Form 990

DLN: 93493135031469 OMB No 1545-0047

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private ▶ Do not enter social security numbers on this form as it may be made public

nterna	l Rever	nue Service	► Information abo	out Form 990 and its instructions is at	<u>www IRS</u>	5 gov/torn	<u>1990</u>		Inspection			
\ F	or the	2017 ca		nning 07-01-2017 , and ending 0	06-30-20)18						
		pplicable	C Name of organization COLLEGIATE HOUSING FOUNDATION	NC			D Employer	ıdentıfı	ication number			
	dress c me cha	change ange					63-11734	25				
□ Ini	tıal reti	urn	Doing business as									
		/terminated return	Number and street (or P O box if r	mail is not delivered to street address) Roo	m/suite		E Telephone	number				
		n pending	PO BOX 1385	, , , , , , , , , , , , , , , , , , , ,	,		(251) 928	-9340				
			City or town, state or province, cou FAIRHOPE, AL 365331385	untry, and ZIP or foreign postal code								
			·				G Gross rece	pts \$ 17	76,004,503			
			F Name and address of princip WILLIAM B GIVHAN	pal officer	H(a group retu	rn for				
			POST OFFICE BOX 1385		Н,		dinates? subordinates	;	□Yes ☑No			
Tax	x-exem	npt status	FAIRHOPE, AL 365331385			includ	ed?		☐ Yes ☐No			
			✓ 501(c)(3)	(insert no) 4947(a)(1) or 52			," attach a list exemption n		•			
VV	ebsite	e: > vv vv	W COLLEGIATEROUSING ORG			1-7 C10up	CXCIIIPLION	umber				
C Forn	n of or	ganızatıon	✓ Corporation ☐ Trust ☐ Ass	sociation Other ►	LY	ear of forma	ation 1996 N	1 State	of legal domicile AL			
Pa	rt I	Sumi	mary scribe the organization's mission (or most significant activities								
	((A)THE OI	RGANIZATIÓN IS ORGANIZED EX	XCLUSIVELY FOR CHARITABLE, RELIG								
				J S INTERNAL REVENUE CODE OF 19								
				OVIDE HOUSING FOR ITS ENROLLED : IAL MISSIONS (B)THE ORGANIZATION								
••	M	1AY BE NE	ECESSARY OR APPROPRIATE IN (CARRYING OUT THE FOREGOING PURI	POSES O	F THE ORG	GANIZATION A	NI DNA	CONNECTION			
2				WERS GRANTED TO NONPROFIT CORE								
Ē				DRGANIZATION'S STATUS AS AN ORG F THE CODE AND (II) TO WHICH CON								
an venilaine		OF THE CO		(,								
ACUMUES &	-											
<u> </u>				iscontinued its operations or disposed					ı			
			-	ing body (Part VI, line 1a)				4	7 5			
Ť			mber of independent voting members of the governing body (Part VI, line 1b)									
			. ,	, , , , , , , , , , , , , , , , , , , ,			•	5	4			
			·	ecessary)			•	6 7a	-6,164			
	l			om Form 990-T, line 34			•	7a 7b	-6,164			
		ivet um en	ated business taxable income no	, , , , , , , , , , , , , , , , , , ,	· · ·	Pri	· or Year	/	Current Year			
	8	Contribut	ions and grants (Part VIII, line 1		573,89	9	2,349,972					
Rəvenue			service revenue (Part VIII, line 2	146,848,96	+							
ōΛċ		-	,	g)	ŀ		801,46	-				
<u>ac</u>	11	Other rev	enue (Part VIII, column (A), line	s 5, 6d, 8c, 9c, 10c, and 11e)	Ī		-72,27	0	964,498			
	12	Total reve	enue—add lines 8 through 11 (m	ust equal Part VIII, column (A), line 1	12)		148,152,06	1	175,866,552			
	13	Grants an	nd sımılar amounts paıd (Part IX,	column (A), lines 1–3)				0	0			
	14	Benefits p	paid to or for members (Part IX,	column (A), line 4)	Ī			0	0			
33	15	Salaries,	other compensation, employee b	enefits (Part IX, column (A), lines 5–1	10)		1,277,79	8	1,264,820			
SC.	16a	Professio	nal fundraising fees (Part IX, coli	umn (A), line 11e)				0	0			
Expenses	Ь.	Total fundr	aising expenses (Part IX, column (D),	line 25) ▶0	. [
ш	l			s 11a-11d, 11f-24e)	ļ		158,386,33	2	179,173,238			
	l		enses Add lines 13-17 (must eq				159,664,13		180,438,058			
(5	19	Revenue	less expenses Subtract line 18 f	rom line 12			-11,512,06		-4,571,506			
Net Assets of Fund Balances						Beginning	of Current Yea	r	End of Year			
agar	20 .	Total asse	ets (Part X, line 16)		ŀ		1,193,380,46	9	1,638,169,192			
S B	l		ilities (Part X, line 26)		. }		1,334,140,54	+	1,780,072,182			
ξĘ			s or fund balances Subtract line		ŀ		-140,760,07	+	-141,902,990			
Par	t II		ature Block									
Inder	pena	lties of pe	erjury, I declare that I have exar	mined this return, including accompan								
	edge nowle		i, it is true, correct, and completi	e Declaration of preparer (other than	orricer)	ıs Dased o 	ali informati 	on of v	villen preparer has			
		l x			_			_	,			
•:		Signatu	re of officer			201 Dat	9-05-13 e					
Sign Here		, -										
	-		M B GIVHAN PRESIDENT r print name and title									
			rınt/Type preparer's name	Preparer's signature	Date	1	. 🗖 . PT:					
Paid	d		RIÁN M BLAKENEY	BRÍAN M BLÁKENEY	2019-		ck 📙 ıf P0ı -employed	0444917	7			
	- pare	er 🖪	ırm's name WILKINS MILLER LLC				n's EIN ▶ 27-03	55040				
	Onl	1 =	ırm's address ▶ PO BOX 70047			Pho	ne no (251) 41	0-6700				
			MOBILE, AL 36670									
1av +	ha IRG	S discuss	this return with the preparer sho	own above? (see instructions)				IJ.	es 🗆 No			

Form	990 (2	017)						Page 2
Par	t III	Statement of	of Program Servi	ce Accomplis	hments			
		Check If Sched	lule O contains a resp	onse or note to a	any line in this Part III			🗹
1	Briefly	describe the or	ganızatıon's mıssıon					
SECT MEM EDUC CARF GRAI STAT	TION 50 BERS TO CATIONA RYING C NTED TO TUS AS A	1(C)(3) OF THE O PROVIDE HOU AL MISSIONS (E OUT THE FOREGO O NONPROFIT CO AN ORGANIZATI	US INTERNAL REVE ISING FOR ITS ENROL B)THE ORGANIZATION DING PURPOSES OF T ORPORATIONS BY TH	NUE CODE OF 19 LED STUDENTS, I IS EMPOWERED HE ORGANIZATI E ALABAMA NON I FEDERAL INCO	986 (THE CODE) INCLU , AND(2)OTHERWISE A D TO DO AND PERFORN ION AND IN CONNECTI IPROFIT CORPORATION ME TAX UNDER SECTION	ID EDUCATIONAL PURPOS IDING FOR SUCH PURPOSE SSISTING EACH OF ITS M 1 SUCH ACTS AS MAY BE N ON THEREWITH TO EXERC I ACT WHICH ARE CONSIS ON 501(A) AND 501(C)(3)	ES (1)ASSISTI EMBERS TO FU NECESSARY OF ISE ANY OF TI TENT WITH TH	ING EACH OF ITS JRTHER THEIR R APPROPRIATE IN HE POWERS HE ORGANIZATION'S
2	Dıd th	e organization u	ındertake any signific	ant program serv	vices during the year w	hich were not listed on		
	the pr	or Form 990 or	990-EZ?					🗌 Yes 🗹 No
	If "Yes	s," describe thes	se new services on Sc	hedule O				
3	Did th	e organization c	ease conducting, or n	nake significant o	changes in how it cond	ucts, any program		
	servic	es?						🗌 Yes 🗹 No
	If "Yes	s," describe thes	se changes on Schedu	le O				
4	Sectio	in $501(c)(3)$ and		ons are required	to report the amount	largest program services, of grants and allocations to		
4a	(Code) (Expenses \$	53,928,101	including grants of \$) (Revenue	s 55	,558,603)
	See Ad	Iditional Data						
4b	(Code) (Expenses \$	11,545,060	including grants of \$) (Revenue	\$ 10	,201,524)
	See Ad	ldıtıonal Data						
4c	(Code) (Expenses \$	17,864,701	including grants of \$) (Revenue	\$ 12	,787,834)
	See Ad	Iditional Data						
		ddıtıonal Data T						
4d			es (Describe in Sched	•				
	(Expe	nses \$	95,347,905 inc	luding grants of	\$) (Revenue \$	83,097,77	0)
4e	Total	program servi	ice expenses ▶	178.685.7	67			

Page 3

No

Nο

Nο

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Nο

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Nο

Nο

No

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

Form **990** (2017)

Form 990 (2017) **Checklist of Required Schedules**

or X as applicable

Section 501(c)(3) organizations.

