

Form **990**  
Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
Open to Public Inspection

**A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: HOUSING VERMONT  
 Doing business as:  
 Number and street (or P O box if mail is not delivered to street address) Room/suite: 100 BANK STREET SUITE 400  
 City or town, state or province, country, and ZIP or foreign postal code: BURLINGTON, VT 05401

**D** Employer identification number: 03-0315075  
**E** Telephone number: (802) 863-8424  
**G** Gross receipts \$ 5,348,378

**F** Name and address of principal officer: JANET SPITLER, 100 BANK STREETSUITE 400, BURLINGTON, VT 05401

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀(insert no )  4947(a)(1) or  527

**J** Website: ▶ WWW HVT ORG

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: 1988 **M** State of legal domicile: VT

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities:  
 THE MISSION OF HOUSING VERMONT IS TO PRODUCE PERMANENTLY AFFORDABLE HOUSING AND ENABLE INVESTMENTS IN ECONOMIC AND COMMUNITY DEVELOPMENT TO BENEFIT VERMONTERS THROUGH PARTNERSHIPS WITH COMMUNITIES AND THE PRIVATE SECTOR

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	3	11
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4	11
<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	30
<b>6</b> Total number of volunteers (estimate if necessary)	6	0
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	7b	23,000

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	227,675	85,250
<b>9</b> Program service revenue (Part VIII, line 2g)	4,808,475	5,140,439
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	186,533	122,491
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,549	198
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,230,232	5,348,378
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,447,181	2,722,690
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,328,309	2,016,643
<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,775,490	4,739,333
<b>19</b> Revenue less expenses Subtract line 18 from line 12	454,742	609,045

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	11,861,612	12,477,630
<b>21</b> Total liabilities (Part X, line 26)	554,449	561,423
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	11,307,163	11,916,207

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

**Sign Here**

Signature of officer: \*\*\*\*\* Date: 2019-11-11

JANET SPITLER CHIEF FINANCIAL OFFICER  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: Preparer's signature: Date: Check  if self-employed PTIN: P01875413

Firm's name ▶ MCSOLEY MCCOY & CO Firm's EIN ▶ 03-0327374

Firm's address ▶ 118 TILLEY DRIVE STE 202 SOUTH BURLINGTON, VT 05403 Phone no (802) 658-1808

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission

THE MISSION OF HOUSING VERMONT IS TO PRODUCE PERMANENTLY AFFORDABLE HOUSING AND ENABLE INVESTMENTS IN ECONOMIC AND COMMUNITY DEVELOPMENT TO BENEFIT VERMONTERS THROUGH PARTNERSHIPS WITH COMMUNITIES AND THE PRIVATE SECTOR

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses \$ 4,425,296 including grants of \$ ) (Revenue \$ 5,140,637 )  
See Additional Data

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 4,425,296

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	Yes	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
<b>7</b> 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		No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
<b>9</b> Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		No
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	Yes	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
<b>f</b> 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	Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	Yes	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		No
<b>b</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		No
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> 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		No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		No

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and other IRS requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [ ]

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

<b>2a</b> 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 . . . . .		<b>2a</b>	30		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<b>2b</b>	Yes		
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .		<b>3a</b>		No	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . .		<b>3b</b>			
<b>4a</b> 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)? . . . . .		<b>4a</b>		No	
<b>b</b> If "Yes," enter the name of the foreign country <b>▶</b> _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		<b>5a</b>		No	
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>5b</b>		No	
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .		<b>5c</b>			
<b>6a</b> 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? . . . . .		<b>6a</b>		No	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		<b>6b</b>			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<b>a</b> 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? . . . . .		<b>7a</b>		No	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		<b>7b</b>			
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		<b>7c</b>		No	
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		<b>7d</b>			
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>7e</b>			
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		<b>7f</b>			
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		<b>7g</b>			
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .		<b>7h</b>			
<b>8 Sponsoring organizations maintaining donor advised funds.</b>					
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .		<b>8</b>			
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .		<b>9a</b>			
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .		<b>9b</b>			
<b>10 Section 501(c)(7) organizations.</b> Enter					
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .		<b>10a</b>			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		<b>10b</b>			
<b>11 Section 501(c)(12) organizations.</b> Enter					
<b>a</b> Gross income from members or shareholders . . . . .		<b>11a</b>			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .		<b>11b</b>			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?					
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year		<b>12b</b>			
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O		<b>13a</b>			
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .		<b>13b</b>			
<b>c</b> Enter the amount of reserves on hand . . . . .		<b>13c</b>			
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		<b>14a</b>		No	
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .		<b>14b</b>			
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .		<b>15</b>		No	
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .		<b>16</b>		No	

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 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?; 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?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 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.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [ ] Own website [ ] Another's website [x] Upon request [ ] Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 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: JANET SPITLER 100 BANK STREET SUITE 400 BURLINGTON, VT 054018411 (802) 861-3810

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) AMY DEMETROWITZ BOARD MEMBER	1 00	X						0	0	0
(2) SARAH PHILLIPS BOARD MEMBER	1 00	X						0	0	0
(3) CHARLIE BAKER BOARD MEMBER	1 00	X						0	0	0
(4) CHIP HART ASSISTANT TREASURER	1 00	X						0	0	0
(5) JANET SPITLER TREASURER	40 00	X		X				132,965	0	0
(6) JOHN VOGEL CHAIR	1 00	X						0	0	0
(7) MARC LANDRY SECRETARY	1 00	X		X				0	0	0
(8) MOLLY LAMBERT VICE CHAIR	1 00	X						0	0	0
(9) WALT GREINER BOARD MEMBER	1 00	X						0	0	0
(10) KAREN GLITMAN BOARD MEMBER	1 00	X						0	0	0
(11) KARYN HALE BOARD MEMBER	1 00	X						0	0	0
(12) LISA PATLIS BOARD MEMBER	1 00	X						0	0	0
(13) AMY DOHNER BOARD MEMBER	1 00	X						0	0	0
(14) KATHY BEYER VP - DEVELOPMENT	40 00			X				125,745	0	0
(15) NANCY OWENS PRESIDENT	40 00			X				169,257	0	0
(16) W ERIC SCHMITT VICE PRESIDENT, ASSET MANA	40 00			X				110,632	0	0



Part VIII Statement of Revenue

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

Table with 5 main columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a Federated campaigns (84,900), 1b Membership dues (350), 1c Fundraising events, 1d Related organizations, 1e Government grants, 1f All other contributions, and 1g Noncash contributions. Total for lines 1a-1f is 85,250.

