California IX low-inc hsng СА na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3230471 Mercy Housing California V СА RELATED Νo Νo llow-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 94-3229051

Form 990, Schedule R, F	Part III - Identi		of Related C	Organizations	Taxable as a	Partnership	1		1	۱ ،	. 1	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Disprop alloca		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Managing Partner?		(k) Percentage ownership
Mercy Housing California VI	low-ınc hsng	CA	na	RELATED			Yes	No No		Yes	No No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3224528	-											
Mercy Housing California VII	low-ınc hsng	СА	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3229540												
Mercy Housing California VIII	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3229541												
Mercy Housing California X (The Rose)	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3232501												
Mercy Housing California XI	low-ınc hsng	СА	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3244521												
Mercy Housing California XII	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3366333												
Mercy Housing California XIII	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3377935												
Mercy Housing California XIV	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3377941												
Mercy Housing California XIX	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 01-0716135												
	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-1398920												
Mercy Housing California XLI	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-2350027												
Mercy Housing California XLII	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-2575525												
Mercy Housing California XLIII	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-2553554												
	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-3583090												
	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 65-1308076												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (i) (e) General Legal Predominant Disproprtionate Code V-UBI amount (k) (b) Share of total Direct or Domicile Share of end-Name, address, and EIN of Primary activity income(related allocations? ın Percentage Managing Controlling (State ıncome of-year assets related organization unrelated, Box 20 of Schedule ownership Partner? Entity or excluded from K-1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No Mercy Housing California low-inc hsng СА RELATED Νo na XLVII 1999 Broadway Suite 1000 Denver, CO 80202 27-2930358 Mercy Housing California XV low-inc hsng СА RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 94-3379316 RELATED Mercy Housing California СА na Νo Νo low-inc hsng 1999 Broadway Suite 1000 Denver, CO 80202 94-3381170 Mercy Housing California СА RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 94-3400496 RELATED Mercy Housing California low-inc hsng $\mathsf{C}\mathsf{A}$ na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 03-0376881 Mercy Housing California XX low-inc hsng СА RELATED Νo Νo lna 1999 Broadway Suite 1000 Denver, CO 80202 36-4497277 Mercy Housing California CA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 48-1259652 Mercy Housing California RELATED Νo low-inc hsng CA na Νo XXII 1999 Broadway Suite 1000 Denver, CO 80202 35-2172040 Mercy Housing California СА RELATED low-inc hsng na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 82-0560494 Mercy Housing California RELATED low-inc hsng CA na Νo Νo XXIV 1999 Broadway Suite 1000 Denver, CO 80202 74-3052786 RELATED Mercy Housing California low-inc hsng CA na Νo Νo XXXX 1999 Broadway Suite 1000 Denver, CO 80202 73-1729092 Mercy Housing California low-inc hsng СА na RELATED Νo Νo XXV1999 Broadway Suite 1000 Denver, CO 80202 81-0564415 Mercy Housing California low-inc hsng СА na RELATED Νo Νo XXVI 1999 Broadway Suite 1000 Denver, CO 80202 58-2679059 Mercy Housing California low-inc hsng СА na RELATED Νo Νo XXVII 1999 Broadway Suite 1000 Denver, CO 80202 65-1207291 Mercy Housing California СА RELATED Νo Νo low-inc hsng na XXVIII 1999 Broadway Suite 1000 Denver, CO 80202 73-1721242

