

MR. JAMES CARROLL  
MERCY HOUSING, INC.  
1999 BROADWAY, SUITE 1000  
DENVER, CO 80202

ENCLOSED ARE THE ORIGINAL AND ONE COPY OF THE 2016 EXEMPT ORGANIZATION RETURNS, AS FOLLOWS...

WE HAVE PREPARED THE FOLLOWING TAX RETURNS PRIMARILY FROM THE INFORMATION YOU FURNISHED. SINCE YOU HAVE THE FINAL RESPONSIBILITY FOR THE TAX RETURNS, YOU SHOULD REVIEW THEM CAREFULLY BEFORE YOU SIGN AND FILE THEM OR AUTHORIZE THEM TO BE ELECTRONICALLY FILED.

2016 FORM 990

2016 CALIFORNIA FORM 199

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

KATHY BLACKBURN

# TAX RETURN FILING INSTRUCTIONS

FORM 990

**FOR THE YEAR ENDING**  
DECEMBER 31, 2016

---

**PREPARED FOR:**

MR. JAMES CARROLL  
MERCY HOUSING, INC.  
1999 BROADWAY, SUITE 1000  
DENVER, CO 80202

---

**PREPARED BY:**

COHNREZNICK LLP  
525 NORTH TRYON STREET  
CHARLOTTE, NC 28202

---

**AMOUNT DUE OR REFUND:**

NOT APPLICABLE

---

**MAKE CHECK PAYABLE TO:**

NOT APPLICABLE

---

**MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:**

NOT APPLICABLE

---

**RETURN MUST BE MAILED ON OR BEFORE:**

NOT APPLICABLE

---

**SPECIAL INSTRUCTIONS:**

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER YOU HAVE REVIEWED THE RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN, DATE AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL TRANSMIT THE RETURN ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED. RETURN FORM 8879-EO TO US BY NOVEMBER 15, 2017

PLEASE ENSURE YOU HAVE MET ALL YOUR FILING REQUIREMENTS FOR THE CORRECT INCLUSION OF ANY FOREIGN TRANSACTION OR INFORMATION. FAILURE TO FILE FOREIGN INFORMATIONAL FORMS WILL POTENTIALLY SUBJECT YOU TO SUBSTANTIAL PENALTIES. PLEASE CONTACT US IF YOU BELIEVE YOU HAVE ANY FOREIGN ACTIVITY OR INVESTMENT AND/OR FOREIGN BANK OR SECURITIES ACCOUNT THAT NEED TO BE ADDRESSED.

Form **8879-EO**

# IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning \_\_\_\_\_, 2016, and ending \_\_\_\_\_, 20\_\_\_\_

# 2016

Department of the Treasury  
Internal Revenue Service

**Do not send to the IRS. Keep for your records.**

**Information about Form 8879-EO and its instructions is at [www.irs.gov/form8879eo](http://www.irs.gov/form8879eo).**

Name of exempt organization

Employer identification number

**MERCY HOUSING INC**

**47-0646706**

Name and title of officer

**VINCE DODDS**

**VICE PRESIDENT**

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

<b>1a</b> Form 990 check here	<input checked="" type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12)	<b>1b</b>	<u>23,324,750.</u>
<b>2a</b> Form 990-EZ check here	<input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9)	<b>2b</b>	_____
<b>3a</b> Form 1120-POL check here	<input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22)	<b>3b</b>	_____
<b>4a</b> Form 990-PF check here	<input type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part VI, line 5)	<b>4b</b>	_____
<b>5a</b> Form 8868 check here	<input type="checkbox"/>	<b>b Balance Due</b> (Form 8868, line 3c)	<b>5b</b>	_____

## Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

**Officer's PIN: check one box only**

I authorize COHNREZNICK LLP to enter my PIN 46706  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature \_\_\_\_\_ Date \_\_\_\_\_

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**69502622147**

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature \_\_\_\_\_ Date \_\_\_\_\_

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form To the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2016)

623051 09-26-16

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2016**  
Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**A For the 2016 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> MERCY HOUSING INC Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1999 BROADWAY SUITE 1000 City or town, state or province, country, and ZIP or foreign postal code DENVER, CO 80202 <b>F Name and address of principal officer:</b> STEVE SPEARS 1999 BROADWAY SUITE 1000, DENVER, CO 80202	<b>D Employer identification number</b> 47-0646706  <b>E Telephone number</b> (303) 830-3300  <b>G Gross receipts \$</b> 23,324,750. <b>H(a) Is this a group return for subordinates?</b> ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all subordinates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J Website:</b> ▶ WWW.MERCYHOUSING.ORG		
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L Year of formation:</b> 1981 <b>M State of legal domicile:</b> NE