Table for Program Service Revenue with 6 columns: Description, Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include 2a DEVELOPMENT FEES (1,969,308), 2b TAX CREDIT SYNDICATION (1,810,970), 2c MANAGEMENT FEES (860,500), 2d STATE TAX CREDITS (455,000), 2e CONSULTING INCOME (44,661), and 2f All other program service revenue. Total for lines 2a-2f is 5,140,439.

Table for Other Revenue with 5 main columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax. Rows include 3 Investment income (122,491), 4 Income from investment of tax-exempt bond proceeds, 5 Royalties, 6a-d Rental income/loss, 7a-d Net gain/loss from sales of assets, 8a-c Net income/loss from fundraising events, 9a-c Net income/loss from gaming activities, 10a-c Net income/loss from sales of inventory, 11a MISCELLANEOUS (198), and 12 Total revenue (5,348,378).

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	541,697	499,043	42,654	
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b> Other salaries and wages	1,627,549	1,499,387	128,162	
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .	82,466	75,972	6,494	
<b>9</b> Other employee benefits . . . . .	322,295	296,916	25,379	
<b>10</b> Payroll taxes . . . . .	148,683	136,975	11,708	
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management . . . . .	188,838	173,968	14,870	
<b>b</b> Legal . . . . .	29,090	26,799	2,291	
<b>c</b> Accounting . . . . .	59,687	54,987	4,700	
<b>d</b> Lobbying . . . . .				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees . . . . .				
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
<b>12</b> Advertising and promotion . . . . .	29,721	27,381	2,340	
<b>13</b> Office expenses . . . . .	38,246	35,234	3,012	
<b>14</b> Information technology . . . . .	79,465	73,208	6,257	
<b>15</b> Royalties . . . . .				
<b>16</b> Occupancy . . . . .	169,827	156,454	13,373	
<b>17</b> Travel . . . . .	51,243	47,208	4,035	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .	37,708	34,739	2,969	
<b>20</b> Interest . . . . .				
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	75,051	69,141	5,910	
<b>23</b> Insurance . . . . .	12,051	11,102	949	
<b>24</b> 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.)				
<b>a</b> INVESTMENT EXPENSES	455,000	455,000		
<b>b</b> BAD DEBT EXPENSE	296,285	296,285		
<b>c</b> NMTC THIRD PARTY	77,795	71,669	6,126	
<b>d</b> DUES AND SUBSCRIPTIONS	29,760	27,417	2,343	
<b>e</b> All other expenses	386,876	356,411	30,465	
<b>25</b> Total functional expenses. Add lines 1 through 24e	4,739,333	4,425,296	314,037	0
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	340,474	<b>1</b>	1,977,252
	<b>2</b> Savings and temporary cash investments . . . . .	853,402	<b>2</b>	1,487,988
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	2,239,007	<b>4</b>	2,792,316
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .	4,838,000	<b>7</b>	3,375,985
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	51,430	<b>9</b>	88,538
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	<b>10a</b> 741,521		
	<b>b</b> Less accumulated depreciation	<b>10b</b> 253,476	527,388	<b>10c</b> 488,045
	<b>11</b> Investments—publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .	390,440	<b>13</b>	353,735
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets See Part IV, line 11 . . . . .	2,621,471	<b>15</b>	1,913,771
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	11,861,612	<b>16</b>	12,477,630	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	354,890	<b>17</b>	326,699
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	199,559	<b>19</b>	234,724
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	554,449	<b>26</b>	561,423
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	11,307,163	<b>27</b>	11,916,207
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	11,307,163	<b>33</b>	11,916,207	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	11,861,612	<b>34</b>	12,477,630	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	5,348,378
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	4,739,333
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	609,045
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	11,307,163
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	11,916,207

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?  
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 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 Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>	Yes	
<b>3b</b>	Yes	

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 03-0315075

**Name:** HOUSING VERMONT

Form 990 (2018)

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**Form 990, Part III, Line 4a:**

FOSTERING LOW-INCOME HOUSING, AND COMMUNITY DEVELOPMENT, ALLEVIATION AND PREVENTION OF COMMUNITY DETERIORATION THROUGH THE PRODUCTION AND REHABILITATION OF AFFORDABLE HOUSING

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**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
 Attach to Form 990 or Form 990-EZ.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
HOUSING VERMONT

Employer identification number  
03-0315075

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ) )
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )
- 11  An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
  - f Enter the number of supported organizations \_\_\_\_\_
  - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)**

(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b>	<b>Total.</b> Add lines 1 through 3						
<b>5</b>	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)						
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b>	Amounts from line 4						
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b>	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )						
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						
<b>12</b>	Gross receipts from related activities, etc (see instructions)					<b>12</b>	

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	
<b>15</b>	Public support percentage for 2017 Schedule A, Part II, line 14	<b>15</b>	

- 16a 33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support test—2017.** 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—2018.** 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—2017.** 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 ▶

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

(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 organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	36,300	66,940	2,077,250	227,675	85,250	2,493,415
<b>2</b>	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	2,695,844	2,940,708	2,969,755	2,425,200	5,140,439	16,171,946
<b>3</b>	Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6</b>	<b>Total.</b> Add lines 1 through 5	2,732,144	3,007,648	5,047,005	2,652,875	5,225,689	18,665,361
<b>7a</b>	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</b>	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	1,063,484	1,739,663	666,361	1,209,577	1,108,133	5,787,218
<b>c</b>	Add lines 7a and 7b	1,063,484	1,739,663	666,361	1,209,577	1,108,133	5,787,218
<b>8</b>	<b>Public support.</b> (Subtract line 7c from line 6.)						12,878,143

