Department of the Treasury

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.

Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection

OMB No 1545-0047

A F	or th	e 2017 calendar year, or tax year beginning and	ending		
B	Check if applicab	C Name of organization		D Employer identifi	cation number
	Addre	Northwest Housing Association			
	Name			91-0	935278
]Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/su		
	Final	1530 Evergreen Park Dr SW		(360	
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	395,017.
	Amen return	Olympia, WA 98502-5903		H(a) Is this a group re	eturn
<u>_</u>	Application pendi	F Name and address of principal officer JOAII BLOWII		for subordinates	Yes X No
		same as C above		H(b) Are all subordinates in	· · · · · · · · · · · · · · · · · · ·
		empt status501(c)(3)X 501(c)(6) ◀ (insert no.) 4947(a)(1) (insert no.)	or (5		list (see instructions)
		te: www.nwhousingassociation.com	11	H(c) Group exemption	
	art I	organization: X Corporation	I IL YE	ar of formation: 19/5 M	M State of legal domicile: WA
	1	Briefly describe the organization's mission or most significant activities: Serv.	ing t	o improve nu	hlic
Activities & Governance	ļ '	awareness and opinion of manufactured hor		co improve pu	DIIC
ruai	2	Check this box If the organization discontinued its operations or dispose		ore than 25% of its net as	ssets.
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	10
Ö	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	10
es	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	2
iviti	6	Total number of volunteers (estimate if necessary)		6	
Act	ì	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
		Opening the Assessment of the Control of the Contro	}-	Prior Year	Current Year
ğ	8	Contributions and grants (Part VIII, line 1h)	}	0. 417,171.	0. 394,416.
Revenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)	}	417,171.	591.
R	}	Other revenue (Part VIII, column (A), lines 5, 4, and 7d)	-	273.	10.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	F	417,853.	395,017.
		Grants and similar-amounts-paid-(Part.IX, column.(A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part/IX-column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		155,915.	175,451.
Expenses	16a	Professional fundralsing, fees, (Rart, IX., column (Å), line 11e)		0.	0.
×Ď		Total fundralsing expenses (Part IX, column (D), Jine 25)	0.	 	
ш		Other expenses (Part.IX, column (A), lines 11a-11d, 11f-24e)	-	118,301.	208,854.
O	18	Total expenses. Add lines; 13:17- (must equal Part IX, column (A), line 25)	}-	274,216.	384,305.
	19	Revenue less expenses Subtract line 18 from line 12		143,637.	
ance	20	Total assets (Part X, line 16)	}-	Beginning of Current Year 653, 286.	End of Year 664,676.
Pass Base	20 21	Total liabilities (Part X, line 16)	-	3,378.	4,056.
Net Assets on Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	-	649,908.	660,620.
	ırt II	Signature Block			
Unde	er pena	Ities of perjupy, I declare that I have examined this return, including accompanying schedules	s and state	ements, and to the best of m	y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than office) is based on all information of wh	nch prepa	rer has any knowledge.	
€		a to the same of t		3-14-	18
Sigr		Signature of officer		Date	
Her	е	Joan Brown, Executive Director Type or print name and title			
				Date Check	PTIN
Paid		Print/Type preparer's name Maria A. Ichiyama, CPA Monca C JChuyama	, ros	03/06/18 self-employ	-
		Maria A. Ichiyama, CPA Muna a Junyama Firm's name Frost & Company, PLLC	a, a	Firm's EIN	ed P00705140 27-5137616
Preparer Firm's name Frost & Company, PLLC Firm's EIN 27-5137 Use Only Firm's address 676 Woodland Square Loop SE					21 313/010
	y	Lacey, WA 98503		Phone no. (3	60) 786-8080
Mav	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	01 11-2		ons.		Form 990 (2017)
					/ /