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (e) Legal (d) General or Disproprtionate Code V-UBI amount (k) Predominant (a) (b) Direct Share of total Domicile Share of end-Name, address, and EIN of Percentage Primary activity allocations? income(related, ın Managing (State Controlling ıncome of-year assets ownership Box 20 of Schedule related organization unrelated. Entity Partner? or excluded from K-1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No RELATED Mercy Housing California СА Νo Νo low-inc hsng lna 1999 Broadway Suite 1000 Denver, CO 80202 61-1488186 Mercy Housing California СА RELATED Νo Νo low-inc hsng na XXXI 1999 Broadway Suite 1000 Denver, CO 80202 87-0756700 Mercy Housing California low-inc hsng $\mathsf{C}\mathsf{A}$ na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 87-0756940 Mercy Housing California low-ınc hsng $\mathsf{C}\mathsf{A}$ lna RELATED Νo Νo XXXIV LP 1999 Broadway Suite 1000 Denver, CO 80202 51-0594948 Mercy Housing California RELATED Νo low-inc hsna CA Νo Ina XXXIX 1999 Broadway Suite 1000 Denver, CO 80202 01-0885277 Mercy Housing California СА RELATED Νo Νo low-inc hsng na XXXV1999 Broadway Suite 1000 Denver, CO 80202 76-0827799 Mercy Housing California СА RELATED Νo Νo low-inc hsng na IVXXX 1999 Broadway Suite 1000 Denver, CO 80202 56-2568833 RELATED Mercy Housing California low-inc hsng $\mathsf{C}\mathsf{A}$ Νo Νo XXXVIII 1999 Broadway Suite 1000 Denver, CO 80202 33-1153406 MERCY HOUSING СО lna RELATED Νo Νo low-inc hsng COLORADO I LTD 1999 Broadway Suite 1000 Denver. CO 80202 84-1176712 СО RELATED Mercy Housing Colorado III low-inc hsng Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 84-1292696 Mercy Housing Colorado IV RELATED Νo Νo low-inc hsng СО na 1999 Broadway Suite 1000 Denver, CO 80202 84-1284749 Mercy Housing Colorado V СО na RELATED Νo Νo low-inc hsng 1999 Broadway Suite 1000 Denver, CO 80202 84-1318329 Mercy Housing Colorado VI CO RELATED Νo low-inc hsng na Νo 1999 Broadway Suite 1000 Denver, CO 80202 84-1361296 Mercy Housing Colorado VII low-inc hsng CO RELATED Nο Νo Ina 1999 Broadway Suite 1000 Denver, CO 80202 84-1473883 RELATED Mercy Housing Colorado VIII low-inc hsng СО Νo Νo lna 1999 Broadway Suite 1000 Denver, CO 80202 93-1190349

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end- of-year assets	allocations Yes No		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Conoral		(k) Percentage ownership
Mercy Housing Colorado XI LLC	low-ınc hsng	со	na	RELATED				No		100	No	
1999 Broadway Suite 1000 Denver, CO 80202 20-5331841												
Mercy Housing Colorado-I LTD (Grace)	low-ınc hsng	СО	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1176712												
Mercy Housing Colorado-II Ltd	low-inc hsng	СО	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1176713												
Mercy Housing Colorado-IX	low-ınc hsng	со	na	RELATED				No			Νo	
1999 Broadway Suite 1000 Denver, CO 80202 87-0706258												
Mercy Housing Georgia 12 LP (Savannah G	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 27-2987561												
Mercy Housing Georgia 13 LP	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 45-5108221												
Mercy Housing Georgia 14 LP	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 46-2787254												
Mercy Housing Georgia 15 LP	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 46-5547801												
Mercy Housing Georgia I	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 58-2461689												
Mercy Housing Georgia II	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 58-2621798												
Mercy Housing Georgia III	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 43-1954812												
Mercy Housing Georgia IV	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 56-2328730												
Mercy Housing Georgia IX LP	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 20-8829418												
Mercy Housing Georgia V LP	low-ınc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 90-0284434												
Mercy Housing Georgia VI LP	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 20-4466474												

