For Paperwork Reduction Act Notice, see the separate instructions.

Department of the

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

DLN: 93493134027611

2019

Open to Public Inspection

Treasu		enue Service	► Go to <u>www.irs.</u>	gov/Form990 for instructions and ti	ne latest infor	mation.		Inspection
			⊥ alendar year, or tax year beg	jinning 07-01-2019 , and ending 06	i-30-2020			
		applicable:	C Name of organization			D Employer	identifi	ication number
		change	COLLEGIATE HOUSING FOUNDAT	ION		63-117342	25	
□Na		٠ ا	Doing business as			_		
☐ Ini		rn/terminated	g					
		d return		mail is not delivered to street address) Room	ı/suite	E Telephone r	number	
□ Ар	plicati	ion pending	PO BOX 1385			(251) 928	-9340	
			City or town, state or province, co FAIRHOPE, AL 365331385	ountry, and ZIP or foreign postal code				
			<u> </u>			G Gross recei	pts \$ 19	12,936,879
			F Name and address of princi BRIAN M BLAKENEY	ipal officer:	H(a) Is t	his a group retur	n for	
			POST OFFICE BOX 1385			ordinates? all subordinates		☐Yes ☑No
			FAIRHOPE, AL 365331385			uded?		☐ Yes ☐No
I la	x-exei	mpt status:	✓ 501(c)(3) □ 501(c)()	\blacktriangleleft (insert no.) \square 4947(a)(1) or \square 527	l l	No," attach a list	•	•
J W	ebsit	te:▶ WW	/W.COLLEGIATEHOUSING.ORG		H(c) Gro	up exemption nu	ımber	>
					1 V	mation: 1996 M	l C+-+- :	of legal domicile: AL
K Forr	n of o	rganization	Corporation Trust As	ssociation L Other >	L fear of for	madon. 1996	State	on legal doffliche. AL
Pa	art I	Sum	mary					
			scribe the organization's mission	or most significant activities:				
		(A)THE OF	RGANIZATION IS ORGANIZED E	XCLUSIVELY FOR CHARITABLE, RELIGIO				
				U.S. INTERNAL REVENUE CODE OF 198 FOR ITS ENROLLED STUDENTS; AND (2				
၁င	l i	FURTHER	THEIR EDUCATIONAL MISSIONS	FOR ITS ENROLLED STUDENTS; AND (2)	OTHERWISE A	SSISTING EACH	OF ITS	5 MEMBERS TO
naf	:							
Ven								
Activities & Governance	<u> </u>	Charle No.	·	dia anakia and ika-anakia ana dia anakia	.f	:0/ -f:tt		
ಸ				discontinued its operations or disposed on the continued its operations or disposed on the continue to the con		• of its net asse	ets. 3	7
Sec	l		•	of the governing body (Part VI, line 1b)			4	6
Ĭ	l			calendar year 2019 (Part V, line 2a)			5	5
ACI	l			necessary)			6	0
	7a	Total unr	elated business revenue from P	art VIII, column (C), line 12			7a	42,753
	l			om Form 990-T, line 39			7b	. 0
				·	Р	Prior Year		Current Year
٥.	8	Contribut	ions and grants (Part VIII, line 1	h)		(
ēnuē vē:	9	Program	service revenue (Part VIII, line 2	2g)		170,772,038	3	189,633,664
βΛċ	10	Investme	nt income (Part VIII, column (A)), lines 3, 4, and 7d)		-7,390,125	5	3,092,221
α.	11	Other rev	enue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)		4,24:	L	42,753
	12	Total rev	enue—add lines 8 through 11 (r	must equal Part VIII, column (A), line 12)		163,386,154	4	192,768,638
	13	Grants ar	nd similar amounts paid (Part IX	, column (A), lines 1–3)		184,297	7	(
	14	Benefits	paid to or for members (Part IX,	column (A), line 4)		((
88	15	Salaries,	other compensation, employee	benefits (Part IX, column (A), lines 5-10)	1,377,337	7	1,959,549
Expenses	16a	Professio	nal fundraising fees (Part IX, co	lumn (A), line 11e)		(ו	(
edo	Ь	Total fundr	aising expenses (Part IX, column (D	v), line 25) ▶0				
ū	17	Other exp	oenses (Part IX, column (A), line	es 11a-11d, 11f-24e)		179,936,288	3	213,645,144
	18	Total exp	enses. Add lines 13–17 (must e	equal Part IX, column (A), line 25)		181,497,922	2	215,604,693
	19	Revenue	less expenses. Subtract line 18	from line 12		-18,111,768	3	-22,836,055
88					Beginnir	ng of Current Yea	r	End of Year
Net Assets or Fund Balances		-	-t- (D-4)/ !! - 45)			2 406 277 77	_	2 70 / 55 5 5 5
Ass I Ba	l					2,486,277,258	+	2,794,520,597
E E	l		, ,			2,644,069,477	+	2,983,040,705
			s or fund balances. Subtract line	e 21 from line 20		-157,792,219	7	-188,520,108
	rt II		ature Block	amined this return, including accompany	ing schodulos a	nd statements	and to	the best of my
know	edge	and belie		ete. Declaration of preparer (other than o				
any k	nowle	edge.						
		*****	*		2	021-05-14		
Sign		Signati	ure of officer			ate		
Here		BRIAN	M BLAKENEY CFO					
			r print name and title					
		P	rint/Type preparer's name	Preparer's signature	Date	heck if PO1		7
Paid	t				1 2021 00 10 1	neck பா P01 elf-employed	343147	
Pre		er 🕝	irm's name WILKINS MILLER LL	С	F	ïrm's EIN ▶ 27-03.	55040	
Use		H	irm's address ▶ PO BOX 70047		P	hone no. (251) 410	0-6700	
		-	MOBILE, AL 36670]			
			·					
May t	ne IR	KS discuss	this return with the preparer sh	nown above? (see instructions)			⊻ Y	es 🗌 No

Cat. No. 11282Y

Form **990** (2019)

Forn	1 990 (2019	9)					Pag	je 2
Pa	art III St	tatement (of Program Serv	ice Accomplis	hments			
	Ch	neck if Sched	lule O contains a res	ponse or note to a	any line in this Part III]
1	Briefly de	scribe the or	ganization's mission	:				
ŠÉC' MEM	TION 501(C	C)(3) OF THE ROVIDE HOU	U.S. INTERNAL REV	ENUE CODE OF 19	986 (THE CODE) INCLU	ID EDUCATIONAL PURPOSES IDING FOR SUCH PURPOSES SSISTING EACH OF ITS MEN	:(1)ASSISTING EACH OF ITS	<u> </u>
2		-	undertake any signific		vices during the year w	hich were not listed on	. □Yes ☑No	_
	If "Yes," o	describe thes	se new services on S	chedule O.				
3	Did the or	rganization o	ease conducting, or	make significant	changes in how it cond	ucts, any program		
	services?						. 🗆 Yes 🗹 No	,
	If "Yes," o	describe thes	se changes on Sched	ule O.				
4	Section 50	01(c)(3) and		tions are required	to report the amount of	largest program services, as of grants and allocations to c		
	(Code:) (Expenses \$	80,611,080	including grants of \$) (Revenue \$	70,942,918)	
	See Additio	onal Data) (EXPONDED \$, (1.0.01.00 ¢		
4b	(Code:) (Expenses \$	13,311,804	including grants of \$) (Revenue \$	13,016,762)	_
	See Additio	onal Data						_
4c	(Code:) (Expenses \$	15,296,658	including grants of \$) (Revenue \$	13,324,318)	_
	See Additio	onal Data						
	See Addit	tional Data T	able able					_
4d		-	es (Describe in Sche	•				
	(Expense	:s \$	103,894,639 in	cluding grants of	\$) (Revenue \$	90,343,378)	
4e	Total pro	ogram serv	ice expenses ▶	213,114,1	81			

Form	990 (2019)			Page 3
Par	t IV Checklist of Required Schedules			
n		/	Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	'	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part 5	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1 '	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	\Box		

business, investment, and program service activities outside the United States, or aggregate foreign investments

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

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

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

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

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

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

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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14b

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20a

20b

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Yes

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Form **990** (2019)

Part	IV Checklist of Required Schedules (continued)			
	Checking of Regular Caronical (continued)			
_	D. I		Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
•	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
•	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b .	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
art				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No

1b

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

0

1c

Yes

01111	Chatamanta Barandina Othan IDC Filings and Tan Campliana (continued)			rage 3
	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3а	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).			
	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?			No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

orm	990 (2019)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	" respo	onse to	lines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 2			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶ OR , CA , IL , PA			
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.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
	policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			

Part VII

П

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

(0)

- 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. See instructions for the order in which to list the persons above.

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	than o	one bo	ox, t an of tor/t	ot che unles fficer trust		rson a	from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
(1) WILLIAM B GIVHAN COO/PRESIDENT	40.00	x		х				617,100	0	54,763
(2) THOMAS M DALY DIRECTOR	1.50	×			_			25,000	0	0
(3) ROBERT A SHEARER DIRECTOR	1.50	×						25,000	0	0
(4) LEEMAN H COVEY SECRETARY (INCOMING)	20.00			х				25,000	0	0
(5) JOHN BROOKS SLAUGHTER TREASURER	1.50	×		х				25,000	0	0
(6) JOHN B HICKS VICE PRESIDENT	1.50	×		х				25,000	0	0
(7) HON JACK EDWARDS SECRETARY (OUTGOING)	1.50	×		х				18,750	0	0
(8) JANET BROWN VP FOR ADMIN/ASST SECRETARY	40.00			х				215,750	0	29,794
(9) BRIAN M BLAKENEY CHIEF FINANCIAL OFFICER	40.00			х				200,000	0	18,311
(10) LYN R CONE VP FOR COMPLIANCE	40.00				х			215,750	0	15,980
(11) SELINA SIMPSON VICE PRESIDENT OF INSURANCE AND RISK MANAGEMENT	40.00	1				х		123,077	0	4,997
					\vdash	<u> </u>	-			
				\Box	F					
			Щ.	Щ	丄		Щ'			Form 990 (2019)

r ai	Section A. Officers, Direct	ors, musicus	,,, .	<u> Pi</u>	Oye	:05,	anu	ıııgı	lest compen	sate	d Lilipioyees (COITE	mucuj	
	(A) Name and title	(B) Average hours per week (list any hours	is b	one bo	ox, u in off	t che unles ficer	ss pers	son	(D) Reportable compensati from the organizatio	on n	(E) Reportable compensation from related organizations		Estima amount o compens from	ated of other sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099 MISC)	}-	(W-2/1099- MISC)		organizati relat organiza	ed
			\$\frac{1}{2}	rustee		*	ensated							
				_										
	Sub-Total			<u></u>			•							
_	otal from continuation sheets to Pa	•			•		▶		1 515 12	_		_		122.245
2	Total (add lines 1b and 1c) Total number of individuals (including of reportable compensation from the compensation from th		to thos			bove	e) who	rec	1,515,42 eived more tha			0		123,845
3	Did the organization list any former of line 1a? If "Yes," complete Schedule J			ee, k	ey e	mpl	oyee,	or hi	ghest compens	ated	employee on	3	Yes	No No
4	For any individual listed on line 1a, is organization and related organizations individual										the	4	Yes	110
5	Did any person listed on line 1a receiv services rendered to the organization?	?If "Yes," compl										5		No
	ction B. Independent Contract													
1	Complete this table for your five higher from the organization. Report compen											npen	sation	
	Names	(A)								Deser	(B)		(C	
BENCI	HMARK CONTRACTORS	ind business addre	:55						CONST		iption of services ION		Compen 125	,337,433
SANTA	OCEAN PARK BLVD A MONICA, CA 90405													
4401	BUILDING COMPANY LLC WILSON BLVD STE 600 IGTON, VA 22203								CONST	RUCI	ION		95	,915,818
	OUR BEATTY CONSTRUCTION LLC IAIN STREET STE 1100								CONST	RUCT	ION		33	,529,808
HILL 8	WORTH, TX 76102 & WILKINSON CONSTRUCTION GROUP								CONST	RUCT	ION		33,	,208,501
RICHA	TELECOM PKWY STE 120 RDSON, TX 75082 SEN CONSTRUCTION COMPANY								CONST	RUCT	ION		31,	,309,003
	TEEL WAY													
LANCA	ASTER, PA 17604													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 59