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b>	Amounts from line 6	2,732,144	3,007,648	5,047,005	2,652,875	5,225,689	18,665,361
<b>10a</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	135,393	138,500	54,777	145,981	122,491	597,142
<b>b</b>	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b>	Add lines 10a and 10b	135,393	138,500	54,777	145,981	122,491	597,142
<b>11</b>	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b>	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	71	1,828	923	7,549	198	10,569
<b>13</b>	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	2,867,608	3,147,976	5,102,705	2,806,405	5,348,378	19,273,072
<b>14</b>	<b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b>	Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	66 820 %
<b>16</b>	Public support percentage from 2017 Schedule A, Part III, line 15	<b>16</b>	62 330 %

**Section D. Computation of Investment Income Percentage**

<b>17</b>	Investment income percentage for <b>2018</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	3 100 %
<b>18</b>	Investment income percentage from <b>2017</b> Schedule A, Part III, line 17	<b>18</b>	3 640 %

- 19a 33 1/3% support tests—2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests—2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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	No
<b>1</b>	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	<b>1</b>		
<b>2</b>	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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	<b>2</b>		
<b>3a</b>	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	<b>3a</b>		
<b>b</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 <b>Part VI</b> when and how the organization made the determination.		
	<b>3b</b>		
<b>c</b>	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		
	<b>3c</b>		
<b>4a</b>	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.		
	<b>4a</b>		
<b>b</b>	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	<b>4b</b>		
<b>c</b>	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 <b>Part VI</b> 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.		
	<b>4c</b>		
<b>5a</b>	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 <b>Part VI</b> , 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).		
	<b>5a</b>		
<b>b</b>	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	<b>5b</b>		
<b>c</b>	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
	<b>5c</b>		
<b>6</b>	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 <b>Part VI</b> .		
	<b>6</b>		
<b>7</b>	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).		
	<b>7</b>		
<b>8</b>	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).		
	<b>8</b>		
<b>9a</b>	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9a</b>		
<b>b</b>	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9b</b>		
<b>c</b>	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		
	<b>9c</b>		
<b>10a</b>	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	<b>10a</b>		
<b>b</b>	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	<b>10b</b>		

**Part IV Supporting Organizations** (continued)

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>b</b>	A family member of a person described in (a) above?		
<b>c</b>	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	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? <i>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.</i>		
<b>2</b>	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? <i>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.</i>		

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	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?		
<b>2</b>	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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b>	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> )		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b>	Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b>	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? <i>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.</i>	Yes	No
<b>b</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? <i>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.</i>		
<b>3</b>	Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ) See instructions	
<b>9</b> Distributable amount for 2018 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2018</b>	<b>(iii) Distributable Amount for 2018</b>
<b>1</b> Distributable amount for 2018 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
<b>3</b> Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013. . . . .			
<b>b</b> From 2014. . . . .			
<b>c</b> From 2015. . . . .			
<b>d</b> From 2016. . . . .			
<b>e</b> From 2017. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2018 distributable amount			
<b>i</b> Carryover from 2013 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2018 from Section D, line 7 \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
<b>6</b> Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
<b>7 Excess distributions carryover to 2019.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b> Excess from 2014. . . . .			
<b>b</b> Excess from 2015. . . . .			
<b>c</b> Excess from 2016. . . . .			
<b>d</b> Excess from 2017. . . . .			
<b>e</b> Excess from 2018. . . . .			

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 03-0315075

**Name:** HOUSING VERMONT

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

**Facts And Circumstances Test**

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527  
  
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
  
**2018**  
  
**Open to Public Inspection**

**If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**  
 ● Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C  
 ● Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B  
 ● Section 527 organizations Complete Part I-A only  
**If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**  
 ● Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B  
 ● Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A  
**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**  
 ● Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization HOUSING VERMONT	<b>Employer identification number</b> 03-0315075
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities (see instructions) \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check  if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures**  
(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals
--	----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?


Yes  No

**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b> Volunteers?		No	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
<b>c</b> Media advertisements?		No	
<b>d</b> Mailings to members, legislators, or the public?		No	
<b>e</b> Publications, or published or broadcast statements?		No	
<b>f</b> Grants to other organizations for lobbying purposes?		No	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
<b>i</b> Other activities?		No	
<b>j</b> Total Add lines 1c through 1i			0
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
PART II-B, LINE 1	PERSONNEL OF THE COMPANY MEET WITH LEGISLATORS AND THEIR STAFF AND ALSO PROVIDE TESTIMONY TO COMMITTEES IN ORDER TO EDUCATE AND PROVIDE FEEDBACK ON THE IMPACT OF EXISTING LAWS AS WELL AS PROPOSED LEGISLATION THAT BOTH DIRECTLY AND INDIRECTLY IMPACT THE HOUSING DELIVERY SYSTEM

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

# Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

**Name of the organization**  
HOUSING VERMONT

**Employer identification number**  
03-0315075

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year		

**5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

**6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

**1** Purpose(s) of conservation easements held by the organization (check all that apply)

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

**2** Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
<b>a</b> Total number of conservation easements	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	<b>2d</b>

**3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

**4** Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

**5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

**6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

**7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

**8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

**9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

**1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

**b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

**a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_

**b** Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- |  | Amount |
|--|--------|
| <b>c</b> Beginning balance             |        |
| <b>d</b> Additions during the year     |        |
| <b>e</b> Distributions during the year |        |
| <b>f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  Yes  No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . .