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

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Yes

Yes

Yes

Yes

Yes

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	21		No

Page 4

Νo

No

Nο

No

Nο

Nο

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28b

28c

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35a

35h

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Yes

Yes

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Yes

Yes

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
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
Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🥞

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

orm	990 (2017)			Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	Enterthe growth and are Barrier 1996 Fator Out that anything the		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 141 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	-		
		-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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	<u>.</u> .		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		140
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			110
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
		7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form	79		
•	1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
	additional information the organization must report on Schedule O	13a		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	
Sa	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
361	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 la	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	5		
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? .	on 3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
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?	7 b		No
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		No
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
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revent	ue Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	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	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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)			
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		No
	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?			
Sec	ction C. Disclosure	130		_
	List the States with which a copy of this Form 990 is required to be filed▶			
L8	OR , CA , IL , PA , FL 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			
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►WILLIAM B GIVHAN 409 JOHNSON AVE FAIRHOPE, AL 36532 (251) 928-9340			

(F)

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

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

(C)

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related	•	ne bo	ox, i n of tor/t	t ch unle ficei rust	ss pers and a ee)	son	Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations	
(1) LEEMAN H COVEY PRESIDENT	30 00	Х		×				225,000	0	8,032	
(2) JOHN BROOKS SLAUGHTER TREASURER	1 50	X		×				20,000	0	0	
(3) HON JACK EDWARDS SECRETARY	1 50	Х		x				20,000	0	0	
(4) JOHN B HICKS VICE PRESIDENT	1 50	Х		х				20,000	0	0	
(5) THOMAS M DALY DIRECTOR	1 50	Х						20,000	0	0	
(6) WILLIAM B GIVHAN COO/SUCCESSOR PRESIDENT	40 00	Х		x				575,152	0	33,304	
(7) ROBERT A SHEARER DIRECTOR	1 50	х						20,000	0	0	
(8) JANET BROWN VP FOR ADMIN/ASST SECRETAR	40 00			x				155,750	0	6,239	
(9) LYN R CONE VP FOR COMPLIANCE	40 00			х				113,842	0	12,058	
				•		•				Form 990 (2017)	

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

(A) (B) (C) (D) (F) (F)

Page **8**

	(A) Name and Title	(B) Average hours per week (list any hours	than o	one bo	ox, u an off	t che unles fficer	eck moss ss pers r and a tee)	son	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (V			ated f other sation the
		for related organizations below dotted line)	zations of disk to the control of th								organizati relate organiza	ed	
			<u> </u>	_	<u> </u> -	\vdash	_	\vdash			-		
		+			\vdash	\vdash	-	+					
			 	\vdash	 	\vdash	├	\vdash			+		
		-		\vdash	 		+-	+					
<u> </u>						$oxedsymbol{oxed}$					\perp		
	Sub-Total			•. •			▶	_					
		<u> </u>					•		1,169,744	()		59,633
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who) rec	eived more than \$1	00,000			
3	Did the organization list any former	officer director	or truct	·aa k		mnl	27.60	ar hi	short compansated	amplayee on		Yes	No
	line 1a? If "Yes," complete Schedule	J for such individ	dual .	٠	•	•		•			3		No
4	For any individual listed on line 1a, is organization and related organization individual									n the	4	Yes	
5	Did any person listed on line 1a receiver services rendered to the organization					,			-	ividual for		res	
	ection B. Independent Contract	, ,	- ELE J	600.0			icii pc.	130		· · · [5		No
1	Complete this table for your five high from the organization Report compe	hest compensate									pen	sation	
	· · · ·	(A) and business addre		<u>ycu.</u>		HIY	WILL C	// ¥¥1-		(B) Description of services) Isation
DAVIS	B BROTHERS CONSTRUCTION	did business and	233						CONSTRUCT				,062,757
	LOUETTA RD IG, TX 77388												
	DEVELOPMENT OUTH SHADY GROVE RD SUITE 600					_			CONSTRUCT	TION		20,	,769,550
MEMP	HIS, TN 38120 SC DEVELOPMENT LLC								CONSTRUCT	FION		11,	,891,736
	O HILL COUNTRY BOULEVARD SUITE IN, TX 78738												
	HMARK CONTRACTORS								CONSTRUCT	TION		5,	,082,524
SANTA	OCEAN PARK BLVD A MONICA, CA 90405												
	DUR BEATTY CONSTRUCTION LLC								CONSTRUCT	TION		4,	,344,008
	MAIN STREET STE 1100 WORTH, TX 76102												

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 ▶ 38

Part	VII										
		Check if Schedul	e O contains :	a respo	onse or note to any	(,	nis Part VIII A) revenue	Rel ex fu	(B) ated or kempt nction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaign	ns	1a				re	venue		512-514
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues		1b	<u> </u>						
3ra nou		Fundraising events		1c	<u> </u>						
IS, (d Related organizatio		1d	<u> </u>						
Gif ilar		Government grants (co		1e	<u> </u>						
Contributions, Gifts, Grants and Other Similar Amounts	f	F All other contributions,	gıfts, grants,								
atio er (and similar amounts na above	ot included	1f	2,349,972						
년 된 동	g	Noncash contribution	ons included								
ont		in lines 1a-1f \$ 1 Total. Add lines 1a-1	e e		_						
	'''	Total.Add lilles Ta-I		• •	Business		,349,972				
Service Revenue	2a	RENTAL INCOME			Business	611310	156,1	20,627	156,120	1,627	
₹.		MISCELLANEOUS INCOM	1E			611310	·	71,522	3,171	·	
Ce l	С	CONVENIENCE INCOME				611310	1,9	42,465			1,942,465
κerν	d	FEES/FORFEITED DEPOS	SITS			611310	1,3	82,920	1,382	,920	
Ē	е			_							
Program	f	All other program se	rvice revenue		163.6	17,534					
ΔŤ	g.	Total. Add lines 2a-2f			162,6	17,534					
		Investment income (ii iimilar amounts) .			interest, and other		1,133,54	L			1,133,541
		Income from investme			ond proceeds		875,13	L			875,131
	5 F	Royalties									
		_	(ı) Rea	l	(II) Personal						
	6a	Gross rents	1	.31,787							
	b	Less rental expenses	1	.37,951							
	c	Rental income or		-6,164		-					
		(loss)]					
	d	Net rental income o			• • • •		-6,164	1		-6,1	54
	7a	Gross amount from sales of assets other than inventory	(ı) Securit	iles	(ii) Other 7,925,876	_					
	_	Less cost or other basis and sales expenses			0						
		Gain or (loss) Net gain or (loss)			7,925,876	4	7,925,876	5			7,925,876
		Gross income from fi			•	1	.,,,,,,,,,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Other Revenue		(not including \$ contributions reporte See Part IV, line 18	d on line 1c)	of							
ĸ.		Less direct expense. Net income or (loss)		b una ev	ents]					
the		Gross income from g		-	ents >	1					
Ö		See Part IV, line 19			ļ						
	h	Less direct expense	_	a b		-					
		: Net income or (loss)				J					
		Gross sales of invent	ory, less								
		returns and allowand	es	a	}						
	b	Less cost of goods s	old	b		-					
		: Net income or (loss)		invent	tory ►	J					
		Miscellaneous	Revenue		Business Code						
	11	aCANCELLATION OF	DEBT		611310		970,662	2	970,662		
								1			
	b	•									
		_									
	C										
								1			
		All other revenue . Total. Add lines 11a						1			<u> </u>
					•		970,662	2			
	12	Total revenue. See	THEM UCHORS	<u> </u>			175,866,552	2	161,645,731	-6,1	54 11,877,013 Form 990 (2017)

Part IX	Statement of Functional Expenses
---------	----------------------------------

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	anizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,219,266		1,219,266	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	45,554		45,554	
11 Fees for services (non-employees)				
a Management	18,082,324	18,082,324	25.222	
b Legal	404,784	308,704	96,080	
c Accounting	764,241	645,727	118,514	
d Lobbying				
e Professional fundraising services See Part IV, line 17	101 001	404.004		
f Investment management fees	191,821	191,821	0.4 575	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	764,803	743,227	21,576	
12 Advertising and promotion	619,822	617,772	2,050	
13 Office expenses	1,744,640	1,731,003	13,637	
14 Information technology	45,054	39,243	5,811	
15 Royalties	20.760.545	20.720.204	40.244	
16 Occupancy	38,768,515	38,728,304	40,211	
17 Travel	316,908	256,939	59,969	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings	22,647		22,647	
20 Interest	59,062,227	59,062,227		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	47,064,192	47,056,066	8,126	
23 Insurance	2,501,764	2,410,488	91,276	
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 ADMINISTRATIVE	5,629,275	5,621,701	7,574	
b LOSS ON EXTINGUISHMENT	2,342,018	2,342,018		
c BAD DEBT	660,662	660,662		
d PREOPENING COSTS	187,541	187,541		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	180,438,058	178,685,767	1,752,291	0
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)				

2

3

Assets

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14

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16

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32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

13,728,436

441.774.152

2,514,488

6.389.133

75,067,486

15,417,036

58.782.607

7.820.015

1,780,072,182

-141.902.990

-141,902,990

1.638.169.192

Form **990** (2017)

1,622,985,038

(B)

End of year

Page **11**

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

CI-	 	Ξ

Cash-non-interest-bearing . Savings and temporary cash investments

Pledges and grants receivable, net . . . Accounts receivable, net .

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net . . Inventories for sale or use .

Prepaid expenses and deferred charges .

basis Complete Part VI of Schedule D

10a 10b Investments—publicly traded securities .

Investments—program-related See Part IV, line 11 .

Other assets See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L . .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

Total liabilities and net assets/fund balances .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Intangible assets

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Accounts payable and accrued expenses

10a Land, buildings, and equipment cost or other b Less accumulated depreciation 11 12 Investments—other securities See Part IV, line 11 . . .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

1,219,423,419 243,804,387

4.840.908 892.413.476

(A)

Beginning of year

13,897,066

1,952,050

176.566.314

1

2

3

4

5

6

7

4.655.433

99.055.222

62,022,126

7,135,586

56.965.100

11.568.183

1,334,140,547

-140.760.078

-140,760,078

1.193.380.469

1,196,449,552

1,193,380,469

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34

12 13

975.619.032 65.557.894 132.586.057 1,638,169,192 ☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4

Other changes in net assets or fund balances (explain in Schedule O)

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Form 990 (2017)

Reconcilliation of Net Assets

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Financial Statements and Reporting

Part XI

5

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

-4,571,506 -140.760.078 5

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Page **12**

4.368

3,424,226

~

No

Nο

-141,902,990

Yes

Yes

Yes

Yes

Yes Form 990 (2017)

2a

2b

2c

3a

3b

Additional Data

Software Version:

Software ID:

EIN: 63-1173425 Name: COLLEGIATE HOUSING FOUNDATION

Form 990 (2017)

Form 990, Part III, Line 4a:

PROVIDE 5.163 BED STUDENT HOUSING FACILITY IN IRVINE.CA FOR UNIVERSITY OF CALIFORNIA IRVINE

Form 990, Part III, Line 4b:

PROVIDE 1.274 BED STUDENT HOUSING FACILITY IN COLLEGE STATION, TX FOR TEXAS A&M UNIVERSITY

Form 990, Part III, Line 4c: PROVIDE 1,248 BED STUDENT HOUSING FACILITY IN DEKALB, IL FOR NORTHERN ILLINOIS UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 4,887,072 including grants of \$) (Revenue \$ 4,754,078)

SKONIDE 219 RED 2	TODENT HOUSING FACILITY IN	ELON, NC FOR ELON UNI	IVERSITY	
(Code) (Expenses \$	2.032.530 includina	grants of \$) (Revenue \$	1.925.554)

PROVIDE 332 BED STUDENT HOUSING FACILITY IN LARAMIE, WY FOR UNIVERSITY OF WYOMING

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 4.625.847 including grants of \$) (Revenue \$ 3.837.780)