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

Form 9 Part		(2019) Statement	of F	Revenue						Page 9
		Check if Scheo	dule	O contains a	respo	onse or note to any	/ line in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
0	1:	a Federated campa	igns	· .	1 a			revenue		312 - 314
tributions, Gifts, Grants Other Similar Amounts		b Membership dues	5.	. [1 b					
67.2 M		c Fundraising even	ts .	[1c					
ifts, ar A		d Related organizat	tions	· [1 d					
m; <u>G</u>		e Government grants	(con	tributions)	1e					
ions		f All other contributio and similar amounts	ns, g s not	ifts, grants, included	1f					
but fe		aboveg Noncash contributio	ns in	Cluded in						
Contributions, and Other Sim		lines 1a - 1f:\$		L	1g					
Cont		h Total. Add lines :	1a-1	f	•	>				
						Business Code	180,896,113	180,896,113		
æ	2a	RENTAL INCOME				611310	160,690,113	160,696,113		
Program Service Revenue	b	MISCELLANEOUS INC	ОМЕ			611310	2,834,252	2,834,252		
æ	,	SALES TYPE LEASE					2,687,127	2,687,127		
vice						611310				
Š	d	CONVENIENCE INCOM	МE			611310	2,006,288			2,006,288
Iran	е	FEES/FORFEITED DEF	POSI	TS		611310	1,122,571	1,122,571		
P						-	87,313	07.212		
	f	All other program	serv	rice revenue.			87,313	87,313		
		Total. Add lines 2				189,633,664		Т	Г	Γ
	3	Investment income similar amounts)	(inc	luding divide	nds, i •	nterest, and other	1,384,329	P		1,384,329
		Income from invest	mer	nt of tax-exer	npt b	ond proceeds	1,787,86	5		1,787,865
	5	Royalties	_ •	(i) Rea		(ii) Personal	<u> </u>			
				(I) Kea	1	(II) Personal				
		Gross rents Less: rental	6a	1	31,021	L				
		expenses	6b		88,268	3				
	С	Rental income or (loss)	6c		42,753	3				
	ď	Net rental income	or		•	1	42,75	3	42,753	
				(i) Securi	ties	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a							
	b	Less: cost or other basis and sales expenses	7b			79,97	73			
	С	Gain or (loss)	7 c			-79,97	<i>'</i> 3			
		d Net gain or (loss)				•	-79,973	3		-79,973
ņe	Od	Gross income from fu (not including \$		of						
ĕ		contributions reported See Part IV, line 18	on •	line 1c).	8a					
æ	Ł	Less: direct expen	ses		8b					
Other Revenue	•	Net income or (los	s) fr	om fundraisi	ng ev	ents	_			
	9a	Gross income from								
	_	See Part IV, line 19			9a					
		Less: direct expen Net income or (los			9b activit	ies 🕨				
			-,	gag						
	10	a Gross sales of inve returns and allowa			10a					
	Ł	Less: cost of good	s so	ld	10b					
		Net income or (los			invent	cory ►				
		Miscellaneo	us R	evenue		Business Code				
	11	La								
	Ŀ					•				
	•									
	(
	•	All other revenue	•							
	•	Total. Add lines 1	1a-:	11d		•				
	12	2 Total revenue. S	ee ir	nstructions .			192,768,638	187,627,376	42,753	5,098,509
							. ,			Form 990 (2019)

Forn	1 990 (2019)				Page 10
Pa	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must co		_		ımn (A).
	Check if Schedule O contains a response or note to an	y line in this Part IX			<u> U</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,882,350		1,882,350	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	77,199		77,199	
11	Fees for services (non-employees):				
a	Management	22,047,150	22,047,150		
b	Legal	388,269	352,954	35,315	
c	Accounting	834,757	713,087	121,670	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	249,845	249,845		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	562,997	562,997		
12	Advertising and promotion	570,163	568,453	1,710	
13	Office expenses	1,509,443	1,491,423	18,020	
14	Information technology	5,990		5,990	
15	Royalties				
16	Occupancy	51,017,472	50,976,922	40,550	
17	Travel	282,710	235,475	47,235	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest	71,799,554	71,799,554		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	55,178,321	55,174,176	4,145	
23	Insurance	4,389,565	4,250,952	138,613	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a MISCELLANEOUS	2,946,316	2,828,601	117,715	
i	b BAD DEBT	953,130	953,130		
•	DEMOLITION EXPENSE	495,499	495,499		
•	d PREOPENING COSTS	413,963	413,963		
•	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	215,604,693	213,114,181	2,490,512	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

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Liabilities 22

Fund Balances

ō 29

Assets 30 Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

or family member of any of these persons

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here ▶

Organizations that do not follow FASB ASC 958, check here ▶

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

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Beginning of year

4,991,090

27.114.080

496,549,309

117,711,505

14,240,185

54,657,671

5,355,663

2.644.069.477

-157,792,219

-157,792,219

2,486,277,258

2.452.104.453

2,486,277,258

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Page 11

7,541,236

1,207,343,541

422,540,371

780,160,745

154,923,918

4,773,527

52,371,288

117,417,894

2.983.040.705

-188,520,108

-188,520,108

2,794,520,597

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2.653.554.078

2,794,520,597

(B)

End of year

Cash-non-interest-bearing	11,898,175	1	16,876,928
Savings and temporary cash investments	1,032,998,678	2	308,740,100
Pledges and grants receivable, net		3	
Accounts receivable, net	2,861,330	4	2,580,842
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), and persons described in section $4958(c)(3)(B)$.		6	
Notes and loans receivable, net		7	48,736,834
Inventories for sale or use		R	

Loans and o section 4958 Notes and lo Assets Inventories for sale or use . Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other 10a 1,535,090,573 basis. Complete Part VI of Schedule D 10b 327,747,032 909,864,596 b Less: accumulated depreciation 11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . 13 Investments—program-related. See Part IV, line 11

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

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Nο

Form 990 (2019)

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

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 63-1173425

Name: COLLEGIATE HOUSING FOUNDATION

Form 990 (2019)

Form 990, Part III, Line 4a:

PROVIDE 5,163 BED STUDENT HOUSING FACILITY IN IRVINE, CA FOR UNIVERSITY OF CALIFORNIA IRVINE

Form 990, Part III, Line 4b: PROVIDE 1,790 BED STUDENT HOUSING FACILITY IN CORPUS CHRISTI, TX FOR TEXAS A&M UNIVERSITY

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

others, the total expenses, and revenue, if any, for each program service reported.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

(Code: (Expenses \$ 4.524.447 including grants of \$ (Revenue \$ 4,952,219

PROVIDE 516 BED STUDENT HOUSING FACILITY IN ELON, NC FOR ELON UNIVERSITY

(Code: including grants of \$ (Revenue \$) (Expenses \$ 2.111,330 1,981,592

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

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

PROVIDE 161 BED STUDENT HOUSING FACILITY IN HYDE PARK, NY FOR CULINARY INSTITUTE OF AMERICA

others, the total expenses, and revenue, if any, for each program service reported.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

(Code: (Expenses \$ 4,496,945 including grants of \$ (Revenue \$ 1,453,143

PROVIDE 312 BED STUDENT HOUSING FACILITY IN BURLINGTON, VT FOR THE UNIVERSITY OF VERMONT

(Code: including grants of \$ (Revenue \$) (Expenses \$ 1.765,911 1,590,110

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 6,687,475 including grants of \$ (Revenue \$ 6,318,524

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

1,115,433

PROVIDE 177 BED STUDENT HOUSING FACILITY IN ALBANY, NY FOR THE ALBANY COLLEGE OF PHARMACY

including grants of \$

(Revenue \$

1,188,924

(Code:

) (Expenses \$

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 953,953 including grants of \$ (Revenue \$ 1,114,965

PROVIDE 180 BED STUDENT HOUSING FACILITY IN ST. DAVIDS, PA FOR EASTERN UNIVERSITY

(Code: including grants of \$ (Revenue \$) (Expenses \$ 590,060 808,217

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

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 3,171,044 including grants of \$ (Revenue \$ 3,214,969

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

(Code: including grants of \$ (Revenue \$) (Expenses \$ 4.935,022 4,316,181

PROVIDE 612 BED STUDENT HOUSING FACILITY IN GALVESTON, TX FOR TEXAS A&M UNIVERSITY AT GALVESTON.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 5,620,927 including grants of \$ (Revenue \$ 4,518,600 PROVIDE 492 BED STUDENT HOUSING FACILITY IN TOLEDO, OH FOR THE UNIVERSITY OF TOLEDO

(Code: including grants of \$ (Revenue \$

2,939,034

4,320,159

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

) (Expenses \$

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

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 3,988,559 including grants of \$ (Revenue \$ 3,834,640 PROVIDE 582 BED STUDENT HOUSING FACILITY IN STEPHENVILLE, TX FOR TARLETON STATE UNIVERSITY - PHASE II

(Code: including grants of \$ (Revenue \$) (Expenses \$ 5,003,393 4,117,271

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

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

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 4,531,692 including grants of \$ (Revenue \$ 3,628,232)

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

(Code: including grants of \$ (Revenue \$) (Expenses \$ 7,287,812 7,545,857

PROVIDE 1.060 BED STUDENT HOUSING FACILITY IN STEPHENVILLE, TX FOR TARLETON STATE UNIVERSITY - PHASE III

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

) (Expenses \$

(Code:

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 2,990,957 including grants of \$ (Revenue \$ 2,765,267

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

2,990,501

PROVIDE 382 BED STUDENT HOUSING FACILITY IN SAN ANTONIO, TX FOR TEXAS A&M UNIVERSITY - SAN ANTONIO

including grants of \$

(Revenue \$

2,729,579

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

) (Expenses \$

(Code:

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 2.848.443 including grants of \$ (Revenue \$ 2,607,410)

PROVIDE 496 BED STUDENT HOUSING FACILITY IN COMMERCE, TX FOR TEXAS A&M UNIVERSITY - COMMERCE

8,393,770

PROVIDE 548 BED STUDENT HOUSING FACILITY IN CHICAGO, ILLINOIS FOR UNIVERSITY OF ILLINOIS - CHICAGO

including grants of \$

(Revenue \$

7,801,574

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 12,304,030 including grants of \$ (Revenue \$ 11,055,663

PROVIDE 1,274 BED STUDENT HOUSING FACILITY IN COLLEGE STATION, TX FOR TEXAS A&M UNIVERSITY

(Code: including grants of \$ (Revenue \$) (Expenses \$ 6,398,734 4,668,913

PROVIDE 875 BED STUDENT HOUSING FACILITY IN DENTON, TX FOR TEXAS WOMAN'S UNIVERSITY

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ 5,996,133 including grants of \$ (Revenue \$ 5,189,529

PROVIDE 620 BED STUDENT HOUSING FACILITY IN DOVER, DE FOR DELAWARE STATE UNIVERSITY

(Code: including grants of \$ (Revenue \$) (Expenses \$ 289,741

PROVIDE 3,290 BED STUDENT HOUSING FACILITY IN DAVIS, CA FOR UNIVERSITY OF CALIFORNIA DAVIS

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

others, the total expenses, and revenue, if any, for each program service reported.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

(Code: (Expenses \$ 32,509 including grants of \$ (Revenue \$

PROVIDE 820 BED STUDENT HOUSING FACILITY IN RIVERSIDE, CA FOR UNIVERSITY OF CALIFORNIA RIVERSIDE - PHASE 1

19,744 including grants of \$ (Revenue \$) (Expenses \$

(Code:

PROVIDE 540 BED STUDENT HOUSING FACILITY IN PRAIRIE VIEW, TX FOR PRAIRIE VIEW A&M UNIVERSITY

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code: (Expenses \$ including grants of \$ (Revenue \$ 2,965)

REIMBURSED/REFUNDED EXPENSES ON CURRENT OR PAST PROJECTS

(Code: including grants of \$ (Revenue \$) (Expenses \$ 525,499

PROVIDE 1,814 BED STUDENT HOUSING FACILITY IN WILMINGTON, NC FOR UNC WILMINGTON

others, the total expenses, and revenue, if any, for each program service reported.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to

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

PROVIDE 1,502 BED STUDENT HOUSING FACILITY IN RIVERSIDE, CA FOR UNIVERSITY OF CALIFORNIA RIVERSIDE - PHASE 2

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493134027611
SCI		ULE A	Dublic	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	· a section	2019		
		the Treasury	► Go to <u>www.irs</u>	s.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	he organiza HOUSING FOU					Employer identific	ation number
							63-1173425	
	rt I		for Public Charity Stat a private foundation because				See instructions.	
1			onvention of churches, or as	•	•		(Δ)(i).	
2		•	escribed in section 170(b)(
3			or a cooperative hospital ser		,			
4		·	esearch organization operat	-			-	ater the hospital's
•	Ш	name, city,		ea in conjunction with	a nospital descri	ibed iii sectioii .	170(b)(1)(A)(III). L	iter the hospital's
5		(b)(1)(A)	ation operated for the benefi (iv). (Complete Part II.)	-				ped in section 170
6			tate, or local government or	_				
7			ation that normally receives ' 'O(b)(1)(A)(vi). (Complete		s support from a	ı governmental u	nit or from the gener	al public described in
8			ty trust described in section	•	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. S					ege or university or a
10	✓	from activit	ation that normally receives: dies related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	nctions—subject to cer ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ation organized and operate	d exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B	appoint or elect a majo				
b		manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	ation vested in the sar				
c		Type III f	unctionally integrated. A	supporting organizatio				ted with, its
d		Type III n	organization(s) (see instruct on-functionally integrate o integrated. The organization o). You must complete Pa	ed. A supporting organi on generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization recei or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizations		-		<u> </u>	
g	Provi	de the follow	ing information about the su	upported organization(т'			
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
			<u> </u>					
Tota		l. P. '	tion Act Notice, see the I		Cat. No. 11285		Schedule A (Form 9	