Part III Statement of Program Service Accomplishments		1990 (2017) Northwest Housin	ng Association		<u>91-093</u>	35278 Page	2
Serving to improve public awareness an opinion of manufactured homes. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 900 of 90 527 Yes, 1 discribe these new services on Schedule O If Yes, 2 discribe these new services on Schedule O If Yes, 3 discribe these new services on Schedule O If Yes, 3 discribe these new services on Schedule O If Yes, 4 discribe these changes on Schedule O If Yes, 4 discribe these changes on Schedule O If Yes, 6 discribe these changes on Schedule O Section 501(5)(3) and 501(5)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, 4 any for each program service sported. Section 501(5)(3) and 501(5)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, 4 any for each program service sported. Section 501(5)(3) and 501(5)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, 4 any for each program service on the state of the amount of grants and allocations to others, the total expenses, and revenue, 4 and yet of section 501(5)(3) and 501(5)(4) organization are required to a program services.) (Revenue 1) (Revenue 2) (Revenue 3)	Pa	rt III Statement of Program Service Accomp	olishments				_
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4e Total program service expenses ▶	-	_) (Revenue \$)	
	4e						_
						Form 990 (201	7)

			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 1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		_x_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	i '		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
þ				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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		X
d	· · · · · · · · · · · · · · · · · · ·			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_ <u>X</u> _
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			77
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	120		X
13		13		X
14a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	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	14h		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u> </u>
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	5		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ı	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
			990	

Form 990 (2017) Northwest Housing Association 91-0935278 Page 4

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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 19 If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ļ
	Schedule J	23		\mathbf{x}
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		i
ь	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			1
	Schedule L, Part I	25b		
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		х
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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	_	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
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		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	.		
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		Form	990	(2017)

rai	Check if Schedule O contains a response or note to any line in this Part V			$\overline{}$
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12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	ļ		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	\mathbf{x}	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	'		
Z.a	filed for the calendar year ending with or within the year covered by this return 2a 2			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
ь	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	ľ		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	- {	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		i	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		 _
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1	}	Į
	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	{	}	ļ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	_7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	8		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
-	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	30		
а	Initiation fees and capital contributions included on Part VIII, line 12		Ì	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.]	Ì	
а	Gross income from members or shareholders		J	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1]	
	amounts due or received from them)		1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the		ł	
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990 ((0047)
		FORM	33U /	ZU171

Form 990 (2017) Northwest Housing Association 91-0935278 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions,

	to mine ea, ea, or too earth, account the area metallices, proceeding, or arranged in account.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10			
	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 10			
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		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		<u> X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	-
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	\mathbf{X}	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		_X_
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	<u>12c</u>	4	<u> </u>
13	Did the organization have a written whistleblower policy?	13	_X_	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
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		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed WA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	ie	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website W Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinan	cial	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records'			
	Executive Director of NWHA - (360) 357-5650			
	1530 Evergreen Park DR SW, Olympia, WA 98502-5903			

Form 990 (2017)

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

	nor any related						nsat	sated any current officer, director, or trustee.				
(A)	(B)	(C) Position					(D)	(E)	(F)			
Name and Title	Average	(do	not c	POS :heck	more	than	one	Reportable	Reportable	Estimated		
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of		
	week	-	T		l	77443	100,	from	from related	other		
	(list any hours for	lect]_		the	organizations	compensation from the		
	related	60	真	1		Sales		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization		
	organizations	ruste	l trus		99	uadu.	ļ	(***2/1099****180)		and related		
	below	lan	100		oldu	s st	_			organizations		
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					
(1) Del Detray	0.50											
Vice-President		X	<u> </u>	X				0.	0.	0.		
(2) Troy Morrow	0.50											
Director	<u> </u>	X	Ĺ_	<u> </u>		<u> </u>		0.	0.	0.		
(3) Steve Leedom	0.50	Į				ĺ						
Director	ļ <u>.</u>	X	ļ	<u> </u>		<u> </u>		0.	0.	0.		
(4) Keith Padgett	0.50			ĺ		i						
President		X		X	<u> </u>	_	ļ	0.	0.	0.		
(5) David Pearson	0.50	}	ĺ		İ							
Director		X	<u> </u>			<u>_</u>		0.	0.	0.		
(6) Gary Stoskopf	0.50							_ '		_		
Director		X	ļ	<u> </u>		Ĺ.	L.,	0.	0,	0.		
(7) Bud Nolen	0.50				ļ			_ ,				
Secretary/Treasurer		X		X				0.	0.	0.		
(8) Mike Wolf	0.50					ĺ				_		
Director	 	X	<u> </u>	_		<u> </u>	_	0.	_0.	0.		
(9) Todd Haddican	0.50		ļ		ĺ	ĺ						
Director	 	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>		0.	0.	0.		
(10) Corey Peterson	0.50				[
Director	40.00	X				-	<u> </u>	0.	0.	0.		
(11) Joan Brown	40.00	1	1					100 240		0.761		
Director	 		├	X	<u> </u>	-	_	102,348.	0.	9,761.		
		1							1			
	 	├─		├-		├	<u> </u>					
		}]]						
	 	-	├-	\vdash			-					
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	† 	1			_							
		1										
			Ι							, , , , , , , , , , , , , , , , , , , ,		
732007 11-28-17										Form 990 (2017)		

Form **990** (2017)

732008 11-28-17

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

\$100,000 of compensation from the organization

12 732009 11-28-17

Form 990 (2017)

601.