(Code) (Expenses \$ 1,894,304 including grants of \$) (Revenue \$ 1,869,129)
PROVIDE 161 BED STUDENT HOUSING FACILITY IN HYDE PARK, NY FOR CULINARY INSTITUTE OF AMERICA

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 7,000,304 including grants of \$) (Revenue \$ 6,163,711)

PROVIDE 702 BED STUDENT HOUSING FACILITY IN ASHLAND, OR FOR SOUTHERN OREGON UNIVERSITY

(Code) (Expenses \$ 7,756,160 including grants of \$) (Revenue \$ 9,204,586)

(Code) (Expenses \$ 7,756,160 including grants of \$) (Revenue \$ PROVIDE 880 BED STUDENT HOUSING FACILITY IN NEWARK, DE FOR UNIVERSITY OF DELAWARE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 1,104,336 including grants of \$) (Revenue \$ 1,126,680)

(Codo	\ /Eypanasa f	1 126 010		\	4 002 005 \
PROVIDE 177	BED STODENT HOUSING PACILITY	IN ALDANT, INT F	OR THE ALBANT COLLEG	E OF PHARMACT	

(Code) (Expenses \$ 1,136,848 including grants of \$) (Revenue \$ 1,093,885 |
PROVIDE 180 BED STUDENT HOUSING FACILITY IN ST. DAVIDS, PA FOR EASTERN UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

711.032

(Expenses \$

(Code

PROVIDE 124 BED STUDENT HOUSING FACILITY IN ALBANY, NEW YORK FOR THE ALBANY COLLEGE OF PHARMACY

including grants of \$

) (Revenue \$

822.376)

(Code) (Expenses \$ 5,290,613 including grants of \$) (Revenue \$ 3,971,624)
PROVIDE 896 BED STUDENT HOUSING FACILITY IN NORMAL, ILLINOIS FOR ILLINOIS STATE UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code) (Expenses \$ 3.547.220 including grants of \$) (Revenue \$ 3.150.001)

PROVIDE 514 BED STUDENT HOUSING FACILITY IN STEPHENVILLE, TX FOR TARLETON STATE UNIVERSITY - PHASE I

(Code) (Expenses \$ 4,793,880 including grants of \$) (Revenue \$ 4,294,782)

(Code) (Expenses \$ 4,793,880 including grants of \$) (Revenue \$ PROVIDE 612 BED STUDENT HOUSING FACILITY IN GALVESTON, TX FOR TEXAS A&M UNIVERSITY AT GALVESTON

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code including grants of \$ (Expenses \$ 4.951.558) (Revenue \$ 4.252.875)

PROVIDE 492 BED STUDENT HOUSING FACILITY IN TOLEDO, OH FOR THE UNIVERSITY OF TOLEDO

(Code (Expenses \$ 5.168.764 including grants of \$) (Revenue \$ 3,780,991)

PROVIDE 482 BED STUDENT HOUSING FACILITY IN CORPUS CHRISTI, TX FOR TEXAS A&M UNIVERSITY - CORPUS CHRISTI - PHASE I

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code including grants of \$ (Expenses \$ 4.558.225) (Revenue \$ 3.827.419)

PROVIDE 582 BED STUDENT HOUSING FACILITY IN STEPHENVILLE, TX FOR TARLETON STATE UNIVERSITY - PHASE II 3,769,042)

(Code (Expenses \$ 4.939.784 including grants of \$ (Revenue \$

PROVIDE 440 BED STUDENT HOUSING FACILITY IN CHICAGO, IL FOR NORTHEASTERN ILLINOIS UNIVERSITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4.257.603

(Expenses \$

(Code

PROVIDE 560 BED STUDENT HOUSING FACILITY IN CORPUS CHRISTI, TEXAS FOR TEXAS A&M UNIVERSITY - CORPUS CHRISTI - PHASE II

including grants of \$

) (Revenue \$

2.896.692

(Code (Expenses \$ 8,651,134 including grants of \$) (Revenue \$ 7,272,756)

PROVIDE 1,060 BED STUDENT HOUSING FACILITY IN STEPHENVILLE, TX FOR TARLETON STATE UNIVERSITY - PHASE III

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

3.084.324

PROVIDE 421 BED STUDENT HOUSING FACILITY IN CULLOWHEE, NC FOR WESTERN CAROLINA UNIVERSITY

(Code (Expenses \$ PROVIDE 382 BED STUDENT HOUSING FACILITY IN SAN ANTONIO, TX FOR TEXAS A&M UNIVERSITY - SAN ANTONIO

(Expenses \$

(Code

2,582,871 including grants of \$

including grants of \$

) (Revenue \$ 1,689,126)

) (Revenue \$

2.632.880

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) (Code) (Expenses \$ 2,766,017 including grants of \$) (Revenue \$ 2,481,645) PROVIDE 496 BED STUDENT HOUSING FACILITY IN COMMERCE, TX FOR TEXAS A&M UNIVERSITY - COMMERCE

(Code) (Expenses \$ 9,599,700 including grants of \$) (Revenue \$ 7,821,254)

PROVIDE 1,790 BED STUDENT HOUSING FACILITY IN CORPUS CHRISTI, TEXAS FOR TEXAS A&M UNIVERSITY - CORPUS CHRISTI - ISLAND CAMPUS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 7,779 including grants of \$) (Revenue \$)

(Code) (Expenses \$ including grants of \$) (Revenue \$ 458,904 OTHER PROGRAM SERVICE REVENUE

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493135031469
SCHEDULE A (Form 990 or 990EZ) 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.						2017			
•		the Treasury	▶ Inf	ormation abou	► Attach to Form It Schedule A (Form			ictions is at	Open to Public Inspection
Nam	e of th	nue Service he organiza HOUSING FOU			www.ms.g	<u> </u>		Employer identific	<u> </u>
								63-1173425	
	rt I				us (All organization : it is (For lines 1 thro			see instructions.	-
1			•		sociation of churches	3 ,	,	(Δ)(i).	
2		•		·	1)(A)(ii). (Attach Sch				
3						•	• •		
_		·	•	•	vice organization desc			•	
4	Ш		esearch orga and state _	nization operate	ed in conjunction with	a nospital descri	bed in section :	1/U(b)(1)(A)(III). E	nter the hospital's
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6		A federal, s	tate, or local	government or	governmental unit de	escribed in sectio	on 170(b)(1)(A	()(v).	
7				mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	rıbed ın sectior	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10	✓	from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ition organiz	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	i09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box
а		Type I. A sorganization	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i				
С		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n	on-function integrated	nally integrated The organization	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	in connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	ved a written determir	nation from the II		pe I, Type II, Type II	functionally
f	Enter			ion-functionally dorganizations	integrated supporting	organization			
g				_	ipported organization(s)		_	
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
				<u> </u>					
Tota	I					1			I

(Complete only if you checked the box on line $5, 7, 8,$ or 9 of Part I or if the organization failed to qualify under Part							
III. If the organization fails to qualify under the tests listed below, please complete Part III.)							
Section A. Public Support							
Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
Gifts, grants, contributions, and							

1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
	line 4						
_ \$	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d)2016	(e) 2017	(f)Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	- ·						
11	Total support. Add lines 7 through						

	line 4						
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f)Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, e	tc (see instructio	ns)			12	
13	First five years. If the Form 990 is for	the organization	's fırst, second, th	ırd, fourth, or fıfth	n tax year as a sec	tion 501(c)(3) or	ganızatıon,
	check this box and stop here					🕨	
S	ection C. Computation of Public			_	•	•	
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))					14	

ightharpoonupand stop here. The organization qualifies as a publicly supported organization

15 Public support percentage for 2016 Schedule A, Part II, line 14 16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box b 33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14

is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ organization b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge

Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified

Amounts included on lines 2 and 3 received from other than disqualified persons that exceed

persons

15

16

17

20

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

the organization fails	to qualify under	the tests listed	below, please c	omplete Part II.	.)				
Section A. Public Support									
Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) ⊺otal			
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		105,783	2,741,691	573,899	2,349,972	5,771,345			
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	104,896,890	109,540,504	131,236,776	146,843,065	162,158,630	654,675,865			
3 Gross receipts from activities that									

109,646,287

133,978,467

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If

	the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						660,44
Se	ction B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) ⊤ota
9	Amounts from line 6	104,896,890	109,646,287	133,978,467	147,416,964	164,508,602	660,44
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,798,452	1,415,704	1,131,544	800,228	2,002,705	7,14
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	42,168	47,634	44,182	-72,270	-6,164	5
С	Add lines 10a and 10b	1,840,620	1,463,338	1,175,726	727,958	1,996,541	7,20
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)	106,737,510	111,109,625	135,154,193	148,144,922	166,505,143	667,65
14	First five years. If the Form 990 is f	or the organizatio	n's fırst, second, tl	hird, fourth, or fift	h tax year as a se	ction 501(c)(3) or	ganızatıon <u>,</u>
	check this box and stop here						►□

104,896,890

147,416,964	164,508,602	660,447,210
		0
		0
		0
		660,447,210
d) 2016	(e) 2017	(f) Total
d) 2016 147,416,964	(e) 2017 164,508,602	(f) Total 660,447,210
147,416,964	164,508,602	660,447,210
800,228	164,508,602 2,002,705	7,148,633
147,416,964 800,228 -72,270	164,508,602 2,002,705 -6,164	7,148,633 55,550

15

16

667,651,393

98 920 %

98 640 %

1 080 %

1 360 %

▶ 🗸

Section C. Computation of Public Support Percentage

f) divided by line 13, column (f))	17	1 (
III, line 17	18	1 3
heck the box on line 14, and line 15 is more than 33	1/3%,	and line 17 is not

19a 331/3% support tests-2017. If the organization did not chi more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))

b 33 1/3% support tests - 2016. 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 ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

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	İ	
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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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		

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	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		

				3.
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		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
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		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	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		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you	t (c) helow		
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
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 by or in connection with its supported organizations	4b		
С	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	4c		
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		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

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 I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

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9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

	ret IV Supporting Organizations (continued)		-	age :
110	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		res	INO
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
u	governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	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		
	ection B. Type I Supporting Organizations			
_	detion 5. Type 2 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		
_	Carling O. Tons II Commenting Operations			
	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		103	110
_	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		
S	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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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		
- 5	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	a The organization satisfied the Activities Test Complete line 2 below	•		
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c	ınetru	ctions)	
	The organization supported a governmental entity. Describe in Fait VI now you supported a government entity (see	mstru	ctions	
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		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	20		
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 	3a		
	 b Did the organizations 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 	3h		

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O)raani:	zatione	Pag
1	Check here if the organization satisfied the Integral Part Test as a qualifying true	_		Part VI) Soc
_	instructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) $\frac{1}{2}$	1		
a	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)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in	ntegrate	d Type III supporting or	ganization (see

Qualified set-aside amounts (prior IRS approval require			
Other distributions (describe in Part VI) See instructio	ns		
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions			
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions) (ii) (iii) (iv) (i			(iii) Distributable Amount for 2017
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whole details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Fycess Distributions Underdistributions

details in Part VI) See instructions	Terraine organization is respons	sive (provide	
9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
b From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7

Additional Data

Software ID: Software Version:

EIN: 63-1173425

Name: COLLEGIATE HOUSING FOUNDATION

Page 8

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI

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 Circumstances Test

As Filed Data efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

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.