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TO DEVELOP, OWN, AND OPERATE LOW-INCOME HOUSING &amp; PROVIDE SERVICES TO LOW-INCOME FAMILIES,</b>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	18
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	18
	<b>5</b>	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	<b>5</b>	498
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	0
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.
	<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>
<b>9</b>		Program service revenue (Part VIII, line 2g)	8,917,305.	10,217,802.
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,530,488.	12,494,081.
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	632,239.	612,867.
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
<b>12</b>			19,080,032.	23,324,750.
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,055,864.	1,759,065.
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,257,392.	12,117,155.
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ 243,025.		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-3,396,122.	-376,694.
<b>Net Assets or Fund Balances</b>	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,917,134.	13,499,526.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	8,162,898.	9,825,224.
	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>21</b>	Total liabilities (Part X, line 26)	72,247,998.	73,953,767.	
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	47,942,038.	39,822,583.	
		24,305,960.	34,131,184.	

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer VINCE DODDS, VICE PRESIDENT Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name KATHY BLACKBURN Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P00450629 Firm's name ▶ COHNREZNICK LLP Firm's EIN ▶ 22-1478099 Firm's address ▶ 525 NORTH TRYON STREET CHARLOTTE, NC 28202 Phone no. 704-332-9100	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: THE MISSION AND CHARITABLE PURPOSE OF MERCY HOUSING, INC. IS TO MANAGE OR DIRECT ENTITIES WHICH ARE ORGANIZED FOR THE PURPOSE OF CREATING STABLE, VIBRANT AND HEALTHY COMMUNITIES BY DEVELOPING, FINANCING, AND OPERATING AFFORDABLE, PROGRAM-ENRICHED HOUSING FOR FAMILIES, SENIORS,

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 9,095,412. including grants of \$ 1,759,065. ) (Revenue \$ 12,494,081. ) MERCY HOUSING, INC.'S PROGRAM SUPPORTS AFFORDABLE HOUSING AND RESIDENT SERVICES FOR LOW- AND MODERATE-INCOME PERSONS AND INCLUDES ACTIVITIES OF ASSET MANAGEMENT, HOUSING DEVELOPMENT, CONSULTING SERVICES, CONSTRUCTION MANAGEMENT AND FINANCIAL SERVICES SPECIFICALLY RELATED TO DEVELOPMENT OF AFFORDABLE HOUSING.

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

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

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

4e Total program service expenses 9,095,412.

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question numbers (1a-14b), Yes/No checkboxes, and numerical answers (e.g., 100, 0, 498). Includes sections for backup withholding, employee reporting, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.



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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 18; 1b Enter the number of voting members included... 18; 2 Did any officer, director, trustee... X; 3 Did the organization delegate control... X; 4 Did the organization make any significant changes... X; 5 Did the organization become aware... X; 6 Did the organization have members... X; 7a Did the organization have members... X; 7b Are any governance decisions... X; 8 Did the organization contemporaneously document... 8a X, 8b X; 9 Is there any officer, director, trustee... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters... X; 10b If "Yes," did the organization have written policies... X; 11a Has the organization provided a complete copy... X; 11b Describe in Schedule O the process...; 12a Did the organization have a written conflict of interest policy... X; 12b Were officers, directors, or trustees... X; 12c Did the organization regularly and consistently monitor... X; 13 Did the organization have a written whistleblower policy... X; 14 Did the organization have a written document retention... X; 15 Did the process for determining compensation... 15a X, 15b X; 16a Did the organization invest in, contribute assets... X; 16b If "Yes," did the organization follow a written policy... X

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL, KS
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: STEVE SPEARS - 303-830-3300 1999 BROADWAY SUITE 1000, DENVER, CO 80202