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
  - b** Permanent endowment ▶
  - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- |  |     |    |
|--|-----|----|
| <b>(i)</b> unrelated organizations . . . . .   | Yes | No |
| <b>(ii)</b> related organizations . . . . .  |     |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . |     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements		399,844	56,390	343,454
<b>d</b> Equipment . . . . .		341,677	197,086	144,591
<b>e</b> Other . . . . .				
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				488,045

**Part VII Investments—Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (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, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) INVESTMENT IN PRE-DEVELOPMENT PROJECT COSTS	1,913,771
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	1,913,771

**Part X Other Liabilities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	4,886,983
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	4,886,983
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	461,395	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	461,395
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	5,348,378

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	4,277,939
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	4,277,939
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	461,395	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	461,395
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .		<b>5</b>	4,739,334

**Part XIII Supplemental Information**

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

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 03-0315075

**Name:** HOUSING VERMONT

## Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE. IN ADDITION, THEY HAVE BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE. CONTRIBUTIONS TO THE ORGANIZATION QUALIFY FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER INTERNAL REVENUE CODE SECTION 170(B)(1)(A). FASB ASC 740, INCOME TAXES, REQUIRES ENTITIES TO DISCLOSE IN THEIR FINANCIAL STATEMENTS THE NATURE OF ANY UNCERTAINTY IN THEIR TAX POSITIONS. FOR TAX-EXEMPT ENTITIES, TAX-EXEMPT STATUS ITSELF IS DEEMED TO BE AN UNCERTAINTY, AS EVENTS COULD POTENTIALLY OCCUR TO JEOPARDIZE THEIR TAX-EXEMPT STATUS. MANAGEMENT BELIEVES THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS. THE ORGANIZATION ANTICIPATES THAT IT WILL NOT HAVE A CHANGE IN UNCERTAIN TAX POSITIONS DURING THE NEXT TWELVE MONTHS THAT WOULD HAVE A MATERIAL IMPACT ON THEIR CONSOLIDATED FINANCIAL STATEMENTS. IF NECESSARY, THE ORGANIZATION WOULD ACCRUE INTEREST AND PENALTIES ON UNCERTAIN TAX POSITIONS AS A COMPONENT OF THE PROVISION FOR INCOME TAXES. MANAGEMENT BELIEVES THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2015.

## Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	IMPAIRMENT LOSS ON INVESTMENTS 455,000 AMORTIZATION OF INVESTMENTS 6,395

## Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	IMPAIRMENT LOSS ON INVESTMENTS 455,000 AMORTIZATION OF INVESTMENTS 6,395

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

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

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
HOUSING VERMONT

Employer identification number

03-0315075

**Part I Questions Regarding Compensation**

	Yes	No								
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p><b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	<b>1b</b>									
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	<b>2</b>									
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Approval by the board or compensation committee									
<p><b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p> <p><b>a</b> Receive a severance payment or change-of-control payment?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	<b>4a</b>	No								
	<b>4b</b>	No								
	<b>4c</b>	No								
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p> <p><b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	<b>5a</b>	No								
	<b>5b</b>	No								
<p><b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	<b>6a</b>	No								
	<b>6b</b>	No								
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	<b>7</b>	No								
<p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	<b>8</b>	No								
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	<b>9</b>									



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**Part III**    **Supplemental Information**

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

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**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018****Open to Public Inspection**

Department of the Treasury

Name of the organization  
HOUSING VERMONT

Employer identification number

03-0315075

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	SEE EXPLANATION FOR LINE 7A

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	A PERSON OR LEGAL ENTITY MAY BE A MEMBER OF HOUSING VERMONT UPON PAYMENT OF THE ANNUAL MEMBERSHIP FEE MEMBERS HAVE CERTAIN VOTING RIGHTS MEMBERSHIP FEES ARE USED TO FURTHER THE MISSION OF HOUSING VERMONT

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION A, LINE 8B	NO SUCH OTHER COMMITTEES

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	SENIOR MANAGEMENT WILL REVIEW AND PRESENT TO THE FINANCE COMMITTEE WHO WILL APPROVE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	MANAGEMENT COLLECTS AND REVIEWS CONFLICT OF INTEREST DISCLOSURES

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION IS REVIEWED AND APPROVED BY THE APPROPRIATE SENIOR STAFF AND BOARD OF DIRECTORS

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	AVAILABLE IN HARD COPY AT THE HOUSING VERMONT OFFICE

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
HOUSING VERMONT

**Employer identification number**

03-0315075

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
<b>(1)</b> HV NONPROFIT 100 BANK STREET SUITE 400  BURLINGTON, VT 05401 03-0372157	PROMOTE AFFORDABLE HOUSING	VT	501(C)(3)	LINE 12B, II	N/A		No
<b>(2)</b> VERNON SENIOR HOUSING PO BOX 10540  BEDFORD, NH 03110 03-0319187	PROMOTE AFFORDABLE HOUSING	NH	501(C)(3)	LINE 12B, II	N/A		No
<b>(3)</b> PARSONS PLATFORM NETWORK INC 100 BANK STREET SUITE 400  BURLINGTON, VT 05401 82-4683893	PROMOTE AFFORDABLE HOUSING	VT	501(C)(3)	LINE 12B, II	N/A		No

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>1a</b> Yes	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	<b>1b</b> Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .	<b>1c</b>	No
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .	<b>1d</b> Yes	
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .	<b>1e</b>	No
<b>f</b> Dividends from related organization(s) . . . . .	<b>1f</b>	No
<b>g</b> Sale of assets to related organization(s) . . . . .	<b>1g</b>	No
<b>h</b> Purchase of assets from related organization(s) . . . . .	<b>1h</b>	No
<b>i</b> Exchange of assets with related organization(s) . . . . .	<b>1i</b>	No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>1j</b> Yes	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>1k</b> Yes	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>1l</b>	No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>1m</b>	No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>1n</b>	No
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>1o</b>	No
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .	<b>1p</b>	No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	<b>1q</b>	No
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .	<b>1r</b>	No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>1s</b>	No

**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 type (a-s)	(c) Amount involved	(d) Method of determining amount involved



**Part VII**    **Supplemental Information**

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

<b>Return Reference</b>	<b>Explanation</b>

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 03-0315075  
**Name:** HOUSING VERMONT