Form 990, Schedule R,	Part III - Identi	1	of Related (Organizations	Taxable as a	a Partnership	I		1	. ا	, I	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Disproj alloca		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r iging	(k) Percentage ownership
Mercy Housing Georgia VIII LP	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 58-2461689												
Mercy Housing Georgia X (Savannah Garden	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 27-0162550												
Mercy Housing Georgia XI LP (Etowah Ter	low-inc hsng	GA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-2523190												
Mercy Housing Idaho I	low-ınc hsng	ID	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1212028												
Mercy Housing Idaho II	low-ınc hsng	ID	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1212029												
Mercy Housing Idaho III	low-ınc hsng	ID	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1251391												
Mercy Housing Idaho IV	low-ınc hsng	ID	na	RELATED				No			Νo	
1999 Broadway Suite 1000 Denver, CO 80202 82-0487654												
Mercy Housing Idaho NSP LLC (NSPID)	low-ınc hsng	ID	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 27-1039061												
Mercy Housing Idaho V (Sisters Villa)	low-inc hsng	ID	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 04-3624359												
Mercy Housing Iowa II LP	low-inc hsng	IA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1284752												
mercy housing midwest nebraska llc	low-ınc hsng	NE	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 20-1583332												
Mercy Housing Missouri II	low-ınc hsng	МО	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 84-1201811												
Mercy Housing S Carolina I	low-ınc hsng	sc	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 59-3767323												
Mercy Housing Senior Properties LLC	low-inc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3081666												
Mercy Housing South Carolina I	low-inc hsng	sc	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 59-3767323												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (i) (e) General Legal Predominant Disproprtionate Code V-UBI amount (k) (b) (a) Direct or Domicile Share of total Share of end-Name, address, and EIN of Primary activity income(related allocations? ın Percentage Managing (State Controlling ıncome of-year assets unrelated, Box 20 of Schedule ownership Partner? Entity or excluded from K-1 Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No Mercy Housing South Dakota low-inc hsng SD RELATED Νo na 1999 Broadway Suite 1000 Denver. CO 80202 20-2830331 Mercy Housing South Dakota low-inc hsng SD RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 20-2830356 Mercy Housing Utah I low-ınc hsng UT na RELATED Νo 1999 Broadway Suite 1000 Denver, CO 80202 02-0564555 Mercy Housing Washington WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 91-1676111 RELATED Mercy Housing Washington low-inc hsng WA na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 65-1186086 Mercy Housing Washington ΟR RELATED Νo Νo low-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 84-1457612 Mercy Housing Washington RELATED Νo WA Νo low-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 84-1459924 RELATED Mercy Housing Washington WA Νo Νo low-inc hsng lna VII 1999 Broadway Suite 1000 Denver, CO 80202 91-2038920 Mercy Housing Washington WA RELATED Νo Νo low-inc hsng na VIII 1999 Broadway Suite 1000 Denver, CO 80202 91-2124779 Mercy Housing Washington X low-inc hsng WA RELATED Νo Νo na LLC 1999 Broadway Suite 1000 Denver, CO 80202 55-0887839 Mercy Loan Fund Sub-CDE СО low-inc hsng na IRELATED Νo Νo LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-1326149 RELATED Mercy Properties low-ınc hsng WA na Νo Νo Washington I LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 RELATED Mercy Properties low-inc hsng WA na Νo Νo Washington II 1999 Broadway Suite 1000 Denver, CO 80202 30-0117515 Mercy Properties low-inc hsng WA na RELATED Νo Νo Washington III LLC 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 MHC Health 1 LP low-inc hsng СА na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-3554305

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) (h) (e) General (d) (f) Legal (g) (k) (b) Predominant Disproprtionate Code V-UBI amount Direct Share of total Share of end-Domicile Name, address, and EIN of Primary activity ncome(related, allocations? Percentage Controlling Managing (State ıncome of-year assets related organization unrelated, Box 20 of Schedule ownership Partner? or Entity excluded from K-1 Foreign tax under (Form 1065) Country sections 512-514) Yes Yes No No MHNW 9 Othello East LP WA RELATED Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 47-1620007 MHNW 10 Othello West LP RELATED low-inc hsng WA na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-1614235 RELATED MHNW 11 Woodlakes LP WA Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 47-2334969 MHNW 12 Eleanor WA RELATED low-inc hsna Νo Νo na Apartments LLLP 1999 Broadway Suite 1000 Denver, CO 80202 47-3599013 WA RELATED Νo MHNW 13 Building 9 South llow-inc hsng Nο na 1999 Broadway Suite 1000 Denver, CO 80202 47-4660134 MHNW 14 Building 9 North RELATED WA Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 47-4683004 MHSE Adamsville Green RELATED low-inc hsng GΑ na Νo Νo Senior Partners LL 1999 Broadway Suite 1000 Denver, CO 80202 26-2523190 MHSE Bailey Station Senior GΑ RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 46-1868814 MHSE Mercy Park LP RELATED low-inc hsng GΑ na Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 61-1757712 MHSE Pinelake LP GΑ RELATED Νo Νo low-inc hsna na 1999 Broadway Suite 1000 Denver, CO 80202 80-0616765 MHSE Pinelake I LP GΑ RELATED Νo Νo low-inc hsna na 1999 Broadway Suite 1000 Denver, CO 80202 90-0856866 MHSE Reynoldstown Senior RELATED GΑ Nο Νo llow-ınc hsna na 1999 Broadway Suite 1000 Denver, CO 80202 46-3054017 MSHE Wilson Senior GΑ RELATED Νo Νo low-inc hsng na Residence LP 1999 Broadway Suite 1000 Denver, CO 80202 46-4907701 Monroe Villa low-inc hsng WA na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Monsignor Lyne LP low-inc hsng $\mathsf{C}\mathsf{A}$ na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 65-1308080