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ADRIENNE CROWE DIRECTOR/VICE-CHAIRMAN	1.00	X					0.	0.	0.	
(2) BARRY ZIGAS DIRECTOR/CHARIMAN	1.00	X					0.	0.	0.	
(3) BARBARA KELLEY DIRECTOR	1.00	X					0.	0.	0.	
(4) BOB TETRAULT DIRECTOR	1.00	X					0.	0.	0.	
(5) CAROL WETMORE DIRECTOR	1.00	X					0.	0.	0.	
(6) CHARLIE FRANCIS DIRECTOR	1.00	X					0.	0.	0.	
(7) DOUG JUTTE DIRECTOR	1.00	X					0.	0.	0.	
(8) JIM PARK DIRECTOR	1.00	X					0.	0.	0.	
(9) LESLIE WITTMANN DIRECTOR	1.00	X					0.	0.	0.	
(10) PATRICIA COCHRAN DIRECTOR	1.00	X					0.	0.	0.	
(11) SCOTT POCOCK DIRECTOR	1.00	X					0.	0.	0.	
(12) SR. BARBARA BUSCH DIRECTOR	1.00	X					0.	0.	0.	
(13) SR. DIANE HEJNA DIRECTOR	1.00	X					0.	0.	0.	
(14) SR. LINDA WERTHMAN DIRECTOR	1.00	X					0.	0.	0.	
(15) SR. PAT MCDERMOTT DIRECTOR	1.00	X					0.	0.	0.	
(16) SR. ROSE MARIE JASINSKI DIRECTOR	1.00	X					0.	0.	0.	
(17) SUZANNE SWIFT DIRECTOR	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) YVONNE CAMACHO DIRECTOR	1.00	X					0.	0.	0.	
(19) BILL RUMPF SENIOR VICE PRESIDENT	40.00			X			206,530.	0.	13,400.	
(20) CADE SCHOLL VICE PRESIDENT	40.00			X			162,281.	0.	35,474.	
(21) CAROL BRESLAU SENIOR VICE PRESIDENT	40.00			X			190,925.	0.	6,966.	
(22) CHERYLL O'BRYAN SENIOR VP/PRESIDENT OF MHM	0.00 40.00			X			0.	286,386.	30,280.	
(23) CHRIS BURCKHARDT SENIOR VICE PRESIDENT/ COO	40.00			X			279,517.	0.	38,802.	
(24) CHRISTOPHER REED VICE PRESIDENT	0.00 40.00			X			0.	241,767.	10,853.	
(25) CHRISTY RICHARDSON SENIOR VICE PRESIDENT	40.00			X			194,635.	0.	40,666.	
(26) DOUG SHOEMAKER SENIOR VICE PRESIDENT	40.00			X			213,552.	0.	18,938.	
<b>1b Sub-total</b>							1,247,440.	528,153.	195,379.	
<b>c Total from continuation sheets to Part VII, Section A</b>							2,905,770.	0.	409,025.	
<b>d Total (add lines 1b and 1c)</b>							4,153,210.	528,153.	604,404.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **21**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
COHNREZNICK LLP, 525 N. TRYON STREET, SUITE 1000, CHARLOTTE, NC 28202	ACCOUNTING SERVICES	2,256,358.
SIMPSON GARRITY INNES & JACUZZI, 601 GATEWAY BLVD, SUITE 950, SAN FRANCISCO, CA	LEGAL SERVICES	623,654.
GRANITE TELECOMMUNICATIONS PO BOX 983119, BOSTON, MA 02298-3119	TELECOMMUNICATIONS	568,898.
5280 RESOURCES LLC 4900 HOMESTEAD STREET, BOW MAR, CO 80123	CONSULTING	178,135.
SMITH DALIA ARCHITECTS LLC, 621 N AVE NE, SUITE C-140, ATLANTA, GA 30308	ARCHITECTURE	159,492.

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 **9**

SEE PART VII, SECTION A CONTINUATION SHEETS



**Part VIII Statement of Revenue**

Check if Schedule O contains a response 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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>				
	<b>b</b> Membership dues .....	<b>1b</b>				
	<b>c</b> Fundraising events .....	<b>1c</b>				
	<b>d</b> Related organizations .....	<b>1d</b>	2,910,917.			
	<b>e</b> Government grants (contributions) .....	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	7,306,885.			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....					
	<b>h Total.</b> Add lines 1a-1f .....			10,217,802.		
<b>Program Service Revenue</b>	<b>2 a</b> INSURANCE REIMB. FROM PROPERTIES .....	<b>Business Code</b> 531390	8,437,890.	8,437,890.		
	<b>b</b> SERVICE FEES .....	531390	3,391,516.	3,391,516.		
	<b>c</b> INTEREST .....	531390	771,636.	771,636.		
	<b>d</b> MISCELLANEOUS REVENUE .....	531390	101,035.	101,035.		
	<b>e</b> LEASE INCOME .....	531390	43,829.	43,829.		
	<b>f</b> All other program service revenue .....	531390	-251,825.	-251,825.		
	<b>g Total.</b> Add lines 2a-2f .....			12,494,081.		
	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			612,867.		612,867.
<b>4</b> Income from investment of tax-exempt bond proceeds .....						
<b>5</b> Royalties .....						
<b>Other Revenue</b>	<b>6 a</b> Gross rents .....	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses .....					
	<b>c</b> Rental income or (loss) .....					
	<b>d</b> Net rental income or (loss) .....					
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities (ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....					
	<b>c</b> Gain or (loss) .....					
	<b>d</b> Net gain or (loss) .....					
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>				
	<b>b</b> Less: direct expenses .....	<b>b</b>				
	<b>c</b> Net income or (loss) from fundraising events .....					
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>				
	<b>b</b> Less: direct expenses .....	<b>b</b>				
	<b>c</b> Net income or (loss) from gaming activities .....					
	<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>				
	<b>b</b> Less: cost of goods sold .....	<b>b</b>				
	<b>c</b> Net income or (loss) from sales of inventory .....					
	<b>Miscellaneous Revenue</b>		<b>Business Code</b>			
<b>11 a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....						
<b>12 Total revenue.</b> See instructions. ....			23,324,750.	12,494,081.	0.	612,867.