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) 1 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504285	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 010 %
(1) 10 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3885926	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 010 %
(2) 2 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504397	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 010 %
(3) 3 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504460	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 020 %
(4) 4 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504496	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 020 %
(5) 5 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504568	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 020 %
(6) 6 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504607	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 020 %
(7) 65 STATE STREET HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2073652	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		
(8) 7 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504639	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 010 %
(9) 8 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0504672	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		0 010 %
(10) ADDISON HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0352098	PROMOTE AFFORDABLE HOUSING	VT	HV 1995 INC	RELATED				No		Yes		0 500 %
(11) ALBURGH FAMILY HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-1810828	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		0 010 %
(12) ALGIERS FAMILY HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 80-0796822	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		0 010 %
(13) ARTHURS MAIN STREET HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-3078208	PROMOTE AFFORDABLE HOUSING	VT	HV 2011 INC	RELATED				No		Yes		0 010 %
(14) AVENUE APARTMENTS LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 80-0732720	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		0 010 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(16) AW RICHARDS HOUSING LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0219327	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		0 050 %
(1) BALDWIN BLOCK HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0370033	PROMOTE AFFORDABLE HOUSING	VT	HV 2001 INC	RELATED				No		Yes		0 050 %
(2) BELLOWS FALLS HOUSING LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-3294089	PROMOTE AFFORDABLE HOUSING	VT	HV 2008 INC	RELATED				No		Yes		2 500 %
(3) BEMIS BLOCK HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5178421	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		0 010 %
(4) BLACK RIVER HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2773689	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		
(5) BLAKE COMMONS HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0704002	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		0 010 %
(6) BOBBIN MILL LIMITED PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3901999	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		0 010 %
(7) BRANCHWOOD HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0229635	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		0 500 %
(8) BRHIP HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0352344	PROMOTE AFFORDABLE HOUSING	VT	HV 1995 INC	RELATED				No		Yes		0 500 %
(9) BROOKSIDE APARTMENTS LP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2985779	PROMOTE AFFORDABLE HOUSING	VT	HV 2007 INC	RELATED				No		Yes		2 500 %
(10) BUTLER HOUSE LIMITED PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0372116	PROMOTE AFFORDABLE HOUSING	VT	HV 2002 INC	RELATED				No		Yes		0 500 %
(11) CALLAHAN HSG LTDPSPH  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-4398566	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		0 050 %
(12) CANAL STREET HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0704071	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		0 050 %
(13) CEDARS EDGE APARTMENTS LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-3395203	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		0 050 %
(14) CHERRY STREET HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5408696	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		2 500 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(31) CITY NEIGHBORHOOD HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-1626357	PROMOTE AFFORDABLE HOUSING	VT	HV CITY KEY INC	RELATED				No		Yes		0 010 %
(1) COMMUNITY CAPITAL HOUSING VERMONT FUND 1 LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2383978	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(2) COMMUNITY CAPITAL HOUSING VERMONT FUND 2 LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 46-0596522	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(3) CREEKVIEW HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-1245556	PROMOTE AFFORDABLE HOUSING	VT	HV 2004 INC	RELATED				No		Yes		2 500 %
(4) DEWITT DRIVE LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-2598207	PROMOTE AFFORDABLE HOUSING	VT	HV 2011 INC	RELATED				No		Yes		0 010 %
(5) DORSET COMMUNITY HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-3107858	PROMOTE AFFORDABLE HOUSING	VT	HV 2004 INC	RELATED				No		Yes		0 010 %
(6) EASTERN TOWNSHIP HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5388651	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(7) ECHO HOUSING LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 55-0790873	PROMOTE AFFORDABLE HOUSING	VT	HV 2002 INC	RELATED				No		Yes		0 500 %
(8) ELLIS BLOCK HOUSING LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2759868	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		
(9) EXNER BLOCK HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0359206	PROMOTE AFFORDABLE HOUSING	VT	HV 1998 INC	RELATED				No		Yes		0 500 %
(10) FALLS HOUSING LIMITED PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-4985602	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(11) GRAND ISLE HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0492542	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		
(12) GREEN MTN HSG EQUITY FUND II LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2772928	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(13) GREEN MTN HSG EQUITY FUND III LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5950415	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(14) GREEN MTN HSG EQUITY FUND IV LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-4698723	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(46) GREEN MTN HSG EQUITY FUND V LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 80-0755201	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(1) GREEN MTN HSG EQUITY FUND 2003 LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 06-1693250	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(2) GROTON HSG LTD PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 06-1687666	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		0 050 %
(3) HARDWICK HSG PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0336228	PROMOTE AFFORDABLE HOUSING	VT	HV 1993 INC	RELATED				No		Yes		0 500 %
(4) HARRINGTON VILLAGE LP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1714812	PROMOTE AFFORDABLE HOUSING	VT	HV 2011 INC	RELATED				No		Yes		0 010 %
(5) HEDDING DRIVE HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0354590	PROMOTE AFFORDABLE HOUSING	VT	HV 1997 INC	RELATED				No		Yes		0 050 %
(6) HICKORY STREET HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 90-0893774	PROMOTE AFFORDABLE HOUSING	VT	HV FOREST PARK INC	RELATED				No		Yes		0 010 %
(7) HIGHGATE HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0328429	PROMOTE AFFORDABLE HOUSING	VT	HV HIGHGATE INC	RELATED				No		Yes		0 500 %
(8) HIGHLAND HILL HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0357098	PROMOTE AFFORDABLE HOUSING	VT	HV 1998 INC	RELATED				No		Yes		0 500 %