395.

10.

017.

e Total. Add lines 11a-11d

Total revenue. See instructions.

394,416

Sect	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must o	complete column (A)	
	Check if Schedule O contains a respor				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	112,109.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		li .		
	persons described in section 4958(c)(3)(B)			L	
7	Other salaries and wages	45,852.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	6,378.			
9	Other employee benefits	11,112.			
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management			<u> </u>	
b	Legal		· · · · · · · · · · · · · · · · · · ·		
C	Accounting	1,250.	<u> </u>		
d	Lobbying		! 		
e	Professional fundraising services. See Part IV, line 17	·			
f	Investment management fees		·		
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	4,000.	· · · · · · · · · · · · · · · · · · ·		
12	Advertising and promotion	163,827.			
13	Office expenses	10,977.	<u> </u>		
14	Information technology				
15	Royalties				
16	Occupancy	25,576.			
17	Travel	133.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,404.			
20	Interest			<u> </u>	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			ļ	
23	Insurance	1,100.	 	ļ	
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)				
а	amount, list line 24e expenses on Schedule 0.) Business taxes	587.		 	
_		507.			
þ				<u> </u>	
q			· · · · · · · · · · · · · · · · · · ·		
	All other expenses				
25	Total functional expenses Add lines 1 through 24e	384,305.		 	
26	Joint costs. Complete this line only if the organization		 		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here (following SOP 98-2 (ASC 958-720)				

Form **990** (2017)

Par	<u>τχ</u>	Balance Sheet					
		Check if Schedule O contains a response or no	te to any line in this	s Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			411,936.	2	425,819
	3	Pledges and grants receivable, net		<u>_</u>	- · · · · · · · · · · · · · · · · · · ·	3	
İ	4	Accounts receivable, net		<u> </u>		4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens					
		Part II of Schedule L		_		5	
	6	Loans and other receivables from other disqual	ified persons (as d	efined under			
		section 4958(f)(1)), persons described in section	n 4958(c)(3)(B), and	d contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) volur	ntary			
Ş		employees' beneficiary organizations (see instr)	Complete Part II	of Sch L		6	
Assets	7	Notes and loans receivable, net		<u> </u>		7	
⋖	8	Inventories for sale or use		ļ. <u>.</u>	··· <u>·</u>	8	
	9	Prepaid expenses and deferred charges		<u>}</u>		9	2,869
	10a	Land, buildings, and equipment cost or other		İ			
		basis. Complete Part VI of Schedule D	10a 3	74,573.			
	b	Less: accumulated depreciation	10b 1	38,585.	241,350.	10c	235,988
	11	Investments - publicly traded securities		<u> </u>		11	
	12	Investments - other securities. See Part IV, line	11	1		12	··-
	13	Investments - program-related See Part IV, line		13	. <u> </u>		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15	-		
	16	Total assets. Add lines 1 through 15 (must equ	ıal line 34)		653,286.	16	664,676
	17	Accounts payable and accrued expenses		_	3,378.	17	4,056
	18	Grants payable				18	
	19	Deferred revenue		-		19	
	20	Tax-exempt bond liabilities		! 		20	
	21	Escrow or custodial account liability Complete		r		21	
es	22	Loans and other payables to current and forme		1			
		key employees, highest compensated employe	es, and disqualified	persons			
Liabilities		Complete Part II of Schedule L		}_		22	
,	23	Secured mortgages and notes payable to unrel	ated third parties	<u> </u>		23	
Ì	24	Unsecured notes and loans payable to unrelate	d third parties	Į_		24	
	25	Other liabilities (including federal income tax, pa	•				
		parties, and other liabilities not included on lines	s 17-24) Complete	Part X of		1	
		Schedule D		<u> </u> -		25	
	26	Total liabilities. Add lines 17 through 25			3,378.	26	4,056.
		Organizations that follow SFAS 117 (ASC 958		LX and	:	, [
Ses		complete lines 27 through 29, and lines 33 ar	nd 34.	ĺ	640.000		550 500
anc	27	Unrestricted net assets		-	649,908.	27	660,620.
ga	28	Temporarily restricted net assets		}-		28	
ם ו	29	Permanently restricted net assets		. — -		29	
2	1	Organizations that do not follow SFAS 117 (A	NSC 958), check h	ere ▶∟			
ŏ		and complete lines 30 through 34.					
Sets	30	Capital stock or trust principal, or current funds		-	,	30	
Asi	31	Paid-in or capital surplus, or land, building, or ed		. F		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or other fur	ids _	C40 000	32	660 600
_	33	Total net assets or fund balances		}-	649,908.	33	660,620.
	34	Total liabilities and net assets/fund balances			653,286.	34	664,676.