DLN: 93493135031469 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

ame of the organization OLLEGIATE HOUSING FOUNDATION	Employer identification number
DEEGGATE HOUSING FOUNDATION	63-1173425
Organizations Maintaining Donor Advised Funds or Othe Complete if the organization answered "Yes" on Form 990, Pai	
(a) Donor ac	
Total number at end of year	
Aggregate value of contributions to (during year)	
Aggregate value of grants from (during year)	
Aggregate value at end of year	
Did the organization inform all donors and donor advisors in writing that the a organization's property, subject to the organization's exclusive legal control?	ssets held in donor advised funds are the
Did the organization inform all grantees, donors, and donor advisors in writing charitable purposes and not for the benefit of the donor or donor advisor, or for private benefit?	g that grant funds can be used only for or any other purpose conferring impermissible Yes No
art III Conservation Easements. Complete if the organization answ	wered "Yes" on Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the organization (check all that	apply)
\square Preservation of land for public use (e g , recreation or education)	Preservation of an historically important land area
Protection of natural habitat	Preservation of a certified historic structure
Preservation of open space	
Complete lines 2a through 2d if the organization held a qualified conservation easement on the last day of the tax year	contribution in the form of a conservation Held at the End of the Year
Total number of conservation easements	2a
Total acreage restricted by conservation easements	2b
Number of conservation easements on a certified historic structure included in	(a) 2 c
Number of conservation easements included in (c) acquired after 8/17/06, and structure listed in the National Register	d not on a historic 2d
Number of conservation easements modified, transferred, released, extinguish tax year ▶	ned, or terminated by the organization during the
Number of states where property subject to conservation easement is located	<u> </u>
Does the organization have a written policy regarding the periodic monitoring, and enforcement of the conservation easements it holds?	, inspection, handling of violations,
Staff and volunteer hours devoted to monitoring, inspecting, handling of violated by	tions, and enforcing conservation easements during the year
Amount of expenses incurred in monitoring, inspecting, handling of violations, ▶ \$	and enforcing conservation easements during the year
Does each conservation easement reported on line 2(d) above satisfy the requand section $170(h)(4)(B)(ii)$?	urrements of section 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports conservation easements in balance sheet, and include, if applicable, the text of the footnote to the organithe organization's accounting for conservation easements	its revenue and expense statement, and
Organizations Maintaining Collections of Art, Historical Complete if the organization answered "Yes" on Form 990, Pa	
If the organization elected, as permitted under SFAS 116 (ASC 958), not to re art, historical treasures, or other similar assets held for public exhibition, educ provide, in Part XIII, the text of the footnote to its financial statements that di-	cation, or research in furtherance of public service,
If the organization elected, as permitted under SFAS 116 (ASC 958), to report historical treasures, or other similar assets held for public exhibition, education following amounts relating to these items	
(i) Revenue included on Form 990, Part VIII, line 1	> \$
(ii) Assets included in Form 990, Part X	<u></u>
If the organization received or held works of art, historical treasures, or other following amounts required to be reported under SFAS 116 (ASC 958) relating	similar assets for financial gain, provide the
- · · · · · · · · · · · · · · · · · · ·	• *
Revenue included on Form 990, Part VIII, line 1	P \$

Par	3111	Organizations Maintaining Co	ollections of Art, I	Histori	ical T	reası	ires, or	Other	<u>Similar A</u>	ssets ((continued)
3		the organization's acquisition, accession (check all that apply)	on, and other records	, check	any of	the fo	llowing tl	hat are a	significant	use of it	s collection
а		Public exhibition		d		Loan	or excha	inge prog	rams		
b		Scholarly research		е		Othe	r				
c		Preservation for future generations									
4	Provide Part	de a description of the organization's co	ollections and explain	how the	ey furt	her the	e organız	ation's ex	empt purpo	ose in	
5		g the year, did the organization solicit s to be sold to raise funds rather than							ıılar	□ Y	es 🗌 No
Pa	rt IV	Escrow and Custodial Arrang Complete if the organization ans X, line 21.		rm 990	, Part	: IV, lı	ne 9, or	reporte	ed an amo	unt on	Form 990, Part
1a		e organization an agent, trustee, custod ded on Form 990, Part X?	dian or other intermed	diary for	contri	bution	s or othe	r assets	not	□ Y	es 🗆 No
ь	If "Y∈	es," explain the arrangement in Part XI	II and complete the fo	ollowing	table		[P	Amount	
С		nning balance						1c			
d	Addıt	ions during the year						1d			
е	Dıstrı	butions during the year						1e			
f	Endın	ng balance						1f			
2 a	Did th	he organization include an amount on F	orm 990, Part X, line	21, for	escrov	v or cu	ıstodıal a	ccount lia	ability?		es 🗆 No
b	If "Ye	es," explain the arrangement in Part XII	II Check here if the e	xplanat	ion ha:	s been	provided	in Part)	KIII		
Pa	rt V	Endowment Funds. Complete	if the organization	answer	ed "Y	es" oı	n Form 🤉	990, Par	t IV, line :	10.	
			(a)Current year	(b) P	rior yea	ır	(c)Two ye	ars back	(d)Three ye	ars back	(e)Four years back
	_	ing of year balance				_					
		outions				_					
		estment earnings, gains, and losses									
		or scholarships									
е		expenditures for facilities ograms									
f	Admını	strative expenses									_
g	End of	year balance									
2	Provid	de the estimated percentage of the cur	rent year end balance	e (line 1	g, colu	mn (a)) held as	5			
а	Board	d designated or quasi-endowment 🕨									
b	Perm	anent endowment ►									
С	Temp	orarily restricted endowment >									
		percentages on lines 2a, 2b, and 2c sho	•								
3a		here endowment funds not in the posse nization by	ession of the organiza	tion tha	t are h	ield an	id adminis	stered fo	r the	_	Yes No
		nrelated organizations			•						a(i)
b	Ìf "Ye	elated organizations es" on 3a(ii), are the related organization	·			. ?	• •				a(ii) 3b
4		ribe in Part XIII the intended uses of th	e organization's endo	wment 1	funds						
Pa	rt VI	Land, Buildings, and Equipme		000	. D	T) ()		C	000 D		10
	Descri	Complete if the organization ans ption of property (a) Cost or o (investri	ther basis (b) Cost	rm 990 t or other	•				m 990, Pa lepreciation		(d) Book value
1a	Land				6,0	98,861					6,098,861
	Buildin	gs		:	1,154,3	42,523		:	212,945,615		941,396,908
		nold improvements									
		nent			58,9	82,035			30,858,772		28,123,263
	Other				-				·		
		lines 1a through 1e (Column (d) must	egual Form 990. Part	X. colur	mn (B)), line	10(c)).		>		975.619.032

Schedule D (Form 990) 2017				Page 3
Part VII Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	ganızat	on answ	vered "Yes" on Form 990	, Part IV, line 11b.
(a) Description of security or category (including name of security)		(b) Book value		of valuation ear market value
(1) Financial derivatives (2) Closely-held equity interests (3)Other	•			
(A)				
(B)				
(C)				
(D)				
(E)				_
(F)				_
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form	990, Pa	art IV, lii	ne 11c. See Form 990, P	art X, line 13.
(a) Description of investment		ok value	(c) Method	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. Complete if the organization answered 'Yes' (a) Description	on Forn	n 990, Pa	rt IV, line 11d See Form 99	0, Part X, line 15 (b) Book value
(1) CONSTRUCTION IN PROGRESS (2) DUE FROM RELATED ENTITIES AND MANAGEMENT COMPANIES (3) INTEREST/DIVIDEND INCOME RECEIVABLE (4) FUNDS HELD IN TRUST BY THE UNIVERSITIES AS MANAGERS (5)				109,387,068 575,908 392,333 22,230,748
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.			rm 990, Part IV, line 11e	132,586,057 e or 11f.
1. (a) Description of liability		(b) B	ook value	_
(1) Federal income taxes SECURITY DEPOSITS			3,484,258	
FAIR VALUE OF INTEREST EXCHANGE			4,335,757	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of the f	ootnote	to the or	7,820,015 ganization's financial statem	ents that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740)				

Part XI

2

3

4

b

C

Part XII

5

1

2

c

d

3 4

b

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2017

Page 4

3,428,594

-137,951

175,866,552

180,576,009

137,951

180,438,058

180.438.058

Schedule D (Form 990) 2017

176,004,503

С	Recoveries of prior year grants
d	Other (Describe in Part XIII)
е	Add lines 2a through 2d

Recoveries of prior year grants
Other (Describe in Part XIII)
Add lines 2a through 2d
Subtract line 2e from line 1
Amounts included on Form 990, Part VIII, line 12, but not on line 1

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d . .

Return Reference

Donated services and use of facilities . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b.