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (e) General or Legal (d) (f) (g) (k) (b) Predominant Disproprtionate Code V-UBI amount (a) Share of total Domicile Direct Share of end-Name, address, and EIN of Primary activity ncome(related, allocations? Percentage ın Managing (State Controlling income of-year assets Box 20 of Schedule ownership related organization unrelated, Partner? or Entity excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes No Yes No ΙL RELATED Νo Νo Mortgage Resolution Fund lmanagement na 120 LaSalle Suite 1850 Chicago, IL 60603 45-3801619 RELATED Moses Lake Estates low-inc hsng WA Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 MPI Highland Place GΑ RELATED Νo Νo low-inc hsng na Apartments LP 1999 Broadway Suite 1000 Denver, CO 80202 58-2461689 ΙL RELATED Near North Partnership lna Νo Νo low-inc hsng 1999 Broadway Suite 1000 Denver, CO 80202 32-0143113 low-inc hsng RELATED Νo $\mathsf{C}\mathsf{A}$ Nο Neary Lagoon Partners na 1999 Broadway Suite 1000 Denver, CO 80202 77-0256317 New Dana Strand IV-A LP $\mathsf{C}\mathsf{A}$ RELATED Νo Νo low-inc hsng 1999 Broadway Suite 1000 Denver, CO 80202 47-3082758 RELATED Νo New Dana Strand Partners I low-inc hsng $\mathsf{C}\mathsf{A}$ na Νo 1999 Broadway Suite 1000 Denver, CO 80202 51-0524022 СА RELATED Νo Νo New Dana Strand na low-inc hsng Townhomes 1999 Broadway Suite 1000 Denver, CO 80202 51-0524022 New Sterling Park LLC low-ınc hsng ΙL na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 27-2523530 RELATED New Sterling Park MM LLC ΙL na Νo Νo low-inc hsna 1999 Broadway Suite 1000 Denver, CO 80202 27-2523309 New Tacoma Phase II WA RELATED Νo Νo na low-inc hsng Mercy LLC 1999 Broadway Suite 1000 Denver, CO 80202 45-2478067 RELATED New Tacoma Senior Housing low-inc hsng WA na Νo Νo Phase I 1999 Broadway Suite 1000 Denver, CO 80202 91-1546525 Northglen LP low-inc hsng ΝE na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 32-0139512 Oak Harbor RELATED WA Nο Nο lna low-inc hsna 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 RELATED WA Νo O lympic low-inc hsng na Νo 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General or Legal (d) (f) (g) Predominant Disproprtionate Code V-UBI amount (k) (b) (a) Share of total Domicile Direct Share of end-Name, address, and EIN of allocations? Percentage Primary activity ncome(related ın (State Controlling ıncome of-year assets Managing ownership related organization Box 20 of Schedule unrelated. Entity Partner? or excluded from K-1 Foreign tax under (Form 1065) Country) sections 512-514) Yes No Yes No Park Terrace Apts (Park СА RELATED Νo Νo low-inc hsng na Terrace Apts) 1999 Broadway Suite 1000 Denver, CO 80202 94-3332881 Parkside Terrace LP low-inc hsng ΙL na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 36-3914505 Pilchuck RELATED low-inc hsng WA Νo Νo lna 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463 Pine Road Village WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 RELATED Pinewood Court Apartments CAΝo Νo low-inc hsna lna 1999 Broadway Suite 1000 Denver, CO 80202 68-0435836 Rainer Vista Block 43 Owner WA RELATED Νo Νo low-inc hsng na LP (Columbia 1999 Broadway Suite 1000 Denver, CO 80202 27-3221112 Red Door Limited Partnership low-inc hsng ΙL RELATED Νo Νo na 1999 Broadway Suite 1000 Denver, CO 80202 36-3915050 RELATED Reynoldstown Senior Apts GΑ Νo Νo low-inc hsng na (Renoldstown) 1999 Broadway Suite 1000 Denver, CO 80202 27-0162550 Rock Creek Terrace WA RELATED Νo Νo lna low-inc hsng 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 Roseland Limited Partnerhsip ΙL RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 36-4304416 Roseland Place LP ΙL RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 80-0195044 San Felipe Homes (San Felipe low-inc hsng СА RELATED Νo Νo lna Homes) 1999 Broadway Suite 1000 Denver, CO 80202 95-4384732 Sandstone WA RELATED Νo Νo low-inc hsng na 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378 SC Residence LLC low-inc hsng WI na RELATED Νo Νo 1999 Broadway Suite 1000 Denver, CO 80202 26-0675562 RELATED Silvercrest low-inc hsna WA Νo Νo lna 1999 Broadway Suite 1000 Denver, CO 80202 20-1031378