Sch	nedule A (Form 990 or 990-EZ) 2019						Page 2
P	art II Support Schedule for	Organizations	Described in S	ections 170(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(vi)
	(Complete only if you ch						under Part III.
	If the organization failed	I to qualify unde	r the tests listed	below, please	complete Part I	II.)	
	Section A. Public Support Calendar year		I		I		
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grant.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from						
	line 4.						
S	Section B. Total Support	1	T			, , , , , , , , , , , , , , , , , , ,	
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7							
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
9							
_	activities, whether or not the						
	business is regularly carried on				1		
10	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.).						
11							
12	10 Gross receipts from related activities,	etc. (see instruction	ns)		<u> </u>	12	
	First five years. If the Form 990 is for						
	_	=			-		_
_	check this box and stop here Section C. Computation of Public				<u> </u>		<u> </u>
	Public support percentage for 2019 (li		_	column (f))		14	
	Public support percentage for 2018 Sc					15	
	a 33 1/3% support test—2019. If the						hov
106	and stop here. The organization qual						
ŀ	33 1/3% support test—2018. If th	nes as a publicly s le organization did	not check a box o	on line 13 or 16a.	and line 15 is 33 i		k this
	box and stop here. The organization						
17a	a 10%-facts-and-circumstances tes	t— 2019. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	—
	is 10% or more, and if the organization	n meets the "facts	-and-circumstance	es" test, check thi	is box and stop h o	e re. Explain	
	in Part VI how the organization meets			-			
	organization						▶□
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organization						
	Explain in Part VI how the organization						
	supported organization						▶□
18		on did not check a	box on line 13, 1	6a, 16b, 17a, or 1	17b, check this box	k and see	_
	instructions						▶□
					Schedu	le Δ (Form 990 o	r 990-F7\ 2019

any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 4	Sche	dule A (Form 990 or 990-EZ) 2019							Page 3
Section A. Public Support Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (d) 2018 (P								
Section A. Public Support								fy under	Part II. If
Calendar year (or fiscal year beginning in Formation Formatic Control Contro			to quality under	tne tests listed i	pelow, please co	mpiete Part II.)			
(or fiscal year beginning in) ► Giffs, grants, contributions, and membership fees received. (Do not neticled any funusual grants?). The production of the programment of the programme	5 e					Т		$\overline{}$	
membership fees received. (**Do not include any "unusual grants.**). 2 Gross receipts from admissions, merchandlass add or services and include any "unusual grants.**). 3 Gross receipts from admissions, merchandlass and or services and include any activity that its related to the organization's tax-exempt purpose or business under section \$1.3 3 Gross receipts from activities that are not an unrelated trade or business under section \$1.3 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities functioned by a governmental unit to the organization's benefit and either paid to or expended on its behalf 6 Total. Add lines 1 through 5 and 3 received from disqualified persons 9 Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year. 9 Add lines of \$5,000 or 19% of the amount on line 13 for the year. 9 Amounts included on lines 2 and 3 disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year. 9 Amounts included on lines 2 and 3 disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year. 9 Amounts included on lines 2 and 3 disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year. 9 Amounts included on lines 2 and 3 disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year. 9 Amounts included on lines 2 and 3 disqualified persons that exceed the greater of \$5,000 or 19% of the amount on line 13 for the year. 9 Amounts included on lines 1. 10 Amounts included on lines 1. 11 Net lines 10 for the year. 12 Calcinary year. 13 Total support. (Subtract line 7c from line 6. 13 Amounts included on lines 1. 13 Total support. (Subtract line 7c for year.) 14 Amounts included on lines 1. 15 Total support. (Subtract line 7c for year.) 16 Add lines 10e and 10e. 17 Total s	((a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 20)19	(f) Total
include any "unusual grants."). Gross receipts from admissions, merchandise sold or services performed, or facilites furnished in sorting and provided in the provided in th	1								
2 Gross receipts from admissions, merchandises sold or servicities furnished is any activity that is related to the many activities that are not an unrelated trace or business under section 513 3 Gross receipts from activities that are not an unrelated trace or business under section 513 1 (1985,508) 1,977,123 3 (1975,208) 1,977,123 4 Tax revenues levied for the organization's benefit and either pad to or expended on its schalf section 515 5 (1975,208) 1,977,123 5 (1			2,741,691	573,899	2,349,972				5,665,562
merchandice sold or services performed, or facilities funished in any activity that is related to the organization's tax-evempt purpose or business under section 513 4 Tax revenues levide for the organization's benefit and either pald to or expended on its behalf the pald to organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and either pald to or expended on its behalf the organization's benefit and the organization's benefit and either pald to organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, whether on the business activities not included in line 10p, whether on the business is regularly carried on. 12 Other income. Do not include giin or ios from the sale of capital assets Ceptain in Part VI; and 12,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,	2	Gross receipts from admissions						-+	
any activity that is related to the organization's tax-exempt purpose organization's tax-exempt purpose organization's tax-exempt purpose of the property purpose of the property of the prope	_								
a repair action's tax-exempt purpose of Gross receipts from activities that are not an unrelated trade or business under section 513 and or expended on this behalf and either paid to or expended on its behalf and either paid to or expended on its behalf and either paid to or expended on its behalf for the organization's behalf and either paid to or expended on its behalf for the organization without charge for the organization or line 1, 2, and 1, 2, 2, 3, 4, 5, 3, 4, 5, 4, 5, 5, 4, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5,			129,247,268	144,865,942	160,216,165	168,723,367	187,	627,376	790,680,118
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are not an unrelated trade or business under section 513	3								
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7a A mounts included on lines 1, 2, and 3 received from disqualified persons 0 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. 0 c Add lines 7a and 7b. 9 Public support. (Subtract line 7c from line 6.) 0 Section B. Total Support (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 1,131,544 800,228 2,002,705 3,660,917 3,172,194 10,767,588 and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. 44,182 72,270 6,164 4,241 42,753 12,742 10,780,330 444,182 72,270 6,164 4,241 42,753 12,742 10,780,330 1975. c Add lines 10a and 10b. 1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. 2018 (Explain in Part VI.). 13 Total support. (Add lines 9, 10c, 11, and 12). 135,154,193 148,144,922 166,505,143 174,424,906 192,848,611 817,077,775 11, and 12). 13 Total support. (Add lines 9, 10c, 11, and 12). 15 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.									
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8 Public support. (Subtract line 7c from line 6.) Section B. Total Support		amount on line 13 for the year.							
Section B. Total Support Calendar year (or fiscal year beginning in)									0
Calendar year Calendar year Cor fiscal year beginning in ► (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total	8								806,297,445
Calendar year (or fiscal year beginning in) ▶ 9 Amounts from line 6	Se								
(or fiscal year beginning in) ► Amounts from line 6									
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Securities loans, rents, royalties and income from similar sources 1,131,544 800,228 2,002,705 3,660,917 3,172,194 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,588 10,767,775 10,767,775 10,767	10a								
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Section C. Computation of Public Support Percentage 15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	14	•	-			•			<u> </u>
Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))					<u>.</u>			<u> </u>	▶ ⊔
Public support percentage from 2018 Schedule A, Part III, line 15		ction C. Computation of Public	Support Perce	entage	andriman (f))		1 -		
Section D. Computation of Investment Income Percentage									
							16		98.770 %
					line 12 (6)	1)	T		

Investment income percentage from 2018 Schedule A, Part III, line 17

20

19a 331/3% support tests—2019. 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 \blacktriangleright b 33 1/3% support tests—2018. 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 \blacktriangleright

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

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

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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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 Part VI.
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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,"

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

	edule A (101111 350 01 350 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			1
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		14	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
,	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2		2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	2-		
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. b. Did the approximation approximation of the provided details in Part VI. 	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O			. Part VIV See		
	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.					
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1				
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1 b				
C	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
e	Discount claimed for blockage or other factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	Section C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6				

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide	

5	Qualified set-aside amounts (prior IRS approval required)
6	Other distributions (describe in Part VI). See instructions
7	Total annual distributions. Add lines 1 through 6.
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions
9	Distributable amount for 2019 from Section C, line 6
10	Line 8 amount divided by Line 9 amount
	Section F. Distribution Allocations (i) (ii) (iii)

7 Total annual distributions. Add lines 1 through 6.			
Distributions to attentive supported organizations to will details in Part VI). See instructions			
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019			

8	Distributions to attentive supported organizations to whe details in Part VI). See instructions	nich the organization is respon	sive (provide	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019:			
а	From 2014			
b	From 2015			
С	From 2016			
	\ <u>-</u>			

10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount	_		
i Carryover from 2014 not applied (see			

Schedule A (Form 990 or 990-EZ) (2019)

instructions)

See instructions.

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. d Excess from 2018. . . e Excess from 2019.

3j and 4c. 8 Breakdown of line 7:

\$

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

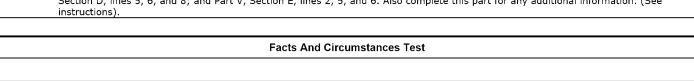
Additional Data

Software ID: Software Version:

EIN: 63-1173425

Name: COLLEGIATE HOUSING FOUNDATION

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).



efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493134027611

OMB No. 1545-0047

2019

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.

Open to Public

Schedule D (Form 990) 2019

Cat. No. 52283D

Department of the Treasury

(Form 990)

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

Na	me of the organization LEGIATE HOUSING FOUNDATION		Employer identification number	
COL	LEGIATE HOUSING FOUNDATION		63-1173425	
Pā	Organizations Maintaining Donor Advi		r Accounts.	
	Complete if the organization answered "Ye		(b) Funds and other accounts	
L	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
1	Aggregate value at end of year			
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex			
5	private benefit?	r or donor advisor, or for any other purpose c		
Pa	rt II Conservation Easements. Complete if the organization answered "Ye	es" on Form 990, Part IV, line 7.		
L	Purpose(s) of conservation easements held by the organ	nization (check all that apply).		
	\square Preservation of land for public use (e.g., recreation	n or education) \square Preservation of an	historically important land area	
	Protection of natural habitat	Preservation of a c	ertified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation contribution in the for	m of a conservation Held at the End of the Year	
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified histori	` ′	2c	
d	Number of conservation easements included in (c) acqu structure listed in the National Register	ired after 7/25/06, and not on a historic	2d	
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, or terminated by t	the organization during the	
1	Number of states where property subject to conservation	on easement is located >		
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds			
5	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing co	_ res _ no	
_	Amount of expenses incurred in monitoring inspecting	handling of violations, and enforcing conserv	vation easements during the year	
7	► \$	manding of violations, and emorcing conserv	ration easements during the year	
3	Does each conservation easement reported on line 2(d)			
,		footnote to the organization's financial state		
aı	t III Organizations Maintaining Collections Complete if the organization answered "Ye	•	er Similar Assets.	
La		public exhibition, education, or research in fu		
b				
((i) Revenue included on Form 990, Part VIII, line 1		(a) Donor advised funds (b) Funds and other accounts	
(ii)Assets included in Form 990, Part X		> \$	
2	If the organization received or held works of art, histori following amounts required to be reported under SFAS	cal treasures, or other similar assets for finar 116 (ASC 958) relating to these items:	ncial gain, provide the	
а	Revenue included on Form 990, Part VIII, line 1		> \$	
b	Assets included in Form 990, Part X		▶\$	