Form	1990 (2017) Northwest Housing Association	91-09	35278	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		017.
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,305.
3	Revenue less expenses. Subtract line 2 from line 1	3		712.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	_4	649	908.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
.	column (B))	10	660	<u>,620.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
	Assumbs with dissipation with Fermi 200. W Oash Charles College		r	Yes No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	-	2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	1 1	1
	separate basis, consolidated basis, or both.			
	Separate basis Separate basis Both consolidated and separate basis			x
D	Were the organization's financial statements audited by an independent accountant?		2b	^_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both	e basis,		
	Separate basis Consolidated basis Both consolidated and separate basis		1 1	
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	o ouds		
C	review, or compilation of its financial statements and selection of an independent accountant?	e augit,	00]
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	adula O	2c	
2-				ļ
Ja	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil Act and OMB Circular A-133?	igie Audit	За	x
L	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit	od	^ <u>^</u>
b	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	iieu auuii	3b	
	or advice, explain with in correctine of the describe any steps taken to undergo such addits			990 (2017
			1 0.111	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Inspection ► Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (see separate instructions), then				
•	Section 501(c)(4), (5), or (6) organiza	tions [.] Complete Part III			
Nan	ne of organization			Empl	loyer identification number
	Northwe	st Housing Assoc	iation		<u>91-0935278</u>
Pa	art I-A Complete if the org	ganization is exempt und	der section 501(c) or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	tures	cal campaign activities		
Pa	art I-B Complete if the org	ganization is exempt und	der section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization un-	der section 4955	▶ \$	<u> </u>
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	⊳ \$	
3	If the organization incurred a section	in 4955 tax, did it file Form 4720	for this year?		Yes No
48	Was a correction made?				Yes No
	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	janization is exempt und	der section 501(c), except section 501((c)(3).
	Enter the amount directly expended Enter the amount of the filing organ		•		·
2	exempt function activities	inzation's failes contributed to of	iner organizations for s	Section 321 ▶ ¢	
3	Total exempt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-PO	ľ	'
3	line 17b	s. Add into a drid 2. Enter horo t	and 0111 01111 11201 01		
4	Did the filing organization file Form	1120-POL for this year?		•	Yes No
	Enter the names, addresses and er	•	IN) of all section 527 p	political organizations to which	
Ū	made payments For each organiza			-	- -
	contributions received that were pr	•			•
	political action committee (PAC). If	additional space is needed, pro	vide information in Par	t IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
					ļ
		l		i	1

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2017

LHA

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Schedule C (Form 990 or 990-EZ) 2017 N	orthwest I	iousing Asso	ociation	91- ed Form 5768 (0935278 Page 2
section 501(h)).	Ediloii io oxo	inpranaci scon	on oo ito,to, and in	0,000	ciccion ander
	on belonge to an af	filiated group (and list i	n Part IV each affiliated	aroun member's na	me address FIN
expenses, and share	-		irraitiv each ainmateu	group member s na	ine, address, Eliv,
	, -	ind "limited control" pr	ourona anniu		
B Check ▶ if the filing organization	on checked box A a	ind limited control pr	ovisions apply	() Educa-	(L) Affiliated
	on Lobbying Expe tures" means amo	enditures unts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influe	nce a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add line	_	, , , , , , , , , , , , , , , , , , , ,	•		
d Other exempt purpose expenditures	•		1		
e Total exempt purpose expenditures		<i>ч</i>)	•		
f Lobbying nontaxable amount Enter	•	•	th columns	· -· -·	
					