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Add lines **4a** and **4b**

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

2a

2b 2c 2d

4a

4b

2a 2b

2c

2d

4a

4b

Explanation

3.428.594

-137,951

137,951

2e

3

4c

5

2e

3

4c

5

Page 5		schedule D (Form 990) 2017				
	ormation (continued)	Part XIII Supplemental Info				
	Explanation	Return Reference				

Schedule D (Form 990) 2017

Additional Data

Software Version:

EIN: 63-1173425 Name: COLLEGIATE HOUSING FOUNDATION

AT JUNE 30, 2018 OR JUNE 30, 2017 THE TAX YEARS 2014 - 2017 REMAIN OPEN TO EXAMINATION

Supplemental Information

Explanation

Return Reference PART X, LINE 2

Software ID:

THE FOUNDATION HAS A POLICY FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE FOUNDATION WILL RECORD A LIABILITY FOR UNCERTAIN TAX POSITIONS WHEN IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WOULD NOT BE SUSTAINED IF EXAMINED BY THE TAXING AUTHORITY FOR TAX-EXEMPT

ENTITIES, TAX POSITIONS INCLUDE THE ENTITY'S TAX-EXEMPT STATUS AND ASSUMPTIONS USED TO DET ERMINE UNRELATED BUSINESS TAXABLE INCOME THE FOUNDATION HAD NO UNRECOGNIZED TAX BENEFITS

Supplemental Information							
Return Reference	Explanation						
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN FAIR VALUE OF INTEREST EXCHANGE 3,424,226 UNREALIZED GAIN 4,368						

Supplemental Information					
Return Reference	Explanation				
PART XI, LINE 4B - OTHER ADJUSTMENTS	EXPENSES REPORTED AS REDUCTIONS OF UBIT ON PART VIII LINE 6B -137,951				

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES REPORTED AS DEDUCTIONS TO UBIT ON PART VIII LINE 6B 137,951

Sı

efil	e GRAPHIC pr	rint - DO NOT PROCESS	9349313	35031	.469		
Schedule J (Form 990)		Compensation Information	OMB No	OMB No 1545-004			
		For certain Officers, Directors, Trustees, Key Employees, and Highest					
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	1 20	2017			
		▶ Attach to Form 990.					
•	tment of the Treasury al Revenue Service	► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.	Open i	co Pui ectio			
Nar	ne of the organiza						
COL	LEGIATE HOUSING I	FOUNDATION 63-1173425					
Pa	rt I Questi	ons Regarding Compensation					
				Yes	No		
1a		opiate box(es) if the organization provided any of the following to or for a person listed on Form lection A, line 1a Complete Part III to provide any relevant information regarding these items					
	✓ First-class	s or charter travel Housing allowance or residence for personal use					
		r companions \square Payments for business use of personal residence					
		nification and gross-up payments \square Health or social club dues or initiation fees					
	☐ Discretion	nary spending account					
b		xes in line 1a are checked, did the organization follow a written policy regarding payment or reimburse all of the expenses described above? If "No," complete Part III to explain	ment 1b	Yes			
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all	2	Yes			
	directors, truste	ees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3		If any, of the following the filing organization used to establish the compensation of the					
		EO/Executive Director Check all that apply Do not check any boxes for methods and organization to establish compensation of the CEO/Executive Director, but explain in Part III					
		ation committee Written employment contract Compensation survey or study					
		of other organizations Approval by the board or compensation committee					
4	During the year related organiza	r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization ation	ora				
а	_	rance payment or change-of-control payment?	4a		No		
b		r receive payment from, a supplemental nonqualified retirement plan?	4b		No		
c	•	r receive payment from, an equity-based compensation arrangement?	4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	0) F04(-)(4) and F04(-)(20) annulination and the lines F 0					
5		s), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
,		contingent on the revenues of					
а	The organization	n ²	5a		No		
b	Any related orga	anization?	5b		No		
	If "Yes," on line	5a or 5b, describe in Part III					
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any ontingent on the net earnings of					
а	The organization	n ⁷	6 a		No		
b	Any related orga		6b		No		
	•	6a or 6b, describe in Part III					
7		ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed escribed in lines 5 and 6? If "Yes," describe in Part III	7		No		
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III						
9		8, did the organization also follow the rebuttable presumption procedure described in Regulations section			No		
For D		uction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Sched	9 ule 1 (Form	2 000)	2017		

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			of W-2 and/or 1099-MISC compensation (ii) Bonus & incentive (iii) Other reportable compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
1 LEEMAN H COVEY PRESIDENT	(i)	225,000	0	0	6,750	1,282	233,032	0	
	(ii)	0	0	0	0	0	0	0	
2 WILLIAM B GIVHAN COO/SUCCESSOR	(i)	575,152	0	0	0	33,304	608,456	0	
PRESIDENT	(ii)	0	0	0	0	0	0	0	
3 JANET BROWN VP FOR ADMIN/ASST	(i)	155,750	0	0	4,673	1,566	161,989	0	
SECRETAR	(ii)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2017									
Part III Supplemental Information									
Provide the information, explanation	rovide 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								
PART I, LINE 1A	FIRST-CLASS TRAVEL WAS PROVIDED ON OCCASSION TO TWO OFFICERS OF THE FOUNDATION THE FIRST-CLASS TRAVEL WAS NOT CONSIDERED TAXABLE COMPENSATION TRAVEL WAS CONSISTENT WITH THE FOUNDATION'S TRAVEL POLICY WHICH STATES, "OFFICERS AND DIRECTORS REQUESTING OFFICIAL TRAVEL SHOULD ATTEMPT TO TRAVEL BY THE MEANS MOST ECONOMICAL TO CHF IN SELECTING A PARTICULAR METHOD OF TRANSPORTATION, CONSIDERATION SHALL BE GIVEN FOR THE TOTAL COST TO CHF WHICH WILL RESULT, INCLUDING LOST WORK, AND ACTUAL TRANSPORTATION COSTS, WITH THE UNDERSTANDING THAT OFTEN TIMES, CONVENIENCE AND URGENCY MAY NECESSITATE MORE EXPENSIVE TRANSPORTATION "								
PART I, LINE 3	THE BOARD OF DIRECTORS REVIEWED A COMPENSATION STUDY PREPARED BY AN INDEPENDENT CONSULTANT FOR INDIVIDUALS IN FUNCTIONALLY								

Cabadula 1 (Farm 000) 2017

Schedule J (Form 990) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135031469 OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization COLLEGIATE HOUSING FOUNDATION 63-1173425 Part I **Bond Issues** (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (h) On (i) Pool (a) Issuer name (b) Issuer EIN (e) Issue price behalf of financing ıssuer Yes No Yes No Yes No NEW CASTLE COUNTY 51-6000160 643284AA0 09-29-2005 44.965.000 TO PROVIDE FUNDS TO REFUND Х Χ Х DELAWARE BONDS ISSUED ON NOVEMBER 17, 1999 DELAWARE COUNTY AUTHORITY 4,050,980 TO PROVIDE FUNDS TO REFUND 23-1973437 000000000 05-10-2018 Χ Χ Х BONDS ISSUED ON DECEMBER 30, 2008 VERMONT HOUSING FINANCE 03-0239902 924197AA4 07-29-2004 23,075,000 TO CONSTRUCT A STUDENT Х Χ Х **AGENCY** HOUSING FACILITY AT THE UNIVERSITY OF VERMONT CALIFORNIA STATEWIDE 68-0164610 13078REU0 01-11-2012 TO ACQUIRE A STUDENT HOUSING Х Χ Х COMMUNITIES DEVELOPMENT FACILITY AT THE UNIVERSITY OF **AUTHORITY** CALIFORNIA IRVI **Proceeds** Part II C D 14,705,000 19,734 2,005,000 9,710,000 2 Total proceeds of issue. 3 44,965,000 4,050,980 23,550,928 95,742,546 4 2,800,583 405,131 827,483 6,989,977 5 1,595,815 6 7 Issuance costs from proceeds. 359,835 81,019 461,500 704,825 8 141,427 132,046 9 97,417 1,305,665 10 19,332,990 11 Other spent proceeds. 3.969.960 41,565,741 95,037,721 12 13 2001 2001 2005 2012 Yes No Yes No Yes No Yes No Х Χ Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Х Χ Χ Χ 15 Χ Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final allocation of Х Х Х Х Part III **Private Business Use** C D Α Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Х Χ Χ Χ Are there any lease arrangements that may result in private business use of bond-financed

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

Χ

Cat No 50193E

Χ

Χ

Schedule K (Form 990) 2017

За

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Part IV

Arbitrage

Page 2

Х

Χ

Χ

No

Х

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Yes

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Yes

Х

Schedule K (Form 990) 2017

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No

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Yes

Χ

Х

No

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Yes

Χ

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Χ

FIRST NATIONAL BANK

OF PENNSYLVANIA

Χ

Χ

No

Х

Χ

Х

2040 00000000000 %

Х

Χ

Α

Yes

Х

Χ

Χ

ASSOCIATION

PNC BANK NATIONAL

Yes

Χ

No

Χ

Χ

Χ

1117 0000000000 %

Χ

Χ

No

Х

Χ

Х

Х

Yes

Χ

Χ

	Yes
Are there any management or service contracts that may result in private business use of bond-financed property?	X
If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside	.,

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

unrelated trade or business activity carried on by your organization, another section 501(c)(3)

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

Does the bond issue meet the private security or payment test? . . .

property?.........

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

No rebate due?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2017

No Χ

D

D

No

Yes

Yes

Χ

Χ

5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X	Х	
Ь	Name of provider					AMERICAN INTERNATIONAL GROUP	
С	Term of GIC					2	20 0000000000 %
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?					х	
6	Were any gross proceeds invested beyond an available temporary period?	X			X	х	

Α

No

Yes

В

No

Yes

C

No

C

No

Yes

Yes

Has the organization established written procedures to monitor the Χ Х Χ requirements of section 148? . . . **Procedures To Undertake Corrective Action** Part V Α R Yes No Yes No

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations? **Return Reference** Explanation

COMPUTATION WAS PERFORMED 04/01/2018

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions). ISSUER NAME NEW CASTLE COUNTY, DELAWARE DATE THE REBATE COMPUTATION WAS PERFORMED 08/01/2017 ISSUER NAME VERMONT HOUSING FINANCE AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED 06/30/2018 ISSUER NAME CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED 01/11/2018 ISSUER NAME CITY OF ALBANY INDUSTRIAL DEVELOPMENT AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED 05/03/2017 ISSUER NAME CITY OF ALBANY DATE REBATE COMPUTATION INDUSTRIAL DEVELOPMENT AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED 01/25/2018 ISSUER PERFORMED NAME_ILLINOIS_FINANCE_AUTHORITY_DATE_THE_REBATE_COMPUTATION_WAS_PERFORMED_10/01/2017_ISSUER NAME DUTCHESS COUNTY LOCAL DEVELOPMENT CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED 05/31/2018 ISSUER NAME WYOMING COMMUNITY DEVELOPMENT AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED 07/01/2017 ISSUER NAME OREGON FACILITIES AUTHORITY DATE THE REBATE

Return Reference	Explanation
CHEDULE K, PART I, ENTITY LINE D, COLUMN F	TO CONSTRUCT A STUDENT HOUSING FACILITY AT NORTHERN ILLINOIS UNIVERSITY AND PROVIDE FUNDS TO REFUND BONDS ISSUED ON OCTOBER 23, 2006 SCHEDULE K, PART I, ENTITY 4, LINE C, COLUMN F TO ACQUIRE AN EXISTING STUDENT HOUSING FACILITY AND TO CONSTRUCT A NEW STUDENT HOUSING FACILITY AT TARLETON STATE UNIVERSITY