(9) HOLY CROSS SNR HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 04-3383945	PROMOTE AFFORDABLE HOUSING	VT	HV 1997 INC	RELATED				No		Yes		
(10) HOWARD BLOCK COMMERCIAL LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0117848	PROMOTE AFFORDABLE HOUSING	VT	HV 2002 INC	RELATED				No		Yes		0 500 %
(11) HOWARD BLOCK HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0372352	PROMOTE AFFORDABLE HOUSING	VT	HV HOWARD BLOCK INC	RELATED				No		Yes		
(12) JEFFERSONVILLE ALLOCD HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0370183	PROMOTE AFFORDABLE HOUSING	VT	HV 2001 INC	RELATED				No		Yes		0 500 %
(13) JEFFERSONVILLE BOND HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0370182	PROMOTE AFFORDABLE HOUSING	VT	HV 2001 INC	RELATED				No		Yes		0 050 %
(14) JOHNSON COMMUNITY HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0219226	PROMOTE AFFORDABLE HOUSING	VT	HV JOHN SHON INC	RELATED				No		Yes		0 010 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(61) KING STREET HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-1648957	PROMOTE AFFORDABLE HOUSING	VT	HV 2007 INC	RELATED				No		Yes		
(1) LAMOILLE VIEW HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1700079	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		0 010 %
(2) LINDEN TERRACE HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-8490540	PROMOTE AFFORDABLE HOUSING	VT	HV 2007 INC	RELATED				No		Yes		0 100 %
(3) MAPLE STREET HOUSING LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 61-1696199	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		
(4) MIDDLEBURY SOUTH HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5689766	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(5) MILL BROOK ALLOCATED HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2068633	PROMOTE AFFORDABLE HOUSING	VT	7921 GP INC	RELATED				No		Yes		
(6) MILL BROOK HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2068533	PROMOTE AFFORDABLE HOUSING	VT	HV MILL BROOK INC	RELATED				No		Yes		2 500 %
(7) MISSISQUOI MANOR HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0219460	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		2 500 %
(8) MORRISVILLE COMMUNITY HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-3554187	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		
(9) MORRISVILLE HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0345304	PROMOTE AFFORDABLE HOUSING	VT	HV 1993 INC	RELATED				No		Yes		0 050 %
(10) MOUNTAINVIEW ST JAY HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0229559	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		2 500 %
(11) NEWPORT FAMILY HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2773648	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		0 010 %
(12) ONE HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0343170	PROMOTE AFFORDABLE HOUSING	VT	HV 1993 INC	RELATED				No		Yes		50 000 %
(13) OVERLOOK HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0372631	PROMOTE AFFORDABLE HOUSING	VT	HV 2002 INC	RELATED				No		Yes		0 500 %
(14) PASSUMPSIC HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-0327267	PROMOTE AFFORDABLE HOUSING	VT	HV 2007 INC	RELATED				No		Yes		5 000 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(76) PINE MANOR HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0219546	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		
(1) PINE STREET HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-3966681	PROMOTE AFFORDABLE HOUSING	VT	HV 2008 INC	RELATED				No		Yes		0 500 %
(2) PLEASANT STREET HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-3281768	PROMOTE AFFORDABLE HOUSING	VT	HV 2008 INC	RELATED				No		Yes		2 500 %
(3) PORTLAND & MAIN HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0361429	PROMOTE AFFORDABLE HOUSING	VT	HV 1999 INC	RELATED				No		Yes		2 500 %
(4) PROCTORSVILLE GREEN HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-0327053	PROMOTE AFFORDABLE HOUSING	VT	HV 2007 INC	RELATED				No		Yes		0 010 %
(5) RAIL CITY FAMILY HOUSING LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 46-3836176	PROMOTE AFFORDABLE HOUSING	VT	HV 2013 INC	RELATED				No		Yes		
(6) RICHFORD COMMUNITY HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0364515	PROMOTE AFFORDABLE HOUSING	VT	HV 2001 INC	RELATED				No		Yes		2 500 %
(7) RIVER STATION HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2355479	PROMOTE AFFORDABLE HOUSING	VT	HV RIVER STATION INC	RELATED				No		Yes		
(8) ROARING BRANCH HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-3514715	PROMOTE AFFORDABLE HOUSING	VT	HV 2011 INC	RELATED				No		Yes		0 010 %
(9) ROUND BARN HSG PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2584582	PROMOTE AFFORDABLE HOUSING	VT	HV 2005 INC	RELATED				No		Yes		0 050 %
(10) RUTLAND COMMUNITY HOUSING 1 LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2528356	PROMOTE AFFORDABLE HOUSING	VT	HV FOREST PARK INC	RELATED				No		Yes		0 010 %
(11) SALMON RUN HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0667100	PROMOTE AFFORDABLE HOUSING	VT	HV 2009 INC	RELATED				No		Yes		
(12) SAXTONS RIVER HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0362277	PROMOTE AFFORDABLE HOUSING	VT	HV 1999 INC	RELATED				No		Yes		0 500 %
(13) SHELBURNE HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 13-4258897	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		
(14) SMALLEST CITY HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0463878	PROMOTE AFFORDABLE HOUSING	VT	HV 2002 INC	RELATED				No		Yes		2 500 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(91) SMITH HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0371438	PROMOTE AFFORDABLE HOUSING	VT	HV 2001 INC	RELATED				No		Yes		0 500 %
(1) SOUTHWVIEW HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-3455288	PROMOTE AFFORDABLE HOUSING	VT	HV 2005 INC	RELATED				No		Yes		0 010 %
(2) STONE HILL HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-3107791	PROMOTE AFFORDABLE HOUSING	VT	HV 2005 INC	RELATED				No		Yes		
(3) SWANTON SCHOOL HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0361169	PROMOTE AFFORDABLE HOUSING	VT	HV 1999 INC	RELATED				No		Yes		2 500 %
(4) SYLVAN WOODS HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5875519	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(5) TUTTLE BLOCK HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0804680	PROMOTE AFFORDABLE HOUSING	VT	HV 2004 INC	RELATED				No		Yes		0 010 %
(6) UPPER STORY HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-1866529	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		0 010 %
(7) VERGENNES HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0362236	PROMOTE AFFORDABLE HOUSING	VT	HV 1999 INC	RELATED				No		Yes		0 500 %
(8) WAITS RIVER HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-4272577	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(9) WALL STREET HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0030562	PROMOTE AFFORDABLE HOUSING	VT	HV 2002 INC	RELATED				No		Yes		0 050 %
(10) WATERFRONT HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 56-2338657	PROMOTE AFFORDABLE HOUSING	VT	HV WATERFRONT INC	RELATED				No		Yes		
(11) WAUGH OPERA HOUSE LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2111174	PROMOTE AFFORDABLE HOUSING	VT	HV 2004 INC	RELATED				No		Yes		0 050 %
(12) WELLS RIVER HSG LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 04-3383941	PROMOTE AFFORDABLE HOUSING	VT	HV 1997 INC	RELATED				No		Yes		0 500 %
(13) WEST RIVER VALLEY ASSISTED LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5689438	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(14) WEST RIVER VALLEY SUPPORTIVE LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1697483	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(106) WESTGATE ALLOCATED HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0370536	PROMOTE AFFORDABLE HOUSING	VT	HV WESTGATE INC	RELATED				No		Yes		
(1) WESTGATE BOND HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0367863	PROMOTE AFFORDABLE HOUSING	VT	HV WESTGATE INC	RELATED				No		Yes		