If the amount on line 1e, column (a) or		bying nontaxable an			ţ
Not over \$500,000		the amount on line 16			
Over \$500,000 but not over \$1,000,		00 plus 15% of the ex			
Over \$1,000,000 but not over \$1,50		00 plus 10% of the ex			
Over \$1,500,000 but not over \$17,0		00 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000	\$1,000	,000			
					
g Grassroots nontaxable amount (ente	•				
h Subtract line 1g from line 1a If zero	or less, enter -0-		_		
Subtract line 1f from line 1c If zero c	or less, enter -0-				
j If there is an amount other than zero	on either line 1h oi	line 1i, did the organiz	zation file Form 4720		
reporting section 4911 tax for this ye	ear?				Yes No
(Some organizations that	nt made a section s	eraging Period Unde 501(h) election do not rate instructions for li	have to complete all o	of the five columns	below.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount				· · · · · · · · · · · · · · · · · · ·	
e Grassroots ceiling amount (150% of line 2d, column (e))	12.00			·	
4. Crassroats John und overs dit ins					

Schedule C (Form 990 or 990 EZ) 2017 Northwest Housing Association 91-0935278 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of the lobbying activity	(a)		(b)	
· · · · · · · · · · · · · · · · · · ·	es	No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of.				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?	}			
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities?	-+			
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		·		
b If "Yes," enter the amount of any tax incurred under section 4912			 	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				_
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	11/6)/	(5) or so	ction	
501(c)(6).	Jijoji	,o,, or se	Cuon	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No)1(c)((5), or se		X ne 3, is
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5)1(c)(5), or se		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes.")1(c)((5), or se R (b) Part		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members)1(c)((5), or se R (b) Part		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political)1(c)((5), or se R (b) Part		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).)1(c)((5), or se R (b) Par		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year)1(c)((5), or se R (b) Part		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues)1(c)((5), or se R (b) Part		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total)1(c)((5), or se R (b) Part 1 2a 2b 2c		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	01(c)(," OF	(5), or se R (b) Part 1 2a 2b 2c		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	01(c)(," OF	(5), or se R (b) Part 1 2a 2b 2c		

Schedule C (Form 990 or 990-EZ) 2017

SCHEDULE D

Department of the Treasury Internal Revenue Service

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

Employer identification number

	Northwest Housing		91-0935278		
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts. Complete if the		
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6			
_		(a) Donor advised funds	(b) Funds and other accounts		
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fur	nds		
•	are the organization's property, subject to the organization's	•	Yes No		
6	Did the organization inform all grantees, donors, and donor a	_			
·	for charitable purposes and not for the benefit of the donor of		•		
	impermissible private benefit?	or definer advisor, or for any early early early	Yes No		
Pa		ganization answered "Ves" on Form 990, Part IV			
1	Purpose(s) of conservation easements held by the organizat		, iii 7		
•	Preservation of land for public use (e.g., recreation or e	·	y important land area		
	Protection of natural habitat	Preservation of a certified h			
	Preservation of open space	Freservation of a certilled in	istoric structure		
_		find companieties contains the form of a			
2	Complete lines 2a through 2d if the organization held a quali	med conservation contribution in the form of a c			
	day of the tax year		Held at the End of the Tax Year		
a	Total number of conservation easements		2a		
p	Total acreage restricted by conservation easements	market and the desired of the desired	2b		
Ç.	Number of conservation easements on a certified historic str	` '	2c		
ď	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structure	1 - 1		
_	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	nization during the tax		
	year ▶				
4	Number of states where property subject to conservation ea				
5	Does the organization have a written policy regarding the pe		—] —]		
_	violations, and enforcement of the conservation easements i		└ Yes		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing conservat	ion easements during the year		
_		Harard A.			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation ea	asements during the year		
_	S				
8	Does each conservation easement reported on line 2(d) above	ve satisty the requirements of section 170(n)(4)(i			
_	and section 170(h)(4)(B)(ii)?		└─ Yes └─ No		
9	In Part XIII, describe how the organization reports conservati				
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the or	ganization's accounting for		
Dai	t III Organizations Maintaining Collections o	f Art Historical Transuras or Other	Similar Accets		
Га	Complete if the organization answered "Yes" on Form	•	Silliai Assets.		
		···	ad balanca abaat wada af ad		
та	If the organization elected, as permitted under SFAS 116 (AS				
	historical treasures, or other similar assets held for public ext		public service, provide, in Part XIII,		
	the text of the footnote to its financial statements that descri				
þ	If the organization elected, as permitted under SFAS 116 (AS				
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public se	ervice, provide the following amounts		
	relating to these items		. •		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$ ▶ \$		
_	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical tre		provide		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items			
а	Revenue included on Form 990, Part VIII, line 1		\$		
	Assets included in Form 990, Part X		\$		
LHA	For Panerwork Reduction Act Notice, see the Instruction	s tor Form 990.	Schedule D (Form 990) 2017		