SC 2,

Return Reference	Explanation
	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION'S BOND ISSUANCE ON 05/29/2014 HAS TWO CUSIP NUMBERS, 64542RAX9 AND 64542RAY7

Return Reference	Explanation				
SCHEDULE K	SEVEN SCHEDULE K SCHEDULES COMPLETED TO ACCOUNT FOR ALL OUTSTANDING POST-DECEMBER 31, 2002 BONDS				

Return Reference	Explanation
SCHEDULE K PART II LINE 3	DIFFERENCES BETWEEN SCHEDULE K PART I COLUMN E AND PART II LINE 3 VERMONT HOUSING FINANCE AGENCY 7/29/04 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD CITY OF ALBANY INDUSTRIAL DEVELOPMENT AUTHORITY 5/3/07 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD CITY OF ALBANY INDUSTRIAL DEVELOPMENT AUTHORITY 1/25/08 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD LILLINOIS FINANCE AUTHORITY 3/10/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD DUTCHESS COUNTY LOCAL DEVELOPMENT CORPORATION 6/29/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD WYOMING COMMUNITY DEVELOPMENT AUTHORITY 7/14/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD OREGON FACILITIES AUTHORITY 4/19/12 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD OREGON FACILITIES AUTHORITY 4/19/12 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 7/11/13 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD TOLEDO-LUCAS COUNTY PORT AUTHORITY 5/6/14 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 5/29/14 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 06/11/14 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 06/11/14 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 04/02/15 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD ILLINOIS FINANCE CORPORATION 04/02/15 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD PUBLIC FINANCE AUTHORITY 05/07/15 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 06/02/15 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE COMPORATION 6/30/16 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE COMPORATION 6/

Return Reference	Explanation
SCHEDULE K, PART II, ENTITY 1, LINE 4	DELAWARE COUNTY AUTHORITY 5/10/18 ISSUE THE RESERVE FUND WAS FUNDED WITH TRANSFERRED PROCEEDS OF \$405,097 97 AND THE REMAINING GROSS PROCEEDS ARE EARNINGS THEREON SCHEDULE K, PART II, ENTITY 1, LINE 9 VERMONT HOUSING FINANCE AGENCY 7/29/04 ISSUE INCLUDES EXPENDITURES IN THE AMOUNT OF \$807,451 FOR INTEREST INCURRED ON THE VERMONT HOUSING FINANCE AGENCY 7/29/04 ISSUE AFTER THE PROJECT PERIOD BUT PAID WITHIN THREE YEARS OF THE ISSUE DATE

Return Reference	Explanation
SCHEDULE K, PART II, ENTITY 3, LINE 12	OREGON FACILITIES AUTHORITY 04/19/12 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE REDEMPTION FUND PENDING REDEMPTION SCHEDULE K, PART II, ENTITY 3, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 07/11/2013 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 4, LINE 12 TOLEDO-LUCAS COUNTY PORT AUTHORITY 05/6/2014 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 4, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 05/29/2014 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 4, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 06/11/2014 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 4, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 06/19/2014 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 5, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 07/02/2014 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 5, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 04/02/2015 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 5, LINE 12 ILLINOIS FINANCE AUTHORITY 05/07/2015 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 5, LINE 12 PUBLIC FINANCE AUTHORITY 06/10/2015 ISSUE ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES SCHEDULE K, PART II, ENTITY 5, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 06/23/2016 ISSUE ONLY UNSPEN

Return Reference	Explanation
	NEW CASTLE COUNTY, DELAWARE 9/29/05 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS VERMONT HOUSING FINANCE AGENCY 7/29/04 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY 1/11/12 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS ILLINOIS FINANCE AUTHORITY 3/10/11 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS DITCHESS COUNTY LOCAL DEVELOPMENT CORPORATION 6/29/11 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS WYOMING COMMUNITY DEVELOPMENT AUTHORITY 7/14/11 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS OREGON FACILITIES AUTHORITY 4/19/12 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED AT A YIELD THAT IS LESS THAN THE YIELD OF THE RESPECTIVE BONDS NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 07/11/2013 ISSUE ALL GROSS PROCEEDS INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE TEMPORARY PERIOD EXCEPTION WERE INVESTED BEYOND THE AVAILABLE
	THERE INVESTED AT A TILLE THAT IS LESS THAN THE TILLE OF THE RESIDENTE BONDS

Return Reference	Explanation
SCHEDULE K PART V	THE FOUNDATION HAS ADOPTED WRITTEN PROCEDURES TO ENSURE POST-ISSUANCE COMPLIANCE WITH FEDERAL TAX REQUIREMENTS NECESSARY TO ENSURE THE TAX-EXEMPT BONDS REMAIN TAX-EXEMPT AND TO ENSURE THAT VIOLATIONS ARE TIMELY IDENTIFIED THE POLICY DOES NOT REQUIRE CORRECTION THROUGH THE VOLUNTARY CLOSING AGREEMENT PROGRAM

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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135031469 OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization COLLEGIATE HOUSING FOUNDATION 63-1173425 Part I **Bond Issues** (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (h) On (i) Pool (a) Issuer name (b) Issuer EIN (e) Issue price behalf of financing issuer Yes Yes No No Yes No CALIFORNIA STATEWIDE 68-0164610 13078RGJ3 03-15-2016 323,065,270 TO PROVIDE FUNDS TO REFUND Х Χ COMMUNITIES DEVELOPMENT BONDS ISSUED 12/14/2004, **AUTHORITY** 4/27/2006 AND 7/30/2008 CITY OF ALBANY INDUSTRIAL 52-2015750 12,780,000 TO CONSTRUCT A STUDENT Χ 012440HR7 05-03-2007 Χ Х **DEVELOPMENT AGENCY** HOUSING FACILITY AT THE ALBANY COLLEGE OF PHARMACY CITY OF ALBANY INDUSTRIAL 52-2015750 012440KR3 01-25-2008 6,495,000 TO CONSTRUCT A STUDENT Х Х Χ **DEVELOPMENT AGENCY** HOUSING FACILITY AT THE ALBANY COLLEGE OF PHARMACY ILLINOIS FINANCE AUTHORITY 86-1091967 45202QCD3 03-10-2011 130,435,517 SEE SCHEDULE K PART VI Χ Х Х EXPLANATION FOR PART I, ENTITY 2, LINE D, COLUMN F Part II **Proceeds** C D 14,580,000 4,755,000 2,540,000 4,095,000 2 Total proceeds of issue. 3 323,065,270 12,837,193 6,531,819 130,670,745 4 20,385,754 10,678,156 5 169,034 106,314 10,790,087 6 7 Issuance costs from proceeds. 110,970 2,886,146 245,628 1,960,059 8 78,048 71,641 9 181,957 215,977 6,320,142 30,183 10 12,128,506 5,833,760 83,734,980 11 Other spent proceeds. 299,817,291 227.177 18,512,973 12 13 2012 2007 2008 2012 Yes No Yes No Yes No Yes No Х Х Χ Х Were the bonds issued as part of a current refunding issue? 14 Were the bonds issued as part of an advance refunding issue? Χ Χ Χ 15 Χ 16 Χ Χ Χ Χ Does the organization maintain adequate books and records to support the final allocation of Х Х Х Х Part III **Private Business Use** C D Α Yes No No Yes No Yes Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Х Χ Χ

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Schedule K (Form 990) 2017

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Cat No 50193E

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

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Part IV

Arbitrage

Page 2

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Schedule K (Form 990) 2017

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Yes Are there any management or service contracts that may result in private business use of Χ If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside Χ counsel to review any management or service contracts relating to the financed property?

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

property?.........

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

No rebate due?

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Does the bond issue meet the private security or payment test? . . .

Are there any research agreements that may result in private business use of bond-financed If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

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Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2017

period?

Part V

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Schedule K (Form 990) 2017

Yes

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Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Yes

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

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Yes

Yes

No

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Yes

Yes

Yes

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

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Schedule K (Form 990) 2017

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Part IV

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В C D Yes Nο Yes No Yes No Yes No Are there any management or service contracts that may result in private business use of Χ Χ Χ Χ

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Schedule K (Form 990) 2017

Ь	or "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X				
С	Are there any research agreements that may result in private business use of bond-financed property?		Х	Х	X	
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?					

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Yes

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TD BANK NA

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

No rebate due?

Was the hedge superintegrated?

Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

the GIC satisfied?

requirements of section 148? . . .

Were green preceded invested in a guaranteed investment centreet

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Schedule K (Form 990) 2017

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Schedule K (Form 990) 2017

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Name of provider		
Term of GIC		Γ

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

No

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Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135031469 OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization COLLEGIATE HOUSING FOUNDATION 63-1173425 Part I **Bond Issues** (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (h) On (i) Pool (a) Issuer name (b) Issuer EIN (e) Issue price behalf of financing issuer Yes No Yes No Yes No TOLEDO-LUCAS COUNTY PORT 34-6406986 88927PAL3 05-06-2014 37.908.501 TO CONSTRUCT A STUDENT Х Χ **AUTHORITY** HOUSING FACILITY AT UNIVERSITY OF TOLEDO TO CONSTRUCT A STUDENT NEW HOPE CULTURAL 26-1604618 64542RAX9 05-29-2014 109,574,178 Χ Χ Х **EDUCATION FACILITIES** HOUSING FACILITY AT TEXAS A&M FINANCE CORPORATION UNIVERSITY - COLLEGE ST NEW HOPE CULTURAL 26-1604618 64542RBL4 06-11-2014 39,950,287 SEE SCHEDULE K PART VI Х Х Χ **EDUCATION FACILITIES** EXPLANATION FOR PART I, ENTITY FINANCE CORPORATION 4, LINE C, COLUMN F NEW HOPE CULTURAL 26-1604618 64542RBZ3 06-19-2014 44,783,024 TO CONSTRUCT A STUDENT Χ Х Х **EDUCATION FACILITIES** HOUSING FACILITY AT TEXAS A&M FINANCE CORPORATION UNIVERSITY - GALVESTON Part II **Proceeds** C D 2,385,000 650,000 690,000 2 Total proceeds of issue. 3 37,934,808 109,645,507 39,972,566 44,814,505 4 2,437,309 6,740,355 2,536,437 2,895,388 5 2,371,030 6,087,264 1,915,707 3,285,339 6 7 Issuance costs from proceeds. 694,725 1,395,264 766,577 834,557 8 1,171,393 9 2,254,492 1,014,528 871,748 711,998 10 30,355,906 91,375,631 33,789,147 37,016,233 11 Other spent proceeds 49,569 12 1.011.741 70,988 621,109 92.950 13 2015 2015 2015 2016 Yes No Yes No Yes No Yes No Х Χ Were the bonds issued as part of a current refunding issue? Χ Χ 14 Were the bonds issued as part of an advance refunding issue? Χ Χ Χ 15 Χ Χ Χ Х Х 16 Does the organization maintain adequate books and records to support the final allocation of Х Х Х Χ Part III **Private Business Use** C D Α Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Х Χ Χ Χ Are there any lease arrangements that may result in private business use of bond-financed

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

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Schedule K (Form 990) 2017

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Yes Nο Yes Are there any management or service contracts that may result in private business use of Χ If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside Χ

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed property?.........