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

Part		Organizations Ma	aintaining Col	lections of	of Art, Hi	stori	cal T	reası	ires, oi	r Other	Similar A	ssets (cor	ntinued)	
3		the organization's acq (check all that apply):		n, and other	records, c	heck a	any of	the fo	llowing t	that are a	significant	use of its c	ollection	
а		Public exhibition				d		Loan	or excha	ange prog	ırams			
b		Scholarly research				e		Othe	r					
c		Preservation for future	e generations											
4	Provid Part X	le a description of the	organization's col	lections and	d explain ho	ow the	y furtl	her the	e organiz	zation's ex	kempt purpo	ose in		
5		g the year, did the org s to be sold to raise fur										☐ Yes		lo
Par	t IV	Escrow and Cust Complete if the ord X, line 21.			" on Form	1 990	, Part	IV, li	ine 9, o	r reporte	ed an amou		m 990,	Part
1a	Is the	organization an agent ed on Form 990, Part	, trustee, custodi X?	an or other	intermedia	ry for	contri 	bution	s or othe	er assets	not	☐ Yes		lo
b	If "Ye	s," explain the arrange	ement in Part XIII	and comple	ete the follo	owina	table:				Δ	mount		_
c		ning balance				_				1c				_
d	-	ons during the year .								1d				_
е		outions during the year								1e				_
f		g balance								1f				_
2a		e organization include								eccount lia	ahility?	□ ves		_ lo
b		s," explain the arrange												
	rt V	Endowment Fund		. Check her	e ii tile exp	nanati	OII IIas	been	provide	u III Fait ,	XIII			
		Complete if the or		vered "Yes	" on Form	990	, Part	IV, li	ne 10.					
				(a) Curre		(b) P	rior yea	ar		ears back	(d) Three ye	ars back (e) Four yea	ars back
1a	Beginni	ng of year balance .												
b	Contrib	utions												
		estment earnings, gair	ns, and losses											
d	Grants	or scholarships	•											
		expenditures for facilition	es											
f.	Adminis	strative expenses .												
g	End of	year balance												
2	Provid	le the estimated perce	ntage of the curr	ent year end	d balance (line 1g	g, colu	mn (a)) held a	s:				
а	Board	designated or quasi-e	ndowment 🟲											
b	Perma	nent endowment ►												
c	Tempo	orarily restricted endo	wment ►											
	The pe	ercentages on lines 2a	, 2b, and 2c shou	ıld equal 100	0%.									
3a		ere endowment funds ization by:	not in the posses	sion of the	organizatio	n that	are h	eld an	d admini	istered fo	r the		Vac	N _a
	-	related organizations					_					3a(i	Yes	No
		elated organizations .				•						3a(i		
b		s" on 3a(ii), are the re			required on	Sche	dule R	?				3b		
4	Descri	ibe in Part XIII the inte	ended uses of the	organizatio	n's endowr	nent f	unds.						•	
Par	t VI	Land, Buildings,												
	<u> </u>	Complete if the or												10
	Descrip	otion of property	(a) Cost or otl (investme		(b) Cost or	r other	pasis (otner)	(c) Acc	umulated o	lepreciation	(d)	Book valu	ie
1a	Land .													
b	Building	gs				1	,466,39	99,364			293,713,159		1,17	2,686,205
c	Leaseho	old improvements												
d	Equipm	ent					68,69	91,209			34,033,873		3	4,657,336

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

1,207,343,541

Complete if the organization answered "Yes" on F	Form 990, Part IV, li	<u>ne</u> 11b	.See Form 990, F	Part X, line 12.	
(a) Description of security or category	(b) Book value		(c) Metho	d of valuation: -year market val	
(including name of security) (1) Financial derivatives			Cost or ena-or	-yeai market väl	ue
(2) Closely-held equity interests					
(3) Other(A) US TREASURY NOTES	348,898,030			F	
(B) US AGENCY NOTES	56,764,009			F	
(C) INTERNATIONAL FIXED INCOME	11,602,994			F	
(D) REPURCHASE AGREEMENT	4,628,414			F	
(E) CERTIFICATES OF DEPOSIT	646,924			F	
(F)	,				
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	422,540,371				
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on F	Form 990 Part IV li	ne 11c	See Form 990	Part X line 13	
(a) Description of investment	01111 990, 1 arc 1v, 11		(b) Book value	(c) Method o	
				Cost or end-of	
(1)					
(2)					
(3)					
(4)					
(5)					
6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Part IX Other Assets.		<u> </u>			
Complete if the organization answered 'Yes' on F	orm 990, Part IV, lin	ne 11d.	See Form 990, Par		
(a) Description (1)CONSTRUCTION IN PROGRESS				(b) Boo	653,542,385
(2)DUE FROM UNIVERSITIES, AS MANAGERS					444,783
(3)INTEREST/DIVIDEND INCOME RECEIVABLE					1,244,645
(4)FUNDS HELD IN TRUST BY THE UNIVERSITIES AS MANAGERS (5)RIGHT OF USE ASSETS					22,480,316 102,448,616
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)					780,160,745
Part X Other Liabilities. Complete if the organization answered 'Yes' on Fe	orm 990, Part IV, lin	ne 11e	or 11f.See Form	990, Part X, lii	ne 25.
1. (a) Description of li				(b) Book value	
(1) Federal income taxes				value	
(2) SECURITY DEPOSITS				3,218,626	
(3) FAIR VALUE OF INTEREST EXCHANGE				3,418,409	
(4) OPERATING LEASE LIABILITY (5)				110,780,859	
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of	6 +h - 6			117,417,894	

Donated services and use of facilities 2b b 2c

d Other (Describe in Part XIII.) 2d e Subtract line **2e** from line **1** 3

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

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

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

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

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

4 b

Net unrealized gains (losses) on investments

Schedule D (Form 990) 2019

а

1

2

C

d

b

Part XIII

See Additional Data Table

5

3 4

Add lines **4a** and **4b** C 5

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Total expenses and losses per audited financial statements

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

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

Subtract line 2e from line 1

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

Supplemental Information

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

Donated services and use of facilities . . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

4a

4b

2a 2b

2c

2d

4a 4b

Explanation

2a

-88,268

1,393,459

5

4c

2e

3

2e 3

1,393,459 215,604,693

Page 4

192.856.906

192,856,906

-88,268

192,768,638

216,998,152

215.604.693

4c 5 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

Schedule D (Form 990) 2019

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Additional Data

Software ID: Software Version:

> **EIN:** 63-1173425 Name: COLLEGIATE HOUSING FOUNDATION

Return Reference Explanation

PART X, LINE 2:

WILL RECORD A LIABILITY FOR UNCERTAIN TAX POSITIONS WHEN IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WOULD NOT BE SUSTAINED IF EXAMINED BY THE TAXING AUTHORITY. FOR TAX-EXEMPT ENTITIES, TAX POSITIONS INCLUDE THE ENTITY'S TAX-EXEMPT STATUS AND ASSUMPTIONS USED TO DET ERMINE UNRELATED BUSINESS TAXABLE INCOME. THE FOUNDATION HAD NO UNRECOGNIZED TAX BENEFITS AT JUNE 30, 2020 OR JUNE 30, 2019. THE TAX YEARS 2016 - 2019 REMAIN OPEN TO EXAMINATION. .

Supplemental Information THE FOUNDATION HAS A POLICY FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE FOUNDATION

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	EXPENSES REPORTED AS REDUCTIONS OF UBIT ON FORM 990 PART VII LINE 6B -88,268.

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER EXPENSES REPORTED AS DEDUCTIONS TO UBIT ON FORM 990 PART VII LINE 6B 88,268. FAIR VALUE OF INTEREST RATE SWAPS 1,305,191. I ADJUSTMENTS:

SCHEDULE F (Form 990)		of Activities	Outoido the Uni			OMB No. 1545 0047
(1 01111 000)			outside the on	ited S	tates	
	► Complete if the org	•		ine 14b, 1	.5, or 16.	2019
Department of the Treasury Internal Revenue Service	► Go to www.	.irs.gov/Form990 for i	nstructions and the latest in	nformatio	n.	Open to Public Inspection
Name of the organization					Employer ider	ntification number
COLLEGIATE HOUSING FOU	JNDATION				63-1173425	
	P Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. P Attach to Form 990. P Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number 63-1173425					
1 For grantmakers.	Does the organization	maintain records to	substantiate the amoun	t of its gr	rants and	
· ·		-	•	criteria	used	
to award the grants	or assistance?					☐ Yes ☐ No
2 For grantmakers. outside the United S		organization's proce	dures for monitoring the	use of it	ts grants and ot	her assistance
3 Activites per Region.	(The following Part I, line	e 3 table can be dupli	icated if additional space is	needed.)	
(a) Region	offices in th	employees, agents, and independent contractors in the	region (by type) (such as, fundraising, program services, investments, grants to recipients located in the	program spe	n service, describe ecific type of	for and investments
MIDDLE EAST AND NO AFRICA	DRTH		INVESTMENT HELD IN STATE OF ISRAEL DLR BD 3RD JUBILEE ISSUE SER B 04/26/2004			11,602,994
3a Sub-total	n sheets to					11,602,994
c Totals (add lines 3a a	and 3b)					11,602,994

Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations. (see Instructions for Form 5471)	☐Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see instructions for Form 6000)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	☐Yes	✓ No

Schedule F (Form 990) 2019	Page 5
Part V 990 Scheo	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); and Part III, column (c) (estimated number of recipients), as applicable any additional information. See instructions.	method); Part III (accounting
	Return Reference	Explanation
PART III AC	COUNTING METHOD:	

990 Schedule F, Supplemental Information

	Return Reference	Explanation
,	SCHEDULE F,	INVESTMENTS IN SCHEDULE F, PART I, LINE 3, COLUMN F ARE REPORTED AT THEIR FAIR MARKET VALUES AS OF JUNE 30, 2020.
	PART I, LINE 3,	THE ORIGINAL COST OF THE INVESTMENTS WAS 11,347,223. THE INVESTMENT IS GUARANTEED BY THE UNITED STATES OF
	COLUMN F	AMERICA AND IS A PERMITTED INVESTMENT UNDER THE TRUST INDENTURE BY AND BETWEEN WILMINGTON TRUST AND THE
ı		CALIFORNIA MUNICIPAL FINANCE ALITHORITY RELATED TO THE TAX-EXEMPT BOND ISSUE DATED 07/17/2019

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9313	4027	611	
Sch	nedule J	C	ompensati	on Information	ОМ	B No.	1545-(0047	
(Form 990)		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.					2019		
•	tment of the Treasury	► Go to <u>www.irs.go</u>		instructions and the latest informat	ion. O		o Pul		
	al Revenue Service ne of the organiz	<u> </u> ation		En	nployer identificati		ectio Imber		
COL	LEGIATE HOUSING	FOUNDATION		63	-1173425				
Pa	rt I Questi	ons Regarding Compensa	ntion		11/5425				
							Yes	No	
1a				the following to or for a person listed o y relevant information regarding these i					
	✓ First-class	s or charter travel		Housing allowance or residence for per	sonal use				
		companions		Payments for business use of personal					
		nification and gross-up payment	_	Health or social club dues or initiation f					
	☐ Discretion	nary spending account	Ц	Personal services (e.g., maid, chauffeu	r, chef)				
b				follow a written policy regarding payme ve? If "No," complete Part III to explain	nt or	1 b	Yes		
2		ation require substantiation prio	- 2	2	Yes				
	directors, truste	ees, officers, including the CEO/	executive Director	r, regarding the items checked on Line 1	.ar				
3				d to establish the compensation of the					
				not check any boxes for methods CEO/Executive Director, but explain in P	art III.				
		-							
		ation committee ent compensation consultant	⊻	Written employment contract Compensation survey or study					
		of other organizations	▽	Approval by the board or compensation	o committee				
		or other organizations		Approval by the board of compensation	r committee				
4	During the year related organiza		990, Part VII, Sed	ction A, line 1a, with respect to the filing	g organization or a				
а	Receive a sever	ance payment or change-of-cor	ntrol payment? .			4a		No	
b	•		•	fied retirement plan?		4b		No	
С			,	nsation arrangement?		4c		No	
	ir res to any o	or lines 4a-c, list the persons an	id provide the app	licable amounts for each item in Part III	l.,				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.					
5	For persons lists	ed on Form 990, Part VII, Section	on A, line 1a, did t	the organization pay or accrue any					
	compensation c	ontingent on the revenues of:							
а	The organization	n?				5a		No	
b						5b		No	
	,	5a or 5b, describe in Part III.							
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any					
а	=	n?				6a		No	
b	, -					6b		No	
_	· ·	6a or 6b, describe in Part III.	A D 3 D						
7	payments not d	escribed in lines 5 and 6? If "Ye	s," describe in Pa	the organization provide any nonfixed rt III		7		No	
8	subject to the ir	nitial contract exception describe	ed in Regulations	ed pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," descr		8	Yes		
9				presumption procedure described in Rec		9	Yes		
For F	Panerwork Redu	uction Act Notice, see the Ins	structions for Fo	rm 990. Cat. No. 500.	53T Schedule J	(Form	990)	2019	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

instructions, on row (ii). I	Do no	ot list any individuals tha	rted on Schedule J, report t are not listed on Form 9 dividual must equal the to	90, Part VII.				t individual.
(A) Name and Title			of W-2 and/or 1099-MIS (ii) Bonus & incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 WILLIAM B GIVHAN COO/PRESIDENT	(i)	617,100	0	0	0	54,763	671,863	0
	(ii)	0	0	0	0	0	0	0
2 JANET BROWN VP FOR ADMIN/ASST	(i)	215,750	0	0	0	29,794	245,544	0
SECRETARY	(ii)	0	0	0	0	0	0	0
3 BRIAN M BLAKENEY CHIEF FINANCIAL OFFICER	(i)	200,000	0	0	0	18,311	218,311	0
	(ii)	0	0	0	0	0	0	0
4 LYN R CONE VP FOR COMPLIANCE	(i)	215,750	0	0	0	15,980	231,730	0
	(ii)	0	0	0	0	0	0	0
	1	1				<u> </u>	Cahadula	1/Form 000\ 2010