		st Housing						<u> 1-09</u>			<u>age 2</u>
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)											
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items										
	(check all that apply)										
а	Public exhibition	d	· 🗀	Loan or exc	hange progra	ams					
b	Scholarly research	е	, 🗀	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how ti	hey further t	he organizati	on's exemp	ot purpo	se in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or othe	er sımılar a	ssets		_		_
	to be sold to raise funds rather than to be m								Yes	_[_	No
Pa	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	'Yes" on Fo	orm 990	, Part IV,	lıne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets not in	cluded				_
	on Form 990, Part X?								Yes	[No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table [,]							
									Amount	<u> </u>	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	unt liability	?		Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIII]
Pa	t V Endowment Funds. Complete	f the organization an	swered	"Yes" on Fo	orm 990, Part	IV, line 10	·				
		(a) Current year	(b) F	Prior year	(c) Two year	s back (d	Three ye	ears back	(e) Four	years	back
1a	Beginning of year balance										
þ	Contributions			 -							
С	Net investment earnings, gains, and losses										
d	Grants or scholarships			<u>.</u>							
е	Other expenditures for facilities					ĺ					
	and programs										
f	Administrative expenses										
g	End of year balance			·			- 				
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1	g, column (a	a)) held as [.]						
a	a Board designated or quasi-endowment ▶%										
b	b Permanent endowment ▶%										
С	Temporarily restricted endowment ▶	%									
	The percentages on lines 2a, 2b, and 2c should equal 100%.										
3a	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization										
	by Yes No										
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	•							3b		
4											
Pai	t VI _ Land, Buildings, and Equipm	nent.									
	Complete if the organization answere	d "Yes" on Form 990), Part I	√, line 11a S	See Form 990	, Part X, lin	e 10				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acci	umulated	d	(d) Book	k valu	е
		basis (investr	nent)		(other)	depre	ciation				
1a	Land				0,334.						<u>34.</u>
b	Buildings			20	9,129.	11	3,47	75.	9!	5,6	<u>54.</u>
С	Leasehold improvements										
d	Equipment			2	5,110.	2	25,11	.0.			0.
	Other			L							
Total	Add lines 1a through 1e (Column (d) must e	qual Form 990 Part	X colur	nn (R) line 1	Oc 1				つて	5 9	RR.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 Northwest Housing Ass	<u>ociation </u>	91-0935278 Pa	ge 4
Part XI Reconciliation of Revenue per Audited Financial S	Statements With Revenu	ie per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d	20		
		2e	
		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.4.1	}	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Part XII Reconciliation of Expenses per Audited Financial	·	ses per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV	/, line 12a.		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b	<u> </u>	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	0.181	5	
Part XIII Supplemental Information.	e 10.)		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a al lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provid		art V, line 4; Part X, line 2; Part XI,	
		 	
		· · · · · · · · · · · · · · · · · · ·	
			
			
	· · · · · · · · · · · · · · · · · · ·	Schedule D (Form 990)	

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Northwest Housing Association	Employer identification number 91-0935278
Form 990, Part VI, Section A, line 6:	
The organization has members.	
Form 990, Part VI, Section A, line 7a:	
The members elect board members and the board elects the	officers.
Form 990, Part VI, Section A, line 7b:	
Changing to governing documents require the approval of t	he members.
Form 990, Part VI, Section B, line 11b:	
The staff of the organization review the 990 prior to it	being filed.
Form 990, Part VI, Section B, Line 15a:	
Executive committee and board determine the compensation	of the Executive
Director.	
Form 990, Part VI, Section C, Line 19:	
Governing documents are available upon request.	