(2) WHARF LANE HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-3192578	PROMOTE AFFORDABLE HOUSING	VT	HV 2011 INC	RELATED				No		Yes		
(3) WHEELER BROOK HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2796829	PROMOTE AFFORDABLE HOUSING	VT	HV 2007 INC	RELATED				No		Yes		0 010 %
(4) WHITCOMB TERRACE HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-1359606	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		
(5) WHITCOMB WOOD HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1459700	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		0 500 %
(6) WILDER BLOCK HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-3927944	PROMOTE AFFORDABLE HOUSING	VT	HV 2005 INC	RELATED				No		Yes		0 050 %
(7) WILLARD MILL HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5950362	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(8) ARTHURS MAIN STREET HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-3078208	PROMOTE AFFORDABLE HOUSING	VT	HV 2011 INC	RELATED				No		Yes		0 010 %
(9) GREEN MOUNTAIN HOUSING EQUITY FUND VI LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 46-5482844	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No		Yes		0 010 %
(10) LADD HALL LIMITED PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-1002283	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		
(11) NORTH PLEASANT HOUSING 2 LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3910645	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		
(12) SAFFORD COMMONS HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-1504720	PROMOTE AFFORDABLE HOUSING	VT	HV 2014 INC	RELATED				No		Yes		
(13) 9 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1700925	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(14) 11 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3886239	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(121) 95 NORTH AVENUE LIMITED PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-5043069	PROMOTE AFFORDABLE HOUSING	VT	HV 2014 INC	RELATED				No		Yes		
(1) HICKORY STREET III HOUSING LP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 30-0945960	PROMOTE AFFORDABLE HOUSING	VT	H V FOREST PARK INC	RELATED				No		Yes		0 010 %
(2) PUTNEY LANDING LIMITED PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-4039910	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No		Yes		
(3) WOOLSON BLOCK LIMITED PARTNERSHIP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 61-1851251	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No		Yes		
(4) GEIGERS GROCERY  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0391900	PROMOTE AFFORDABLE HOUSING	VT	HV 2012 INC	RELATED				No		Yes		
(5) GROTON COMMERCIALLLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2653250	PROMOTE AFFORDABLE HOUSING	VT	HV 2003 INC	RELATED				No		Yes		50 000 %
(6) HOUSING PV I LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-1992086	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		100 000 %
(7) ROUND BARN SOLAR LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 81-1973371	PROMOTE AFFORDABLE HOUSING	VT	HV ENERGY 2015 INC	RELATED				No		Yes		1 000 %
(8) SEAVERS BROOK HOUSING LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-5107369	PROMOTE AFFORDABLE HOUSING	VT	HV 2014 INC	RELATED				No		Yes		50 000 %
(9) VERMONT INVESTOR FUND III LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-0795602	PROMOTE AFFORDABLE HOUSING	VT	HV 2006 INC	RELATED				No		Yes		
(10) 12 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0388563	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(11) 13 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1701864	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(12) 14 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3886494	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(13) 15 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 36-4742480	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(14) 16 VRV 2008 LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0388998	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(136) 17 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 61-1778264	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(1) 18 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 36-4825973	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(2) 19 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 30-0893376	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(3) 20 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 30-0893555	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(4) 21 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0483404	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(5) 22 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0483533	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(6) 23 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 36-4826782	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(7) 24 VRV 2008 LLC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0483864	PROMOTE AFFORDABLE HOUSING	VT	VERMONT RURAL VENTURES INC	RELATED				No		Yes		1 000 %
(8) APPLGATE APARTMENTS LIMITED PARTNERSHIP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 61-1786328	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No		Yes		
(9) ARMORY LANE HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-3385798	PROMOTE AFFORDABLE HOUSING	VT	HV 2010 INC	RELATED				No		Yes		
(10) BRIGHT STREET LIMITED PARTNERSHIP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-3435982	PROMOTE AFFORDABLE HOUSING	VT	HV 2013 INC	RELATED				No		Yes		0 010 %
(11) FRENCH BLOCK LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 30-0964734	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No		Yes		0 010 %
(12) GREEN STREET HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-4344382	PROMOTE AFFORDABLE HOUSING	VT	HV 2014 INC	RELATED				No		Yes		
(13) KELLEY'S FIELD LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-1267080	PROMOTE AFFORDABLE HOUSING	VT	HV 2014 INC	RELATED				No		Yes		
(14) MOOSE RIVER HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0369688	PROMOTE AFFORDABLE HOUSING	VT	H V 2001 INC	RELATED				No		Yes		2 500 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(151) OTTER CREEK HOUSING LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2068417	PROMOTE AFFORDABLE HOUSING	VT	HV 2008 INC	RELATED				No		Yes		
(1) RED CLOVER COMMONS LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-1267302	PROMOTE AFFORDABLE HOUSING	VT	H V RED CLOVER INC	RELATED				No		Yes		0 010 %
(2) SOUTH MEADOW APARTMENTS LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3992483	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No		Yes		0 010 %
(3) SUMMER STREET HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-3422977	PROMOTE AFFORDABLE HOUSING	VT	HV 2013 INC	RELATED				No		Yes		
(4) WEST RIVER VALLEY HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-5511186	PROMOTE AFFORDABLE HOUSING	VT	H V 2006 INC	RELATED				No		Yes		
(5) WINCHESTER PLACE LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-4440662	PROMOTE AFFORDABLE HOUSING	VT	H V 2014 INC	RELATED				No		Yes		
(6) BATTENKILL NORTH 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 81-3971646	PROMOTE AFFORDABLE HOUSING	VT	HV 2014 INC	RELATED				No		Yes		
(7) BENNINGTON HISTORIC LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-5407698	PROMOTE AFFORDABLE HOUSING	VT	RAHC HOUSING INC	RELATED				No			No	
(8) HUCKLE HILL HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-1656458	PROMOTE AFFORDABLE HOUSING	VT	VERNON SENIOR HOUSING INC	RELATED				No			No	
(9) JEUDENVINE HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 61-1859429	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No			No	
(10) LAURENTIDE HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 37-1870587	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No			No	
(11) MONUMENT VIEW LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0542882	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No			No	0 010 %