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	Income	(g) Share of end- of-year assets	lalloca		(i) e Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Geno o Mana	or aging tner?	(k) Percentage ownership
Skagıt Vıllage	low-ınc hsng	WA	na	RELATED			1	No			No	1
1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	!			!								
Somerset Senior Hsg	low-ınc hsng	TX	na	RELATED				No			No	1
1999 Broadway Suite 1000 Denver, CO 80202 74-2765568				!								
South Loop Apartments	low-ınc hsng	IL	na	RELATED				No			No	<u> </u>
1999 Broadway Suite 1000 Denver, CO 80202 36-4027476				!								
	low-ınc hsng	CA	na	RELATED				No		!	No	
1999 Broadway Suite 1000 Denver, CO 80202 65-1308080	!			!								
Sunnydale Development Co LLC	low-ınc hsng	CA	na	RELATED				No	1		No	1
1999 Broadway Suite 1000 Denver, CO 80202 26-3566543												
	low-inc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3298324												
	low-ınc hsng	IL	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-4584321				!								
	low-inc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 26-4176495				!								
Villa Columba Mercy Riverside LP	low-ınc hsng	CA	na	RELATED				No			No	<u> </u>
1999 Broadway Suite 1000 Denver, CO 80202	,											
	low-ınc hsng	CA	na	RELATED			+	No	-	—	No	
Riverside LP (Merc	- ,	1		,		'						1
1999 Broadway Suite 1000 Denver, CO 80202 36-4304416	'			!								
Villa Kathleen Redevelopment	low-inc hsng	WA	na	RELATED				No			No	1
1999 Broadway Suite 1000 Denver, CO 80202 77-0601463				!								
Village Park Housing Associates	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 68-0254566												
Visitation Valley Fam Hsg Assoc	low-ınc hsng	CA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 94-3275566												
-	low-ınc hsng	WA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 20-1031378												
Washington Square	low-ınc hsng	WA	na	RELATED				No			No	
1999 Broadway Suite 1000 Denver, CO 80202 20-1031378				!								

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

Form 990, Schedule K,	rait III - Ideiiti	ilcation	UI KEIALEU C	, garnzations	I axable as a	Parmersinp	I		1			
(a) Name, address, and EIN of related organization	Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Disproprtionate allocations? Yes No		tionate code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)) eral r iging ner?	(k) Percentage ownership
				312-314)			Yes	No		Yes	No	
Wentworth Commons 1999 Broadway Suite 1000 Denver, CO 80202 30-0082553	low-inc hsng	IL	na	RELATED				No			No	
West 28th Street 1999 Broadway Suite 1000 Denver, CO 80202 95-4550003	low-inc hsng	CA	na	RELATED				No			No	
Western Manor LP 1999 Broadway Suite 1000 Denver, CO 80202 26-4578652	low-inc hsng	NE	na	RELATED				No			No	
Woodlake Manor 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED				No			No	
Woodlake Manor II 1999 Broadway Suite 1000 Denver, CO 80202 77-0601463	low-inc hsng	WA	na	RELATED				No			No	