Schedule J (Form 990) 2019	chedule J (Form 990) 2019				
Part III Supplemental Inform	nation				
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.				
Return Reference Explanation					
·	FIRST-CLASS TRAVEL WAS PROVIDED ON OCCASSION TO ONE OFFICER OF THE FOUNDATION. THE FIRST-CLASS TRAVEL WAS NOT CONSIDERED TAXABLE COMPENSATION. TRAVEL WAS CONSISTENT WITH THE FOUNDATION'S TRAVEL POLICY WHICH STATES, "OFFICERS AND DIRECTORS REQUESTING OFFICIAL TRAVEL SHOULD ATTEMPT TO TRAVEL BY THE MEANS MOST ECONOMICAL TO CHF. IN SELECTING A PARTICULAR METHOD OF TRANSPORTATION, CONSIDERATION SHALL BE GIVEN FOR THE TOTAL COST TO CHF WHICH WILL RESULT, INCLUDING LOST WORK, AND ACTUAL TRANSPORTATION COSTS, WITH THE UNDERSTANDING THAT OFTEN TIMES, CONVENIENCE AND URGENCY MAY NECESSITATE MORE EXPENSIVE TRANSPORTATION."				
PART I, LINE 8	BRIAN M. BLAKENEY BEGAN HIS EMPLOYMENT AS CHIEF FINANCIAL OFFICER ON JULY 1, 2019.				

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

Employer identification number

OMB No. 1545-0047

DLN: 93493134027611

Inspection

Name of the organization COLLEGIATE HOUSING FOUNDATION								Emplo	Employer identification number						
									63-13	173425					
Pa	rt I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue	price	(f) Descrip	otion of purpose	(g) D	efeased	beh	On alf of uer		Pool ncing	
									Yes	No	Yes	No	Yes	No	
A	DELAWARE COUNTY AUTHORITY	23-1973437	00000000	05-10-2018	4,0	50,980	TO PROVIDE FU BONDS ISSUED 2008	JNDS TO REFUN O ON DECEMBER		X		Х		X	
В	VERMONT HOUSING FINANCE AGENCY	03-0239902	924197AA4	07-29-2004	23,0	75,000	TO CONSTRUCT HOUSING FACI UNIVERSITY OF	LITY AT THE		Х		Х		Х	
С	CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY	68-0164610	13078REU0	01-11-2012	95,7	42,546	TO ACQUIRE A FACILITY AT TH CALIFORNIA IR	IE UNIVERSITY		Х		Х		Х	
D	CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY	68-0164610	13078RGJ3	03-15-2016	323,0	65,270	TO PROVIDE FU BONDS ISSUED 4/27/2006 AND	12/14/2004,	D	Х		Х		Х	
Pa	rt II Proceeds														
						4		В	(0			D		
1	Amount of bonds retired					696	5,327	2,005,000		14,900,	000		29,7	750,000	
2	Amount of bonds legally defease														
3	Total proceeds of issue					4,050,980 23,550,928		95,742,54			46 323,065,270				
4	Gross proceeds in reserve funds					404	404,922		6,976,1		,114		20,3	20,345,326	
5	Capitalized interest from proceed							1,595,815							
6	Proceeds in refunding escrows.														
7	Issuance costs from proceeds .					81	,019	461,500		704,	825	2,886,146			
8	Credit enhancement from procee							132,046							
9	Working capital expenditures fro					456,777			30,18			30,183			
10	Capital expenditures from procee							19,332,990							
11	Other spent proceeds					3,969	,960	1,571,800		95,037,	721		299,8	317,291	
12	Other unspent proceeds														
13	Year of substantial completion .			• •		01		2005		12			2012		
					Yes	No	Yes	No	Yes	No	_	Yes		No	
14	Were the bonds issued as part of bonds (or, if issued prior to 2018	f a current refunding 3, a current refunding	issue of tax-exempl	t 	Х			Х		Х		Х			
15	Were the bonds issued as part of bonds (or, if issued prior to 2018	f an advance refundir 3, an advance refundi	ng issue of taxable ng issue)?			х		Х	Χ			Х			
16	Has the final allocation of procee	ds been made?			Х		X		Χ			Χ			
17	Does the organization maintain a proceeds?				Х		Х		Х			Х			
Pa	rt III Private Business Use														

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

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

No

Χ

Yes

No

Χ

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Yes

Yes

D

No

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Χ

С

No

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Yes

b

C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

No

Χ

Χ

Χ

No

Χ

Χ

Χ

Χ

D

Yes

Χ

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Χ

Yes

Χ

Schedule K (Form 990) 2019

D

В

No

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Yes

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Yes

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OF PENNSYLVANIA

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C

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

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

Exception to rebate?

hedge with respect to the bond issue?

Was the hedge superintegrated?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

period?

Part V

Part VI

PERFORMED

requirements of section 148? . . .

Return Reference

DATE REBATE COMPUTATION

No

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Χ

Nο

Χ

D

D

Yes

Х

Yes

5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	
b	Name of provider	

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

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Χ

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

ISSUER NAME: PUBLIC FINANCE AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 07/01/2019

Yes

Χ

No

Χ

Α

Χ Х

Yes

Yes

Χ

Χ

INTERNATIONAL GROUP

No

Χ

Explanation ISSUER NAME: VERMONT HOUSING FINANCE AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED: 06/30/2020 ISSUER NAME: CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 01/11/2021 ISSUER NAME: CITY OF ALBANY INDUSTRIAL DEVELOPMENT AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED: 05/03/2017 ISSUER NAME: CITY OF ALBANY INDUSTRIAL DEVELOPMENT AGENCY DATE THE REBATE COMPUTATION WAS PERFORMED: 01/25/2018 ISSUER NAME: ILLINOIS FINANCE AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 10/01/2019 ISSUER NAME: DUTCHESS COUNTY LOCAL DEVELOPMENT CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 05/31/2020 ISSUER NAME: WYOMING COMMUNITY DEVELOPMENT AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 07/01/2019 ISSUER NAME: OREGON FACILITIES AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 04/01/2020 ISSUER NAME: NEW HOPE CULTURAL EDUCATION FACILITIES

FINANCE CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 07/11/2019 ISSUER NAME: TOLEDO-LUCAS COUNTY PORT AUTHORITY DATE THE

REBATE COMPUTATION WAS PERFORMED: 05/06/2020 ISSUER NAME: NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 05/29/2020 ISSUER NAME: NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 06/11/2019 ISSUER NAME: NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 06/19/2020 ISSUER NAME: NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 07/02/2019 ISSUER NAME: NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION DATE THE REBATE COMPUTATION WAS PERFORMED: 04/02/2020 ISSUER NAME: ILLINOIS FINANCE AUTHORITY DATE THE REBATE COMPUTATION WAS PERFORMED: 05/07/2020

AMERICAN

В

No

220.0000000000 %

Yes

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Nο

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No

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Yes

В

Yes

Return Reference	Explanation
SCHEDULE K, PART I, ENTITY 2, LINE C, COLUMN F	TO CONSTRUCT A STUDENT HOUSING FACILITY AT NORTHERN ILLINOIS UNIVERSITY AND PROVIDE FUNDS TO REFUND BONDS ISSUED ON OCTOBER 23, 2006 SCHEDULE K, PART I, ENTITY 4, LINE B, COLUMN F TO ACQUIRE AN EXISTING STUDENT HOUSING FACILITY AT TARLETON STATE UNIVERSITY SCHEDULE K, PART I, ENTITY 7, LINE C, COLUMN F TO CONSTRUCT A DINING FACILITY IN CONNECTION WITH STUDENT HOUSING FACILITIES AT TEXAS WOMAN'S UNIVERSITY

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

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

Return Reference	Explanation
SCHEDULE K PART II LINE 3	DIFFERENCES BETWEEN SCHEDULE K PART I COLUMN E AND PART II LINE 3 VERMONT HOUSING FINANCE AGENCY 7/29/04 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD CITY OF ALBANY INDUST RIAL DEVELOPMENT AUTHORITY 5/3/07 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD CITY OF ALBANY INDUSTRIAL DEVELOPMENT AUTHORITY 1/25/08 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD DUTCHESS COUNTY LOCAL DEVELOPMENT CORPORATION 6/29/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD DUTCHESS COUNTY LOCAL DEVELOPMENT CORPORATION 6/29/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD WYOMING COMMUNITY DEVELOPMENT AUTHORITY 7/14/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD OREGON FACILITIES AUTHORITY 7/14/11 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINA NCE CORPORATION 7/11/13 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 7/11/13 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 7/11/14 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 06/11/14 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 06/11/14 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 07/02/14 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 04/02/15 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 04/12/15 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 04/12/15 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION 04/12/15 ISSUE -INVESTMENT EARNINGS DURING THE PROJECT PERIOD NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE C

Return Reference	Explanation
SCHEDULE K PART II LINE 3	. TOTAL PROCEEDS OF ISSUE ALSO INCLUDE INVESTMENT EARNINGS DURING THE PROJECT PERIOD CALIF ORNIA MUNICIPAL FINANCE AUTHORITY 7/17/2019 ISSUE - INVESTMENT EARNINGS DURING THE PROJECT PERIOD

Return Reference	Explanation
SCHEDULE K, PART II, ENTITY	VERMONT HOUSING FINANCE AGENCY 7/29/04 ISSUE: INCLUDES AMOUNTS DRAWN ON RESERVE FUND FOR DEBT
1, LINE 11	SERVICE AND EXPENSES DUE TO INSUFFICIENT FUNDS.

Return Reference	Explanation
SCHEDULE K, PART II, ENTITY 3, LINE 12	OREGON FACILITIES AUTHORITY 04/19/12 ISSUE: ONLY UNSPENT PROCEEDS ARE HELD IN THE REDEMPTION FUND PENDING REDEMPTION. SCHEDULE K, PART II, ENTITY 3, LINE 12 TOLEDO-LUCAS COUNTY PORT AUTHORITY 05/06/2014 ISSUE: ONLY UNSPENT PROCEEDS ARE HELD IN THE BOND FUND AND ALLOCATED FOR UPCOMING PRINCIPAL PAYMENTS. SCHEDULE K, PART II, ENTITY 5, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 04/02/2015 ISSUE: ONLY UNSPENT PROCEEDS ARE HELD IN THE BOND FUND AND ALLOCATED FOR UPCOMING PRINCIPAL PAYMENTS. SCHEDULE K, PART II, ENTITY 5, LINE 12 PUBLIC FINANCE AUTHORITY 06/10/2015 ISSUE: ONLY UNSPENT PROCEEDS ARE HELD IN THE CONSTRUCTION FUND PENDING EXPECTED CAPITAL EXPENDITURES. SCHEDULE K, PART II, ENTITY 5, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 06/23/2016 ISSUE: ONLY UNSPENT PROCEEDS ARE HELD IN THE BOND FUND AND ALLOCATED FOR UPCOMING PRINCIPAL PAYMENTS. SCHEDULE K, PART II, ENTITY 6, LINE 12 NEW HOPE CULTURAL EDUCATIONAL FACILITIES FINANCE CORPORATION 06/30/2016 ISSUE: ONLY UNSPENT PROCEEDS ARE HELD IN THE BOND FUND AND ALLOCATED FOR UPCOMING PRINCIPAL PAYMENTS.

Return Reference	Explanation
SCHEDULE K, PART IV, LINE 6	FOR PROJECTS WITH GROSS PROCEEDS INVESTED BEYOND THE TEMPORARY PERIOD, SUCH PROCEEDS WERE INVESTED AT A YIELD LESS THAN THE YIELD ON THE RESPECTIVE BONDS OR PROCEEDS CONSTITUTE A MINOR PORTION UNDER TREAS. REG. 1.148-2(G).

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

SC

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

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

explanations, and any additional information in Part VI.

DLN: 93493134027611

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

▶ Attach to Form 990.