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

No rebate due?

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2017

Nar

period?

Part V

No

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Yes

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Schedule K (Form 990) 2017

Yes

No

ere gross proceeds invested in a guaranteed investment contract IC)?	Х
me of provider	

Yes

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Yes

No

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Yes

Yes

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Yes

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Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135031469 OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number COLLEGIATE HOUSING FOUNDATION 63-1173425 **Bond Issues** Part I (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing issuer Yes No Yes No Yes No NEW HOPE CULTURAL 26-1604618 64542RCM1 07-02-2014 31,449,486 TO CONSTRUCT A STUDENT Х Χ Χ **EDUCATION FACILITIES** HOUSING FACILITY AT TEXAS A&M FINANCE CORPORATION UNIVERSITY - CORPUS NEW HOPE CULTURAL TO CONSTRUCT A STUDENT 26-1604618 64542RDA6 04-02-2015 74,755,091 Χ Χ **EDUCATION FACILITIES** HOUSING FACILITY AT TARLETON FINANCE CORPORATION STATE UNIVERSITY ILLINOIS FINANCE AUTHORITY 86-1091967 45202QCM3 05-07-2015 40,066,982 TO CONSTRUCT A STUDENT Х Х Х HOUSING FACILITY AT NORTHEASTERN ILLINOIS UNIVERSITY PUBLIC FINANCE AUTHORITY 27-3866124 74439YAK7 06-10-2015 27,377,183 TO CONSTRUCT A STUDENT Х Х Χ HOUSING FACILITY AT WESTERN CAROLINA UNIVERSITY Part II **Proceeds** C D 2 3 Total proceeds of issue. 31,467,745 74,800,016 40,070,115 27,395,216 Gross proceeds in reserve funds. 4 2,061,730 4,572,810 2,568,033 1,752,472 5 1.742,229 5,209,802 2.465.239 1,560,487 6 7 605,749 1,088,586 771,900 542,062 8 9 679,930 1,089,968 1,203,241 684,977 26,312,978 62,763,786 10 31,948,050 22,790,908 11 12 65,129 75,064 1,113,652 64,310 13 2015 2016 2016 2016 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ Χ Χ Χ 14 Were the bonds issued as part of an advance refunding issue? Χ Χ Χ 15 Х 16 Χ Χ Χ Does the organization maintain adequate books and records to support the final allocation of 17 Х Χ Χ Χ

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

Part III **Private Business Use** C D Α Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Χ Χ Χ Are there any lease arrangements that may result in private business use of bond-financed

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Cat No 50193E

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Schedule K (Form 990) 2017

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

counsel to review any research agreements relating to the financed property?

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

property?.........

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

No rebate due?

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

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Part IV

Arbitrage

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Yes

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Schedule K (Form 990) 2017

Page 2

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Yes

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No

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the GIC satisfied?

requirements of section 148? . . .

Were gross proceeds invested in a guaranteed investment contract

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Schedule K (Form 990) 2017

period?

Part V

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No

No

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Yes

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Schedule K (Form 990) 2017

Yes

No

(GIC) [?]	X
Name of provider	
Term of GIC	
Was the regulatory safe harbor for establishing the fair market value of	

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

No

Yes

Yes

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No

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Yes

Yes

No

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Yes

Yes

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Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135031469 OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization COLLEGIATE HOUSING FOUNDATION 63-1173425 Part I **Bond Issues** (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (h) On (i) Pool (a) Issuer name (b) Issuer EIN (e) Issue price behalf of financing ıssuer Yes No Yes No Yes No NEW HOPE CULTURAL 26-1604618 64542REA5 06-23-2016 39,578,334 TO CONSTRUCT A STUDENT Х Х **EDUCATION FACILITIES** HOUSING FACILITY AT TEXAS A&M FINANCE CORPORATION UNIVERSITY - CORPUS CHR TO CONSTRUCT A STUDENT NEW HOPE CULTURAL 26-1604618 64542REK3 06-30-2016 22,796,667 Χ Χ Х **EDUCATION FACILITIES** HOUSING FACILITY AT TEXAS A&M UNIVERSITY - SAN ANTONI FINANCE CORPORATION CALIFORNIA STATEWIDE 68-0164610 13078RHG8 08-17-2017 172,763,789 TO CONSTRUCT A STUDENT Х Χ Х COMMUNITIES DEVELOPMENT HOUSING FACILITY AT UNVERSITY **AUTHORITY** OF CALIFORNIA, IRVINE E NEW HOPE CULTURAL 26-1604618 64542RFG1 12-12-2017 90,198,341 TO ACQUIRE A STUDENT HOUSING Х Χ Х **EDUCATION FACILITIES** FACILITY AT TEXAS A&M FINANCE CORPORATION UNIVERSITY - CORPUS CHR Part II **Proceeds** C D 2 Total proceeds of issue. 3 39,676,411 22,861,373 174,221,736 90,198,341 4 7,268,913 5,995,931 2,262,172 1,308,286 5 1,949,172 1,084,753 5,529,361 6 7 Issuance costs from proceeds. 707,232 399,300 1,693,576 1,393,238 8 9 788,786 505,506 10 32,890,032 18,807,591 35,204,155 80,253,436 11 Other spent proceeds 12 755.937 124.525.241 2,555,737 1.079.017 13 2017 2017 2017 Yes No Yes No Yes No Yes No Х Χ Were the bonds issued as part of a current refunding issue? Χ Х 14 Were the bonds issued as part of an advance refunding issue? Χ Χ Χ 15 Χ 16 Χ Χ Х Х Does the organization maintain adequate books and records to support the final allocation of Х Х Х Χ Part III **Private Business Use** C D Α Yes No No

Was the organization a partner in a partnership, or a member of an LLC, which owned property Are there any lease arrangements that may result in private business use of bond-financed

Yes No Х Χ

Yes

No Χ

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Yes

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Schedule K (Form 990) 2017

Cat No 50193E For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Part IV

Arbitrage

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Does the bond issue meet the private security or payment test? . . .

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Enter the percentage of financed property used in a private business use by entities other than

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No

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Yes

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Schedule K (Form 990) 2017

Page 2

		A		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	Х		×		×		×	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		×		×		×	
С	Are there any research agreements that may result in private business use of bond-financed property?		х		X		X		X
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								

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C

if self-remediation is not available under applicable regulations?

Were gross proceeds invested in a guaranteed investment contract

Schedule K (Form 990) 2017

Part VI

No

No

D

Yes

Schedule K (Form 990) 2017

Yes

	(GIC)?	^	^	^			
b	Name of provider						
С	Term of GIC						
	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?						
6	Were any gross proceeds invested beyond an available temporary						

No

Yes

Yes

No

No

v

Yes

Yes

No

No

Yes

No

ь	period?		×		×		×		
,	Has the organization established written procedures to monitor the requirements of section 148°	×		X		X		Х	
Par	t V Procedures To Undertake Corrective Action								

Yes

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135031469 OMB No 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Open to Public Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Employer identification number Name of the organization COLLEGIATE HOUSING FOUNDATION 63-1173425 **Bond Issues** Part I (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (i) Pool (a) Issuer name (e) Issue price (g) Defeased (h) On behalf of financing ıssuer Yes Yes No Yes No No ILLINOIS FINANCE AUTHORITY 86-1091967 45203KAQ8 12-19-2017 103,938,169 TO CONSTRUCT A STUDENT Х Х Х HOUSING FACILITY AT UNIVERSITY OF ILLINOIS AT CHICAGO NEW HOPE CULTURAL 26-1604618 64542YAN6 03-20-2018 ITO CONSTRUCT A STUDENT Χ Χ Χ FACILITY AT TEXAS WOMAN'S **EDUCATION FACILITIES** UNIVERSITY FINANCE CORPORATION KENT COUNTY DELAWARE 51-6000145 490237AR5 05-08-2018 74,665,463 TO CONSTRUCT A STUDENT Χ Χ Χ HOUSING FACILITY AT DELAWARE STATE UNIVERSITY Part II **Proceeds** В C Α D 2 Total proceeds of issue. 3 104,515,053 74,564,593 74,704,608 6,194,689 4,090,044 4,213,421 5 727,977 6 7 1,782,905 1,343,226 1.459.044 8 1.175.518 9 5,350 96,123 10 26,847,341 4,779,149 6,900,517 11 176,713 12 68,956,791 63,080,533 61,954,913 13 Yes No Yes No Yes No Yes No

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Yes

Schedule K (Form 990) 2017

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Yes

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Were the bonds issued as part of a current refunding issue?

Were the bonds issued as part of an advance refunding issue?

Private Business Use

Does the organization maintain adequate books and records to support the final allocation of

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

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

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Part III

Χ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50193E

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Part IV

Arbitrage

Page 2

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Yes

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Yes

Schedule K (Form 990) 2017

No

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No

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If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

Α

Yes

Χ

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

organization, or a state or local government

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Does the bond issue meet the private security or payment test? . . .

Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

No rebate due?

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

the GIC satisfied?

requirements of section 148? . . .

Schedule K (Form 990) 2017

period?