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (d) (h) (i) (b) (c) (e) (f) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section related organization domicile (C corp, S ownership 512(b)(13) entity ıncome year (state or foreign corp, assets controlled country) or trust) entity? Yes No (1) 104th street mm llc ΙL na Νo management c corp 1999 Broadway Suite 1000 Denver, CO 80202 27-2754418 (1) 111th & Wentworth Apartments Corp ΙL management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 38-3648994 (2) Affordable Housing Corp CA management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 84-1173690 (3) Affordable Housing Initiative (AHI) management CA na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3096988 (4) Antioch II LLC GΑ na Νo management c corp 1999 Broadway Suite 1000 Denver, CO 80202 27-3209358 ΙL c corp (5) Aurora Snior Apartments GP LLC management na Νo 1999 Broadway Suite 1000 Denver, CO 80202 27-2564297 (6) Belray Apartments Corporation management ΙL na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 36-4027474 (7) Belvidere Place Corp I NFP ΚY na Νo low-inc hsng c corp 1999 Broadway Suite 1000 Denver, CO 80202 26-3800299 (8) Countryside Seniors LLC ΙL c corp Νo management na 1999 Broadway Suite 1000 Denver, CO 80202 26-1483851 (9) Englewood Apartments NFP ΙL management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 26-1233523 (10) Greenwich Park Apartments MM LLC management WI na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 61-1750718 (11)ΙL c corp Νo management na Harold Washington Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-3556291 (12) HWA 850 EastWOOD GP ΙL management Νo na c corp 1999 Broadway Suite 1000 Denver, CO 80202 27-1257072 (13) Impact Family Village GP LLC management WA na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 36-4715432 (14) Malden Arms Corp II NFP CA Νo management na c corp 1999 Broadway Suite 1000 Denver, CO 80202 36-3815990

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (b) (c) (d) (e) (g) (h) (i) Name, address, and EIN of Direct controlling Type of entity Share of end-of-Primary activity Legal Share of total Percentage Section related organization domicile entity (C corp, S ıncome year ownership 512(b)(13) (state or foreign corp, assets controlled country) or trust) entity? Yes (16) McDermott Place management IΑ na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 47-0779682 (1) MCHG Partners Inc (MCHG) management GΑ na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 20-8824753 (2) Mercy Affordable Housing Inc (MAHI) ID management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 82-0489878 (3) Mercy Commercial California СА management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 94-3382154 (4) Mercy Galewood SLF Inc ΙL management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 20-5825081 (5) Mercy Housing Georgia XI GP LLC GΑ Νo management na c corp 1999 Broadway Suite 1000 Denver, CO 80202 27-3316657 (6) Mercy Lithonia Park View Inc (MLithPV) GΑ management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 20-8829364 (7) Mercy Sterling NFP ΙL management na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 27-4446431 (8) MHMP CO GP Inc low-inc hsng CO na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 61-1689475 (9) MHSE Adamsville Green Senior Partners | low-inc hsng GΑ na Νo c corp 1999 Broadway Suite 1000 Denver, CO 80202 27-1321251 (10) MHSE Arbors LLC GΑ low-inc hsng na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 27-3284075 (11)low-inc hsng GΑ Νo na c corp MHSE Savannah Gardens Phase III LLC 1999 Broadway Suite 1000 Denver, CO 80202 58-2434289 (12) MHSE Savannah Gardens Phase IV GP | management GΑ na Νo c corp 1999 Broadway Suite 1000 Denver, CO 80202 45-4967129 (13)GΑ low-inc hsng na c corp Νo MHSE Savannah Gardens Phase V GP LLC 1999 Broadway Suite 1000 Denver, CO 80202 46-2777338 (14) MHL Keating MM LLC management ΙL na c corp Νo 1999 Broadway Suite 1000 Denver, CO 80202 26-4584262

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Secti 512(b) contro entit	on (13) olled y?
(24) M27 H H L21 H 2							-	Yes	No
(31) MPI Highland Place LLC 1999 Broadway Suite 1000 Denver, CO 80202 26-2380898	low-inc hsng	GA	na	c corp					No
(1) Near North Apartments Corp NF 1999 Broadway Suite 1000 Denver, CO 80202 36-4570431	management	IL	na	c corp					No
(2) New Sterling Park MM LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-2523309	management	IL	na	c corp					No
(3) New Tacoma Condominium Association 1999 Broadway Suite 1000 Denver, CO 80202 47-3225087	low-ınc hsng	WA	na	c corp					No
(4) Roseland Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-4304417	management	IL	na	c corp					No
(5) Savannah Rose of Sharon LLC 1999 Broadway Suite 1000 Denver, CO 80202 20-3591948	low-ınc hsng	GA	na	c corp					No
(6) South Loop Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-4027475	management	IL	na	c corp					No
(7) Stapleton II Mercy LLC 1999 Broadway Suite 1000 Denver, CO 80202 27-0954394	low-ınc hsng	СО	na	c corp					No
(8) Winthrop Apartments Corporation 1999 Broadway Suite 1000 Denver, CO 80202 36-3855355	management	IL	na	c corp					No