(12) NORTH BRANCH APTS LP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-4008514	PROMOTE AFFORDABLE HOUSING	VT	HV 2008 INC	RELATED				No			No	0 010 %
(13) RICHFORD COMMUNITY HOUSING LTD PSHP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0344879	PROMOTE AFFORDABLE HOUSING	VT	HV 2001 INC	RELATED				No			No	2 500 %
(14) TAYLOR STREET HLP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 82-4838642	PROMOTE AFFORDABLE HOUSING	VT	HV 2018 INC	RELATED				No			No	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
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							Yes	No		Yes	No	
(166) WENTWORTH COMMUNITY HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 82-4954891	PROMOTE AFFORDABLE HOUSING	VT	HV 2018 INC	RELATED				No			No	
(1) GREEN MTN HSG EQUITY FUND VII LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-4100407	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No			No	
(2) GREEN MTN HSG EQUITY FUND 8 LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 82-1228850	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No			No	
(3) COMMUNITY CAPITAL HOUSING VERMONT FUND 3 LP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-4297318	PROMOTE AFFORDABLE HOUSING	VT	GREEN MTN HSG EQUITY FUND INC	RELATED				No			No	
(4) DOWNTOWN CROSSING  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-1216236	PROMOTE AFFORDABLE HOUSING	VT	RAHC HOUSING INC	RELATED				No			No	
(5) GARDEN STREET HSG LTD PSHP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-4344382	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No			No	
(6) HARTFORD SCATTERED SITES LP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-3928887	PROMOTE AFFORDABLE HOUSING	VT	TWIN PINES HOUSING TRUST	RELATED				No			No	
(7) EVERGREEN PLACE HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0943494	PROMOTE AFFORDABLE HOUSING	VT	CENTRAL VT COMMUNITY LAND TRUST	RELATED				No			No	
(8) MANCHESTER COMMONS HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0430098	PROMOTE AFFORDABLE HOUSING	VT	RAHC HOUSING INC	RELATED				No			No	
(9) PLEASANT HILLS LP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 32-0516868	PROMOTE AFFORDABLE HOUSING	VT	HV 2016 INC	RELATED				No			No	
(10) STANISLAUS HLP  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-2697338	PROMOTE AFFORDABLE HOUSING	VT	HOUSING TRUST OF RUTLAND COUNTY	RELATED				No			No	
(11) HVT SOLAR LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-4498960	PROMOTE AFFORDABLE HOUSING	VT	HV ENERGY 2015 INC	RELATED				No			No	
(12) NEW DEPOT LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 82-4911447	PROMOTE AFFORDABLE HOUSING	VT	HV NONPROFIT INC	RELATED				No			No	
(13) SAFFORD REAL ESTATE LLC  100 BANK STREET SUITE 400 BURLINGTON, VT 05401 47-1887406	PROMOTE AFFORDABLE HOUSING	VT	HV NONPROFIT INC	RELATED				No			No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) 7921 GP INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2637398	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(1) GREEN MOUNTAIN HOUSING EQUITY FUND INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 06-1693248	PROMOTE AFFORDABLE HOUSING	VT	N/A	C			100 000 %		No
(2) HV 1993 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0336226	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(3) HV 1995 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0346602	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(4) HV 1997 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 04-3383390	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(5) HV 1998 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0357097	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(6) HV 1999 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0359205	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(7) HV 2000 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0363469	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(8) HV 2001 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0368317	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(9) HV 2002 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0372115	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(10) HV 2003 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 55-0820560	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(11) HV 2004 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0764924	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(12) HV 2005 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-3107721	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(13) HV 2006 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-4256779	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(14) HV 2007 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-8490471	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(16) HV 2008 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2063486	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(1) HV 2009 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0165568	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(2) HV 2010 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-1866459	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(3) HV 2011 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-2301545	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(4) HV 2012 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 46-0596701	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(5) HV CITY KEY INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-4115155	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(6) HV ENERGY 2010 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 45-3732544	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(7) HV ESSEX INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-4060495	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(8) HV FOREST PARK INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-3405441	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(9) HV FUND MANAGER INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2445908	PROMOTE AFFORDABLE HOUSING	VT	N/A	C			100 000 %		No
(10) HV GENERALS CORP 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0322504	PROMOTE AFFORDABLE HOUSING	VT	N/A	C			100 000 %		No
(11) HV HIGHGATE INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0327183	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(12) HV HOWARD BLOCK INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0095646	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(13) HV JOHNSON INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 27-0218999	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(14) HV LIMITED INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-3622398	PROMOTE AFFORDABLE HOUSING	VT	N/A	C			100 000 %		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(31) HV MILL BROOK INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-2068331	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(1) HV RIVER STATION INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-2452901	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(2) HV WATERFRONT INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 04-3763442	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(3) HV WESTGATE INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 03-0367862	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(4) HV WESTMINSTER INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 20-0740329	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(5) VERMONT RURAL VENTURES INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 26-1875850	PROMOTE AFFORDABLE HOUSING	VT	N/A	C			100 000 %		No
(6) HV ENERGY 2015 INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 38-3974625	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No
(7) HV RED CLOVER INC 100 BANK STREET SUITE 400 BURLINGTON, VT 05401 30-0833180	PROMOTE AFFORDABLE HOUSING	VT	HV GENERALS CORP	C			100 000 %		No