Part V

No

No

Yes

Χ

Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

В

Nο

No

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Yes

Yes

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No

No

Yes

No

Yes

Schedule K (Form 990) 2017

Yes

Yes

Yes

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SCHEDUL (Form 990 or EZ)	990- Complete to pro Form 990 c	ovide information fo or 990-EZ or to prov ▶ Attach to Form t Schedule O (Form	Information to Form 990 or 990-EZ le information for responses to specific questions on 90-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. Inhedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.							
Name of the org COLLEGIATE HOUS 990 Schedule		n		Employer ider 63-1173425	ntification number					
Return Reference	Explanation e									
FORM 990, PART VI, SECTION A, LINE 3	TVI, BER COLLEGE OR UNIVERSITY OR BY AN INDEPENDENT MANAGEMENT COMPANY APPROVED BY SUCH COLLEGE TION A, OR UNIVERSITY									

Return Reference	Explanation
SECTION A,	THE BOARD OF DIRECTORS APPROVED AN AMENDMENT TO THE ARTICLES OF INCORPORATION TO REMOVE TH E REFERENCE TO THE LOCATION OF THE PRINCIPAL OFFICE THE BYLAWS WERE AMENDED TO PROVIDE TH AT THE IMMEDIATE PAST PRESIDENT MAY SERVE AS A CLASS I DIRECTOR WITH THE APPROVAL OF A MAJ ORITY OF THE REMAINING BOARD MEMBERS AND TO REVISE THE QUALIFICATION FOR CLASS A AND B MEM BERS TO PROVIDE APPROPRIATE REPRESENTATION TO EACH CLASS

Return Explanation
Reference

FORM 990, ANY COLLEGE OR UNIVERSITY FOR WHICH COLLEGIATE HOUSING FOUNDATION (THE FOUNDATION) OWNS AN PART VI, DOPERATES A STUDENT HOUSING FACILITY OR RELATED IMPROVEMENTS IS A MEMBER OF THE FOUNDATION SECTION A, N AS LONG AS THE FOUNDATION OWNS OR OPERATES ITS FACILITIES

Return Explanation
Reference

LINE 7A

FORM 990, PART VI, SECTION A.

Return Explanation
Reference

FORM 990, ORGANIZATION HAS NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY
PART VI,
SECTION A,
LINE 8B

Return Explanation
Reference

FORM 990, A DRAFT OF THE FORM 990 IS PREPARED BY THE ORGANIZATION'S ACCOUNTING FIRM AND AFTER REVIEW
PART VI, BY THE ORGANIZATION'S LEGAL COUNSEL, IS REVIEWED AND APPROVED BY THE PRESIDENT OF THE ORG
SECTION B, ANIZATION BEFORE BEING FILED A COPY IS ALSO FURNISHED TO EACH OF THE ORGANIZATION'S BOARD
LINE 11B MEMBERS PRIOR TO FILING

Return Explanation
Reference

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

Return Explanation
Reference

E0514.000	THE DOADD OF DIDECTORS BETWEEN COMPETITIVE MADVET BATA AND OR CALABY DATA AS WELL AS A CO
FORM 990,	THE BOARD OF DIRECTORS REVIEWED COMPETITIVE MARKET DATA AND/OR SALARY DATA AS WELL AS A CO
PART VI,	MPENSATION REPORT FOR ITS TOP MANAGEMENT OFFICIAL AND OTHER SENIOR MANAGEMENT OFFICIALS PR
SECTION B,	EPARED BY AN INDEPENDENT EXECUTIVE COMPENSATION FIRM FOR INDIVIDUALS IN FUNCTIONALLY COMPA
LINE 15	RABLE POSITIONS AND BASED ALL OF ITS OFFICERS' SALARIES ON SUCH INFORMATION

Return Explanation
Reference

FORM 990,	COPIES OF DOCUMENTS REQUIRED BY LAW TO BE AVAILABLE TO THE PUBLIC ARE PROVIDED UPON REQUEST
PART VI,	
SECTION C,	
LINE 19	

Explanation Return Reference

FORM 990. CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS 3.424.226 PART XI,

LINE 9

Return Explanation Reference

FORM 990. THE BOARD OF DIRECTORS, ACTING AS A COMMITTEE OF THE WHOLE, ASSUMES RESPONSIBILITY FOR OVE

PART XII. RSIGHT OF THE AUDIT AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT LINE 2C

Return Explanation Reference

FORM 990,	AS A RESULT OF A FEDERAL AWARD, CHF - COLLEGIATE HOUSING COMMERCE, L L C , A SINGLE-MEMBER
PART XII,	SUBSIDIARY OF THE FOUNDATION, WAS REQUIRED TO UNDERGO AN AUDIT AS SET FORTH IN THE SINGLE

LINE 3B † AUDIT ACT AND 2 CFR PART 200. SUBPART † THE ORGANIZATION DID UNDERGO THE REQUIRED AUDIT

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	135031	469	
SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.												2017		
Department of the Treasury Internal Revenue Service	•	Information about S	ichedule I				s is at <u>www</u>	irs.gov/1	form99	<u>o</u> .		Open to	o Public	c	
Name of the organization COLLEGIATE HOUSING FOUNDATION	N								Emp	oloyer identif	icatior	number			
										.173425					
	of Disregarded E	ntities Complete if t	he organ	ization answ	ered "Yes	" on Form	990, Part	IV, line 3	3.						
See Additional Data Table (a) Name, address, and EIN (if applicable) of disreg		egarded entity		(b) Primary a		(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year assets		(f Direct co ent	ntrolling		
Part II Identification of related tax-exem	of Related Tax-Ex npt organizations di		s Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	V, line 34 be	cause	it had one or	more		
Name, address, an	(a) d EIN of related organızat	ion	Prim	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod			(e) charity status on 501(c)(3))			Section (13) cor enti	512(b) ntrolled ty?	
													Yes	No	
For Paperwork Reduction Ac	t Notice, see the Inc	structions for Form 9	90.		Ca	at No 5013	 B5Y				Sch	edule R (Form	990) 20	117	

(a) Name, address, and EIN of related organization		(b) Primary activity		(d) Direct controlling entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512- 514)	`	(g) Share of end-of-year assets			(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	alor P ging c	(k) ercenta owners
								Yes	No		Yes	No	
												+	
Identification of Related Organ because it had one or more related						l zation ansv	l vered "Yes	" on Fo	orm 99	90, Part IV,	line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	do do (state	(c) _egal omicile or foreign		entity (C c	(e) pe of entity orp, S corp, or trust)	(f) Share of total Income	Share	(g) of end- year assets	of- Percei owne	ntage	(13)	(ı) tıon 5) cont entıty
		co	untry)									Ye	es
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Sched	ule R (Form 990) 2017		Pa	ge 3
Pai	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		Yes	No
1 Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (iii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		
b	Gift, grant, or capital contribution to related organization(s)	1b		
С	Gift, grant, or capital contribution from related organization(s)	1c		
d	Loans or loan guarantees to or for related organization(s)	1d		
e	Loans or loan guarantees by related organization(s)	1e		
f	Dividends from related organization(s)	1f		
g	Sale of assets to related organization(s)	1g		
h	Purchase of assets from related organization(s)	1h		
i	Exchange of assets with related organization(s)	1i		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
0	Sharing of paid employees with related organization(s)	10		
р	Reimbursement paid to related organization(s) for expenses	1 p		
q	Reimbursement paid by related organization(s) for expenses	1q		
r	Other transfer of cash or property to related organization(s)	1r		
s	Other transfer of cash or property from related organization(s)	1s		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) Name of related organization (b) Transaction Transaction type (a-s) (c) Amount involved Method of determining amount involved	ount ır	ıvolved	I

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

was not a related diganization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017

Software ID: Software Version:

EIN: 63-1173425

Name: COLLEGIATE HOUSING FOUNDATION

(b) Primary Activity (d) (e)
Total income End-of-year assets

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

(a)
Name, address, and EIN (if applicable) of disregarded entity

		or Foreign Country)			Entity
CHF-WINOOSKI LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-1480741	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,865,410	15,257,530	N/A
CHF-IRVINE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-2001737	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	58,090,383	509,864,254	N/A
CHF-HOLLAND SUITES LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-8580707	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,287,517	9,033,069	N/A
CHF-HOLLAND SUITES II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 26-1705515	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	826,760	5,386,133	N/A
CHF-ELON LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-2956535	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	4,818,055	20,495,944	N/A
CHF - WYOMING LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 45-2392042	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,938,617	15,626,372	N/A
CHF - TOLEDO LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 34-6406986	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	ОН	4,318,850	35,633,370	N/A
CHF - STEPHENVILLE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-2718055	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,193,442	22,481,967	N/A
CHF - NORMAL LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-2995601	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	11,930,038	0	N/A
CHF - GEORGIA I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-1713387	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - DEKALB III LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-5438414	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - DEKALB II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-2995547	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	12,943,465	99,977,286	N/A
CHF - CULLOWHEE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-3010505	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,668,762	28,022,916	N/A
CHF - COOK LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-2289120	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,813,896	41,339,091	N/A
CHF - COLLEGIATE HOUSING VICTORIA LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-3681022	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - COLLEGIATE HOUSING STEPHENVILLE III LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-2994648	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	7,432,030	74,640,315	N/A
CHF - COLLEGIATE HOUSING STEPHENVILLE II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4848255	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,884,868	35,935,708	N/A
CHF - COLLEGIATE HOUSING SAN ANTONIO I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-2371178	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,728,727	22,353,075	N/A
CHF - COLLEGIATE HOUSING ISLAND CAMPUS LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-1816268	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	7,896,133	89,634,753	N/A
CHF - COLLEGIATE HOUSING GALVESTON I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4881222	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	4,349,464	41,648,808	N/A

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

Form 990, Schedule R, Part I - Identification of Disregarded Entities					
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
CHF - COLLEGIATE HOUSING CORPUS CHRISTI II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-1951661	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,951,933	38,266,368	N/A
CHF - COLLEGIATE HOUSING CORPUS CHRISTI I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4867332	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,815,703	28,930,252	N/A
CHF - COLLEGIATE HOUSING COMMERCE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-4897746	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,508,955	32,892,313	N/A
CHF - COLLEGIATE HOUSING COLLEGE STATION I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4862462	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	10,333,612	99,189,864	N/A
CHF - CIA LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-3512639	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,881,218	13,956,005	N/A
CHF - ASHLAND LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 45-3727372	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	6,182,272	38,471,615	N/A
CHF-DELAWARE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 52-2236764	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	9,274,677	38,136,589	N/A
CHF - DES MOINES LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-8355661	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	
CH FOUNDATION - UNIVERSITY OF THE SCIENCES LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-4165568	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	
CHF - CHICAGO LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-2664576	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,349,972	117,826,720	
CHF - COLLEGIATE HOUSING DENTON LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-3240693	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	82,363,636	
CHF - DOVER LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-4275274	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	75,237,476	
CHF - ST DAVIDS LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-4894872	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,116,922	3,908,567	
CHF - DAVIS I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-3758340	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	
CHF - SANTA CRUZ I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-3747222	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	
CHF - DAVIE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-5078485	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	