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

Name of the organization

Employer identification number

	e of the organization LEGIATE HOUSING FOUNDATION										er ident 73425	tificatio	1 numbe	r		
Pā	rt I Bond Issues															
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Des	(f) Description of purpose		(g) Defeased		d (h) On behalf of issuer			Pool ncing	
									,	Yes	No	Yes	No	Yes	No	
A	CITY OF ALBANY INDUSTRIAL DEVELOPMENT AGENCY	52-2015750	012440HR7	05-03-2007	12,	780,000	TO CONSTRUCT A STUDENT HOUSING FACILITY AT THE ALBANY COLLEGE OF PHARMACY		ACY		Х		Х		Х	
В	CITY OF ALBANY INDUSTRIAL DEVELOPMENT AGENCY	52-2015750	012440KR3	01-25-2008	6,4	495,000	TO CONSTRUCT A STUDENT HOUSING FACILITY AT THE ALBANY COLLEGE OF PHARMACY		ACY		Х		Х		X	
С	ILLINOIS FINANCE AUTHORITY	86-1091967	45202QCD3	03-10-2011	130,	435,517	SEE SCHEDULE K PART VI EXPLANATION FOR PART I, ENTITY 2, LINE C, COLUMN F		NTITY		Х		Х		Х	
D	DUTCHESS COUNTY LOCAL DEVELOPMENT CORPORATION	27-3106797	00000000	06-29-2011	15,	833,664	TO CONSTRUCT A STUDENT HOUSING FACILITY AT THE CULINARY INSTITUTE OF AMERICA				Х		Х		Х	
Pā	rt II Proceeds						,		,							
	Amount of bonds retired					A = 0.40		B 2.245.000		С		000		D		
1 2	Amount of bonds legally defease					5,840	7,000	3,245,000)		8,030,	000		1,6	599,956	
3	Total proceeds of issue					12,837	7 102	6,531,819		1	20 670	745		1 5 6	222 706	
4	Gross proceeds in reserve funds					12,037	,193	0,551,615	819 130,670,745 10,678,156			<u> </u>				
- -	Capitalized interest from procee					160	169,034 106,314		1	· · · · ·		10,790,087			189,070	
6	Proceeds in refunding escrows .					103	7,034	100,51-	<u> </u>		10,750,	.007			109,070	
7	Issuance costs from proceeds .					245	5,628	110,970			1,960,	059		-	316,673	
8	Credit enhancement from proce						3,048	71,641			1,500,	-				
9	Working capital expenditures fro						5,977	181,957	+		6,320,	142				
10	Capital expenditures from proce	eds				12,128	` 	5,833,760	_	83,734,98						
11	Other spent proceeds					· ·	<u>'</u>	227,177	+		18,512,			· ·	59,375	
12	Other unspent proceeds							<u> </u>								
13	Year of substantial completion .				2	007		2008		201	.2		2012			
					Yes	No	Ye	s No	Yes	5	No		Yes		No	
14	Were the bonds issued as part or bonds (or, if issued prior to 201	of a current refunding 8, a current refunding	issue of tax-exempt	t 		Х		Х	Х						Х	
15	Were the bonds issued as part or bonds (or, if issued prior to 201					х		Х			Х				Х	
16	Has the final allocation of procee	eds been made?			Х		Х		Х				Χ			
17	Does the organization maintain proceeds?	adequate books and	records to support th	he final allocation of	Х		Х		Х				Х			
Pā	rt Ⅲ Private Business Us															
						A		В		Ç				D		
۱.					Yes	No	Ye	s No	Yes	\$	No		Yes		No	

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

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

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8a

Part IV

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C

Arbitrage

Yes

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Schedule K (Form 990) 2019

TD BANK NA

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Page 2

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

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

Penalty in Lieu of Arbitrage Rebate?

If "No" to line 1. did the following apply?

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

	Yes	No	Yes	No	Yes	l
Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		ĺ

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

Page 3

No

D

Yes

Χ

No

Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor the

Part V **Procedures To Undertake Corrective Action** D No Yes Nο Yes No Has the organization established written procedures to ensure that violations of federal tax

requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

Schedule K (Form 990) 2019

Part IV

Arbitrage (Continued)

requirements of section 148? . . .

-		
Yes	No	Yes
	v	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

OMB No. 1545-0047

DLN: 93493134027611

Inspection

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

▶ Attach to Form 990.

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

Varr	rnal Revenue Service re of the organization	▶Go	o to <u>www.irs.gov/</u>	<u>Form990</u> for instruc	tions and th	e latest	information.		En	ployer ide		on numb		
	LEGIATE HOUSING FOUNDATION								63	-1173425				
Pa	art I Bond Issues		_											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Description of purpose		e (g	(g) Defeased		d (h) On behalf of issuer		Pool ncing
									Y	es No	Yes	No	Yes	No
A	WYOMING COMMUNITY DEVELOPMENT AUTHORITY	83-0222723	98322VAK2	07-14-2011	15,2	290,054	HOUSING FAC	O CONSTRUCT A STUDENT IOUSING FACILITY AT INIVERSITY OF WYOMING		×		Х		Х
В	OREGON FACILITIES AUTHORITY	93-6001787	68608JQD6	04-19-2012	44,3	330,935	TO CONSTRUCT A STUDENT HOUSING FACILITY AT SOUTHERN OREGON UNIVERSITY		IERN	X		Х		Х
С	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RAK7	07-11-2013	25,6	596,304	HOUSING FAC	O CONSTRUCT A STUDENT IOUSING FACILITY AT TARLETON TATE UNIVERSITY		Х		X		Х
D	TOLEDO-LUCAS COUNTY PORT AUTHORITY	34-6406986	88927PAL3	05-06-2014	37,9	908,501	HOUSING FAC	O CONSTRUCT A STUDENT DUSING FACILITY AT NIVERSITY OF TOLEDO		X		X		Х
Pa	rt II Proceeds	•	•		,		<u>'</u>		<u>'</u>				'	
	Amount of bonds voticed					Α		В		С	D			
2	Amount of bonds retired Amount of bonds legally defease					1,050	,000	4,170,000		1,20	0,000			325,000
3	Total proceeds of issue					15 210	427	44 252 270		25,723,865 37,9				224.00
4	Gross proceeds in reserve funds				15,310,437 44,353,278 1,163,500 2,765,851									
5	Capitalized interest from proceed						<u> </u>	· · · · · ·	2,765,851 1,929,094 2,909,314 1,566,241			 		
6	Proceeds in refunding escrows .					997	,237	2,909,314		1,56	0,241		۷,۰	5/1,030
7	Issuance costs from proceeds .					220	,950	861,550		ΕO	7 762			594,72
8	Credit enhancement from proces					220	,,,,,	1,194,712	· '		•			
9	Working capital expenditures fro					483	,987	963,031		1 10	7 844		1 (053,29
10	Capital expenditures from proce					12,374	· +	35,395,940				304,38		
11	Other spent proceeds						,145	52,078		20,01	-,,,,,,		30,	49,569
12	Other unspent proceeds						,	210,826						524,496
13	Year of substantial completion .				20	012		2013		2014			2015	
					Yes	No	Yes	No	Yes	N-		Yes		No
14	Were the bonds issued as part o bonds (or, if issued prior to 2018					Х		х		×				Х
15	Were the bonds issued as part o bonds (or, if issued prior to 2018	of an advance refundi 8, an advance refund	ng issue of taxable ing issue)?			х		X		×				Χ
16	Has the final allocation of procee				х		Х		Х			Х		
17	Does the organization maintain a proceeds?	adequate books and	records to support ti	he final allocation of	х		Х		Х			Х		
Pa	rt Ⅲ Private Business Us					•		<u> </u>		•			'	
						Α		В		Ç			D	
					Yes	No	Yes	No	Yes	N ₁	D	Yes		No

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

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

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

Χ Cat. No. 50193E

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Schedule K (Form 990) 2019

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8a

Part IV

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C

Arbitrage

Page 2

Χ

Χ

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No

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Χ

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Χ

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Yes

Χ

Χ

Χ

Yes

Χ

Schedule K (Form 990) 2019

D

В

No

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Χ

Χ

Х

Yes

Χ

Yes

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No

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Yes

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Yes

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Yes

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Yes

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Are there any management or service co

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

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

Page 3

No

D

D

Nο

Yes

Yes

Χ

Nο

Yes

No

Yes

No

Yes

No

Yes

	•	
	Yes	No
oss proceeds invested in a guaranteed investment contract		X

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

Term of GIC

the GIC satisfied?

requirements of section 148? . . .

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part Ⅲ

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

DLN: 93493134027611

Inspection

Employer identification number

	ne of the organization LLEGIATE HOUSING FOUNDATION							Empl	oyer iden	tificatio	n numbe	r			
	LEGIATE HOUSING FOUNDATION									63-1	173425				
P	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue	price		(f) Descripti	on of purpose	e (g) [Defeased	beh) On alf of suer		Pool ncing
										Yes	No	Yes	No	Yes	No
Α	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RAX9	05-29-2014	109,5	574,178	HOUS	CONSTRUCT A ISING FACILI VERSITY - CO	TY AT TEXAS	A&M	X		Х		X
В	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RBL4	06-11-2014	39,9	•	EXPL	SCHEDULE K LANATION FO INE B, COLUM	R PART I, EN	TITY	X		Х		Х
С	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RBZ3	06-19-2014	44,7	'83,024	HOUS	CONSTRUCT A SING FACILI VERSITY - GA	TY AT TEXAS	A&M	X		Х		Х
D	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RCM1	07-02-2014	31,4	149,486	HOUS	CONSTRUCT A SING FACILI VERSITY - CO	TY AT TEXAS	A&M	X		Х		Х
P	art II Proceeds	,								<u> </u>					
1	Amount of bonds retired					A 5,720	000		1,730,000		C 1,810	000		D	785,000
2	Amount of bonds legally defeas					5,720	,,,,,,,		1,730,000		1,810	,000		/	765,000
3	Total proceeds of issue					109,645	,507		39,972,566		44,814	,505		31,4	167,745
4	Gross proceeds in reserve fund					6,740	,355		2,536,437		2,895	,388		2,0	061,730
5	Capitalized interest from proce					6,087	,264		1,915,707		3,285	,339		1,7	742,229
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds .					1,395	,264		766,577		834	,557		E	505,749
8	Credit enhancement from proc	eeds				1,171	,393								
9	Working capital expenditures f	rom proceeds				2,355	,838		964,698		782	,986		ϵ	80,070
10	Capital expenditures from proc	ceeds				91,895	,393		33,789,147		37,016	,233		26,3	377,967
11	Other spent proceeds														
12	Other unspent proceeds														
13	Year of substantial completion				20)15		20	15	2	016		;	2015	
					Yes	No	,	Yes	No	Yes	No		Yes		No
14	Were the bonds issued as part bonds (or, if issued prior to 20	of a current refunding 18, a current refunding	issue of tax-exempt	t 		Х			х		X				Χ
15	Were the bonds issued as part bonds (or, if issued prior to 20	of an advance refundir	ng issue of taxable			х			х		Х				Х
16	Has the final allocation of proc				Х			Х		Х			Χ		
17	Does the organization maintain proceeds?		Х			Х		Х			Х				

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

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

Private Business Use

No

Χ

Α

Yes

В

No

Χ

Χ

Yes

Yes

D

No

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С

No

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Yes

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

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

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

Penalty in Lieu of Arbitrage Rebate?

If "No" to line 1. did the following apply?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

Schedule K (Form 990) 2019

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8a

Part IV

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Arbitrage

Page 2

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No

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Yes

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Yes

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Schedule K (Form 990) 2019

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Yes

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

Page 3

No

D

D

Nο

Yes

Yes

Χ

Nο

Yes

No

Yes

No

Yes

No

Yes

	•	
	Yes	No
oss proceeds invested in a guaranteed investment contract		X

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

Term of GIC

the GIC satisfied?

requirements of section 148? . . .

(Form 990)

Department of the Treasury Internal Revenue Service

Note: To capture the full content of this document, please select landscape mode ($11" \times 8.5"$) when printing. Schedule K

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

DLN: 93493134027611

Inspection

Nam	nal Revenue Service e of the organization LEGIATE HOUSING FOUNDATION	PGC	to <u>www.ns.gov/</u>	<u>rorm990</u> for instruc	cions and the	e latest	. IIIIOI III acioii.			yer ident 73425		n numbe		
Pa	rt I Bond Issues								1 22					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue	price	(f) Descrip	tion of purpose	(g) De	efeased	beh	On alf of suer		Pool ncing
									Yes	No	Yes	No	Yes	No
A	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RDA6	04-02-2015	74,7	•	TO CONSTRUCT HOUSING FACI STATE UNIVERS	LITY AT TARLET	ON	Х		Х		Х
В	ILLINOIS FINANCE AUTHORITY	86-1091967	45202QCM3	05-07-2015	40,0	·	TO CONSTRUCT A STUDENT HOUSING FACILITY AT NORTHEASTERN ILLINOIS UNIVERSITY			Х		Х		X
С	PUBLIC FINANCE AUTHORITY	27-3866124	74439YAK7	06-10-2015	27,3	•	TO CONSTRUCT HOUSING FACI CAROLINA UNIV	LITY AT WESTER	RN	Х		Х		Х
D	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542REA5	06-23-2016	39,5	,	TO CONSTRUCT HOUSING FACI UNIVERSITY - 0	LITY AT TEXAS A	M&A	Х		Х		Х
Pa	rt II Proceeds	•		'										
						A		В	C	:			D	
1	Amount of bonds retired					725	5,000				_			740,000
2	Amount of bonds legally defease										_			
3	Total proceeds of issue					74,800	<u> </u>	40,070,115		27,395,	-+			76,411
4	Gross proceeds in reserve funds					4,572	·	2,568,033		1,752,				262,172
5 6	Capitalized interest from procee Proceeds in refunding escrows.					5,209	9,802	2,465,239		1,560,	48/		1,9	949,172
7	Issuance costs from proceeds .					1.000	. 506	771 000		F42	063			707 222
8	Credit enhancement from proce					1,088	5,300	771,900		542,	062			707,232
9	Working capital expenditures from					1,089	0.069	1,718,993		684,	977		1.3	353,929
10	Capital expenditures from proce					62,796	·	32,545,950		22,790.				986,084
11	Other spent proceeds					02,730	5,200	32,343,330		22,730,	-		32,	700,004
12	Other unspent proceeds					47	2,564			64	310			17,822
13	Year of substantial completion .				20)16	<u> </u>	2016	20:				2017	,
	·				Yes	No		No	Yes	No	+	Yes		No
14	Were the bonds issued as part of bonds (or, if issued prior to 201	of a current refunding 8, a current refunding	issue of tax-exemp	t 		Х		Х		Х				X
15	Were the bonds issued as part or bonds (or, if issued prior to 201					х		Х		Х				X
16	Has the final allocation of proceed				Х		Х			Х	\top	Х		
17	Does the organization maintain proceeds?	adequate books and	records to support t	he final allocation of	Х		X		Х			Х		
Pa	rt III Private Business Us				•		•	-	Į.					

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

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

No

Yes

No

Χ

Χ

Yes

No

Χ

Yes

No

Χ

Yes

Schedule K (Form 990) 2019

d

6

8a

Part IV

b

C

Arbitrage

Page 2

Χ

Χ

No

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Yes

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Schedule K (Form 990) 2019

D

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

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Yes

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No

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

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

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

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

hedge with respect to the bond issue?

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

Term of hedge Was the hedge superintegrated? Was the hedge terminated?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

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

Page 3

No

D

D

Nο

Yes

Yes

Χ

Nο

Yes

No

Yes

No

Yes

No

Yes

	•	
	Yes	No
oss proceeds invested in a guaranteed investment contract		X

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

Term of GIC

the GIC satisfied?

requirements of section 148? . . .

(Form 990)

Department of the Treasury Internal Revenue Service

COLLEGIATE HOUSING FOUNDATION

Name of the organization

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

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

OMB No. 1545-0047

Employer identification number

2019

DLN: 93493134027611

Open to Public Inspection

COL	LEGIATE HOUSING FOUNDATION								63-11	73425				
Pā	rt I Bond Issues													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue p	orice	(f) Descrip	tion of purpose	(g) D	efeased	beh			Pool ncing
									Yes	No	Yes	No	Yes	No
A	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542REK3	06-30-2016	22,79	·	TO CONSTRUCT HOUSING FACII UNIVERSITY - S	LITY AT TEXAS AS	ķМ	Х		Х		Х
В	CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY	68-0164610	13078RHG8	08-17-2017	172,76	´	TO CONSTRUCT HOUSING FACIO OF CALIFORNIA	LITY AT UNVERSI	ТҮ	Х		Х		Х
С	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542RFG1	12-12-2017	90,19	<i>'</i>	O ACQUIRE A STUDENT HOUSING ACILITY AT TEXAS A&M INIVERSITY - CORPUS CHR		NG	Х		Х		Х
D	ILLINOIS FINANCE AUTHORITY	86-1091967	45203KAQ8	12-19-2017	103,93		TO CONSTRUCT HOUSING FACII UNIVERSITY OF CHICAGO	LITY AT		Х		Х		X
Pā	rt II Proceeds													
					А	١		В	(:			D	
1	Amount of bonds retired									3,485,	000			
2	Amount of bonds legally defease	d												
3	Total proceeds of issue					22,861,	,373	176,517,418		90,198,	341		105,7	721,417
4	Gross proceeds in reserve funds					1,308,	,286	9,678,750		5,995,	931		6,:	194,689
5	Capitalized interest from proceed					1,084,	,753	15,123,215					7,7	747,752
6	Proceeds in refunding escrows .													
7	Issuance costs from proceeds .					399,	,300	1,693,576		1,404,	215		1,7	787,905
8	Credit enhancement from procee													
9	Working capital expenditures fro	m proceeds				505,	,506	4,236,713					2,4	118,937
10	Capital expenditures from proce					19,189,	,612	142,434,456		82,020,	046		83,4	107,850
11	Other spent proceeds													
12	Other unspent proceeds					373,	,916	3,350,709		778,	149		4,:	164,285
13	Year of substantial completion .				20:	17	2	.019	20	17			2019	
					Yes	No	Yes	No	Yes	No		Yes		No
14	Were the bonds issued as part o bonds (or, if issued prior to 2018	f a current refunding 3, a current refunding	issue of tax-exemp issue)?	t 		Х		Х		Х				X
15	Were the bonds issued as part o bonds (or, if issued prior to 2018	3, an advance refundi	ing issue)?			Х		Х		Х				Χ
16	Has the final allocation of procee	eds been made?			Х			X		Χ				Χ
17	Does the organization maintain a proceeds?	adequate books and r	ecords to support t	he final allocation of	×		Х		Х			Х		
Pā	rt Ⅲ Private Business Us	e												

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

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

No

Χ

Yes

No

Χ

Χ

Yes

No

Χ

Yes

No

Χ

Yes

Schedule K (Form 990) 2019

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C

d

6

8a

Part IV

b

C

Arbitrage

Page 2

Χ

Χ

Χ

No

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Yes

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Schedule K (Form 990) 2019

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Yes

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Yes

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

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

Penalty in Lieu of Arbitrage Rebate?

If "No" to line 1. did the following apply?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

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

	Yes	No	
Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х	

Schedule K (Form 990) 2019

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

Term of GIC

requirements of section 148? . . .

Yes

No

Yes

No

Page 3

No

D

D

Nο

Yes

Yes

Χ

Nο

No

Yes

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

Employer identification number

DLN: 93493134027611

Inspection

Nam	ne of the organization LLEGIATE HOUSING FOUNDATION								Emplo	yer ident	ificatio	n numbe	r	
COI	LEGIATE HOUSING FOUNDATION								63-11	73425				
P	art I Bond Issues								·					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue	price	(f) Descript	ion of purpose	(g) D	efeased	beh) On alf of suer		Pool ncing
									Yes	No	Yes	No	Yes	No
A	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	64542YAN6	03-20-2018	74,3	348,245	TO CONSTRUCT FACILITY AT TEX UNIVERSITY			X		X		X
В	KENT COUNTY DELAWARE	51-6000145	490237AR5	05-08-2018	74,€	65,463	TO CONSTRUCT A STUDENT HOUSING FACILITY AT DELAWARE STATE UNIVERSITY		ARE	Х		Х		Х
С	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	75-6002618	64542YBH8	08-30-2018	19,4	157,868	868 SEE SCHEDULE K PART VI EXPLANATION FOR PART I, ENTITY 7, LINE C, COLUMN F		TITY	Х		Х		Х
D	CALIFORNIA MUNICIPAL FINANCE AUTHORITY	20-1563466	13049YBNO	12-13-2018	560,2	242,616	TO CONSTRUCT HOUSING FACIL UNIVERSITY OF	ITY AT THE	AV	Х		Х		Х
P	art II Proceeds								•					
						A		В					D	
1	Amount of bonds retired													
2	Amount of bonds legally defeas													
3	Total proceeds of issue					75,518	<u> </u>	75,924,103		19,760,				747,629
4	Gross proceeds in reserve fund					4,090	<u>'</u>	4,269,459		1,030,				03,602
5	Capitalized interest from proce					4,635	5,013	4,452,778		927,	442		35,7	714,133
6	Proceeds in refunding escrows													
7	Issuance costs from proceeds .					1,357	·	1,459,044		358,				232,788
8	Credit enhancement from proce					1,175	·			297,				359,646
9	Working capital expenditures for					1,321	· -	1,369,447		171,				248,570
10	Capital expenditures from proc					60,042	2,363	57,823,442		16,746,	424		255,8	81,710
11	Other uppert proceeds							176,713						
12	Other unspent proceeds Year of substantial completion				1	2,897	·	6,417,109		229,	051		252,8	307,180
13	Tear or substantial completion	· · · · · ·	· · · · ·	• •	Yes	019 N o		No No	20 Yes	No No	+	Yes	_	No
14	Were the bonds issued as part bonds (or, if issued prior to 20:	of a current refunding 18, a current refunding	issue of tax-exemp	t	163	X		X	163	X		163		X
15	Were the bonds issued as part bonds (or, if issued prior to 20:	of an advance refundir	ng issue of taxable			Х		х		Х				Х
16	Has the final allocation of proce	eeds been made?				Х		Х		Χ				X
17	Does the organization maintain proceeds?	n adequate books and r			Х		Х		Х			Х		
P	art III Private Business U					•	•	·			•		•	
	_					_		_		-			_	

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

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

No

Χ

Yes

No

Χ

Χ

Α

Yes

Yes

D

No

Χ

Χ

C

No

Χ

Χ

Yes

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

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

Penalty in Lieu of Arbitrage Rebate?

If "No" to line 1. did the following apply?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

b

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d

6

8a

Part IV

b

C

Arbitrage

Page 2

Χ

Χ

No

Χ

Χ

Χ

Χ

Χ

Yes

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Schedule K (Form 990) 2019

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No

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Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

requirements of section 148? . . .

	res	NO	res	NO	res
gross proceeds invested in a guaranteed investment contract		Х	Х		

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

BAYERISCHE LANDESBANK

Yes

No

Page 3

No

D

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Nο

Yes

Yes

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No

Yes

1000.0000000000 %

Yes

No

Schedule K

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

Employer identification number

DLN: 93493134027611

Inspection

	e of the organization								Emplo	yer iden	tificatio	n numbe	er	
COL	LEGIATE HOUSING FOUNDATION								63-11	173425				
Pā	rt I Bond Issues								•					
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Descript	ion of purpose	(g) D	efeased	beh) On alf of suer		Pool ncing
									Yes	No	Yes	No	Yes	No
A	CALIFORNIA MUNICIPAL FINANCE AUTHORITY	20-1563466	13049YCL3	12-14-2018	156,8	891,289	TO CONSTRUCT HOUSING FACIL UNIVERSITY OF	ITY AT THE	,	X		X		Х
В	PUBLIC FINANCE AUTHORITY	27-3866124	74439YBG5	12-20-2018	156,	568,030	TO CONSTRUCT A STUDENT HOUSING FACILITY AT UNC WILMINGTON			X		X		Х
С	NEW HOPE CULTURAL EDUCATION FACILITIES FINANCE CORPORATION	26-1604618	000000000	04-05-2019	37,3	373,103	TO CONSTRUCT HOUSING FACIL VIEW A&M UNIV	ITY AT PRAIRIE		X		X		Х
D	CALIFORNIA MUNICIPAL FINANCE AUTHORITY	20-1563466	13049YEC1	07-17-2019	210,4	418,504	TO CONSTRUCT HOUSING FACIL UNIVERSITY OF	ITY AT THE	≣R	X		X		Х
Pa	rt II Proceeds								'	'	·	<u>'</u>		
						Α		В					D	
1	Amount of bonds retired													
2	Amount of bonds legally defeas													
3	Total proceeds of issue					160,607	·	160,655,499		37,373	,283			241,887
4	Gross proceeds in reserve funds					8,986	· · ·	4,500,324						347,223
5	Capitalized interest from procee					9,880	0,043	7,376,420		571	,975		7,2	245,746
6	Proceeds in refunding escrows													
7	Issuance costs from proceeds .					1,732	<u> </u>	2,181,774		643	,968			597,272
8	Credit enhancement from proce						7,453	2,423,311						353,687
9	Working capital expenditures fr						5,923	30,000			,760			
10	Capital expenditures from proce					108,137	7,318	81,487,309		29,614	,157		75,0	046,640
11	Other spent proceeds													
12	Other unspent proceeds					31,217	7,599	62,656,362		6	,411		117,5	551,319
13	Year of substantial completion .					1								
					Yes	No	Yes	No	Yes	No		Yes		No
14	Were the bonds issued as part of bonds (or, if issued prior to 201	.8, a current refunding	j issue)?			Х		Х		Х				X
15	Were the bonds issued as part of bonds (or, if issued prior to 201	.8, an advance refundi	ing issue)?			Х		Х		Х				X
16	Has the final allocation of proce	eds been made?				Х		X		Х				Х
17	Does the organization maintain proceeds?				Х		Х		Х			Χ		
Pa	rt Ⅲ Private Business Us	se												
						<u> </u>		В			+		D	
١.					Yes	No	Yes Yes	No	Yes	No		Yes		No

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

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

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Schedule K (Form 990) 2019

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C

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6

8a

Part IV

b

C

Arbitrage

Page 2

Χ

Χ

Χ

No

Χ

Χ

Χ

Χ

D

Yes

Χ

Χ

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Yes

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Schedule K (Form 990) 2019

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No

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Yes

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Yes

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No

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C

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

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

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

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

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

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

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

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

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

hedge with respect to the bond issue?

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

Term of hedge Was the hedge terminated?

the issue are remediated in accordance with the requirements under

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

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

Part IV

(GIC)?

period?

Part V

Arbitrage (Continued)

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

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

Term of GIC

requirements of section 148? . . .

		•
	Yes	No
s proceeds invested in a guaranteed investment contract		V

No

Yes

Yes

No

No

Yes

В

No

Yes

Yes

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

Page 3

No

D

D

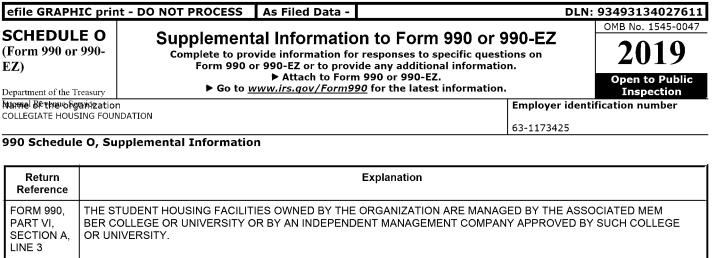
No

Yes

Yes

Χ

Nο



Return Explanation
Reference

FORM 990,	ANY COLLEGE OR UNIVERSITY FOR WHICH THE ORGANIZATION OWNS AND OPERATES A STUDENT HOUSING F
PART VI,	ACILITY OR RELATED IMPROVEMENTS IS A MEMBER OF THE ORGANIZATION AS LONG AS THE ORGANIZATIO
SECTION A,	N OWNS OR OPERATES SUCH FACILITIES.
LINE 6	

Return Explanation
Reference

LINE 7A

FORM 990, THE MEMBER COLLEGES AND UNIVERSITIES ELECT MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS PART VI, SECTION A,

Return Explanation

FORM 990, ORGANIZATION HAS NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

PART VI,
SECTION A,
LINE 8B

Return Explanation

FORM 990, A DRAFT OF THE FORM 990 IS PREPARED BY THE ORGANIZATION'S ACCOUNTING FIRM, AND AFTER REVIE
PART VI, W BY THE ORGANIZATION'S LEGAL COUNSEL, IS REVIEWED AND APPROVED BY THE CFO OF THE ORGANIZA
SECTION B, TION BEFORE BEING FILED. A COPY IS ALSO FURNISHED TO EACH OF THE ORGANIZATION'S BOARD MEMB
LINE 11B ERS PRIOR TO FILING.

Return Explanation
Reference

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

Return Explanation
Reference

FORM 990,	THE BOARD OF DIRECTORS REVIEWED COMPETITIVE MARKET DATA, SALARY DATA AND/OR COMPENSATION R
PART VI,	EPORTS PREPARED BY AN INDEPENDENT EXECUTIVE COMPENSATION FIRM FOR INDIVIDUALS IN FUNCTIONA
SECTION B,	LLY COMPARABLE POSITIONS PRIOR TO DETERMINING THE COMPENSATION FOR ITS TOP MANAGEMENT OFFI
LINE 15	CIAL, TOP FINANCIAL OFFICER, AND SENIOR MANAGEMENT OFFICIALS AND BASED ITS OFFICERS' SALAR
	IES ON SUCH INFORMATION.

Return Explanation
Reference

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

Return Explanation

Kelefellee	
FORM 990,	CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS: -1,305,191. IMPLEMENTATION OF NEW ACCOUNTING
PART XI,	STANDARDS FOR LEASES -6,586,643.
LINE 9:	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493134027611 OMB No. 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2019 (Form 990) ▶ 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 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization COLLEGIATE HOUSING FOUNDATION 63-1173425 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. See Additional Data Table (b) (e) Legal domicile (state Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets or foreign country) 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. (b) (g) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Direct controlling Section 512(b) Primary activity Public charity status or foreign country) (if section 501(c)(3)) (13) controlled entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule R (Form 990) 2019

Cat. No. 50135Y

(a) Name, address, and EIN of related organization	ress, and EIN of		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominan income(relate unrelated, excluded fro tax under sections 512 514)	ed, total incom		Disprop	h) rtionate tions?	(i) Code V-UB amount in b 20 of Schedule K- (Form 1065	General Genera	(j) eral or naging tner?	(k) Percentage ownership
					314)			Yes	No		Yes	No	
									1			1 1	
The Identification of Polated Overnin	ations Tayable as a f	`aunauatian	Dr. Truck	• Complete	o if the own	nization and	awarad "Vo	a" on [orm (200 Part I	V line	24	
rt IV Identification of Related Organiz because it had one or more related or						nization ans	swered "Ye:	s" on F	orm 9	990, Part I	V, line	e 34	
		s a corporatio	on or trus (c) egal micile or foreign	st during th	(d)	(e)	(f) Share of total income	Share	(g) of end- year assets	-of- Perc	V, line (h) entage ership	Si (1	(i) ection 512(b 3) controlle entity?
because it had one or more related of (a) Name, address, and EIN of	organizations treated as	s a corporatio	on or trus (c) egal micile	st during th	(d)	(e) ype of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	Si (1	ection 512(b .3) controlle
because it had one or more related of (a) Name, address, and EIN of	organizations treated as	s a corporatio	on or trus (c) egal micile or foreign	st during th	(d)	(e) ype of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	Si (1	ection 512(b .3) controlle entity?
because it had one or more related of (a) Name, address, and EIN of	organizations treated as	s a corporatio	on or trus (c) egal micile or foreign	st during th	(d)	(e) ype of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	Si (1	ection 512(b .3) controlle entity?
because it had one or more related of (a) Name, address, and EIN of	organizations treated as	s a corporatio	on or trus (c) egal micile or foreign	st during th	(d)	(e) ype of entity corp, S corp,	(f) Share of total	Share	(g) of end- year	-of- Perc	(h) entage	Si (1	ection 512(b .3) controlle entity?

Page **3**

Pa	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	T		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	La		
b	Gift, grant, or capital contribution to related organization(s)	Lb		
C	Gift, grant, or capital contribution from related organization(s)	ГС		

	one, grante, or capital contribution to related organization(3).	i I	
c	Gift, grant, or capital contribution from related organization(s)	1c	
d	Loans or loan guarantees to or for related organization(s)	1d	
е	Loans or loan guarantees by related organization(s)	1e	
f	Dividends from related organization(s)	1f	
g	Sale of assets to related organization(s)	1 g	
h	Purchase of assets from related organization(s)	1h	

f Dividends from related organization(s)	1 f	
g Sale of assets to related organization(s)	1 g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	11	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	10	
p Reimbursement paid to related organization(s) for expenses	1 p	
q Reimbursement paid by related organization(s) for expenses	1 q	
r Other transfer of cash or property to related organization(s)	1r	

l Performance of services or membership or fundraising solicitations for related organization(s)				11
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n
o Sharing of paid employees with related organization(s)				10
p Reimbursement paid to related organization(s) for expenses				1p
q Reimbursement paid by related organization(s) for expenses				1q
${f r}$ Other transfer of cash or property to related organization(s)				1r
s Other transfer of cash or property from related organization(s)				1s
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	e, including covered r	relationships and tra	nsaction thresholds.	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount involved

r Other transfer of cash or property to related organization(s)				1r	
\boldsymbol{s} Other transfer of cash or property from related organization(s)				1s	
2 If the answer to any of the above is "Yes," see the instructions for information on who must c	omplete this line, including covered	relationships and tran	saction thresholds.		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount involved	t
	<u> </u>		Schedule R	(Form 990)	2019

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	or	(e) e all partners section 501(c)(3) ·ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner?	g ?	(k) Percentage ownership
			317)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Form	1990	0) 2019

Schedule R (Fo	rm 990) 2019		Page 5					
Part VII	Supplemental Information							
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).						
Retu	ırn Reference	Explanation						

Software ID: Software Version:

EIN: 63-1173425

Name: COLLEGIATE HOUSING FOUNDATION

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

Form 990, Schedule R, Part I - Identification of Disregarded E	ntities 	1	1	1	I
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
CHF-WINOOSKI LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-1480741	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,459,771	17,959,353	N/A
CHF-IRVINE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-2001737	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	73,807,005	551,431,529	N/A
CHF-HOLLAND SUITES LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-8580707	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,341,055	8,253,991	N/A
CHF-HOLLAND SUITES II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 26-1705515	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	814,342	4,997,373	N/A
CHF-ELON LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 20-2956535	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	5,024,352	19,655,848	N/A
CHF - WYOMING LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 45-2392042	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,001,299	14,989,602	N/A
CHF - TOLEDO LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 34-6406986	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	ОН	4,599,279	33,505,596	N/A
CHF - STEPHENVILLE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-2718055	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,275,909	20,845,896	N/A
CHF - DEKALB III LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-5438414	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - DEKALB II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-2995547	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	13,673,735	90,273,321	N/A
CHF - CULLOWHEE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-3010505	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,843,563	26,636,590	N/A
CHF - COOK LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-2289120	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	4,179,915	38,807,840	N/A
CHF - NORMAL LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-2995601	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - COLLEGIATE HOUSING STEPHENVILLE III LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-2994648	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	7,680,471	68,028,057	N/A
CHF - COLLEGIATE HOUSING STEPHENVILLE II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4848255	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,898,959	31,144,640	N/A
CHF - COLLEGIATE HOUSING SAN ANTONIO I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-2371178	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,769,827	20,905,987	N/A
CHF - COLLEGIATE HOUSING ISLAND CAMPUS LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-1816268	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	13,162,074	83,792,348	N/A
CHF - COLLEGIATE HOUSING GALVESTON I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4881222	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	4,388,401	38,722,251	N/A
CHF - COLLEGIATE HOUSING CORPUS CHRISTI II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 81-1951661	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	3,690,711	35,300,235	N/A
CHF - COLLEGIATE HOUSING CORPUS CHRISTI I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4867332	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,987,603	25,876,486	N/A

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CHF - COLLEGIATE HOUSING COMMERCE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 47-4897746	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	2,613,128	30,152,181	N/A
CHF - COLLEGIATE HOUSING COLLEGE STATION I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 46-4862462	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	11,246,156	93,015,178	N/A
CHF - CIA LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 27-3512639	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,611,961	12,948,794	N/A
CHF - ASHLAND LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 45-3727372	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	6,331,742	36,173,178	N/A
CHF-DELAWARE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 52-2236764	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - CHICAGO LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-2664576	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	8,008,287	105,716,378	N/A
CHF - COLLEGIATE HOUSING DENTON LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-3240693	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	4,826,959	92,678,628	N/A
CHF - DOVER LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-4275274	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	5,377,805	78,234,875	N/A
CHF - ST DAVIDS LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-4894872	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	1,132,196	3,528,978	N/A
CHF - DAVIS I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-3758340	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	589,153,699	N/A
CHF - SANTA CRUZ I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-3747222	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - DAVIE LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 82-5078485	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A
CHF - RIVERSIDE I LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 83-1318857	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	175,569,950	N/A
CHF - WILMINGTON LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 83-1488823	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	165,844,887	N/A
CHF - COLLEGIATE HOUSING PRAIRIE VIEW IX LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 83-3610376	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	33,068,424	N/A
CHF - RIVERSIDE II LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 83-4237507	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	245,920,239	N/A
CHF - SAN JUAN LLC POST OFFICE BOX 1385 FAIRHOPE, AL 365331385 83-3342813	TO FINANCE, OWN AND OPERATE STUDENT HOUSING FACILITIES FOR THE UNIVERSITY	AL	0	0	N/A