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,759,065.	1,759,065.		
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	2,572,253.	590,820.	1,639,904.	341,529.
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	7,831,419.	1,867,528.	5,846,219.	117,672.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	246,723.	64,637.	169,854.	12,232.
9 Other employee benefits	749,039.	260,484.	439,466.	49,089.
10 Payroll taxes	717,721.	161,450.	534,874.	21,397.
11 Fees for services (non-employees):				
a Management	438,932.	100,217.	309,508.	29,207.
b Legal	756,013.	1,603.	754,410.	
c Accounting	91,751.	332.	91,106.	313.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	350,172.	45,489.	303,183.	1,500.
12 Advertising and promotion	148,706.	6,170.	142,536.	
13 Office expenses	854,419.	83,275.	738,910.	32,234.
14 Information technology	810,435.	36,481.	770,218.	3,736.
15 Royalties				
16 Occupancy	499,776.	41,959.	437,442.	20,375.
17 Travel	612,730.	326,513.	163,226.	122,991.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,381.	6,482.	6,157.	6,742.
20 Interest	1,027,401.		1,027,401.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	23,409.		23,409.	
23 Insurance	18,011.	3,064.	14,947.	
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 <b>INSURANCE EXP FOR PROPE</b>	3,490,900.	3,490,900.		
b <b>CONTRACT LABOR-TEMP</b>	530,637.	388,222.	140,712.	1,703.
c <b>MISCELLANEOUS ADMIN</b>	404,573.	49,962.	354,811.	-200.
d <b>BANK SERVICE CHARGES</b>	362,058.		362,058.	
e All other expenses	-10,815,998.	-189,241.	-10,109,262.	-517,495.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>13,499,526.</b>	<b>9,095,412.</b>	<b>4,161,089.</b>	<b>243,025.</b>
26 <b>Joint costs.</b> 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)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	30,089,309.	<b>2</b>	25,881,453.
	<b>3</b> Pledges and grants receivable, net .....	2,550,135.	<b>3</b>	1,600,135.
	<b>4</b> Accounts receivable, net .....	935,411.	<b>4</b>	3,539,690.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	8,099,475.	<b>7</b>	11,353,261.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	1,880,679.	<b>9</b>	1,663,677.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 4,754,792.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 3,798,118.	926,414.	<b>10c</b> 956,674.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....	7,927,640.	<b>13</b>	9,000,094.
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	19,838,935.	<b>15</b>	19,958,783.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	72,247,998.	<b>16</b>	73,953,767.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	5,874,822.	<b>17</b>	5,211,564.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	8,430,954.	<b>19</b>	4,727,189.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	21,053,703.	<b>24</b>	18,363,377.
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	12,582,559.	<b>25</b>	11,520,453.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	47,942,038.	<b>26</b>	39,822,583.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	18,492,173.	<b>27</b>	29,401,663.
	<b>28</b> Temporarily restricted net assets .....	5,058,787.	<b>28</b>	3,974,521.
	<b>29</b> Permanently restricted net assets .....	755,000.	<b>29</b>	755,000.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	24,305,960.	<b>33</b>	34,131,184.	
<b>34</b> Total liabilities and net assets/fund balances .....	72,247,998.	<b>34</b>	73,953,767.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	23,324,750.
2	Total expenses (must equal Part IX, column (A), line 25)	2	13,499,526.
3	Revenue less expenses. Subtract line 2 from line 1	3	9,825,224.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24,305,960.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	34,131,184.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2016)





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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2015 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2015.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	1503872.	3700214.	6909558.	8917305.	10217802.	31248751.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....	1723254.	2977151.	4598819.	9530488.	12494081.	31323793.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....	3227126.	6677365.	11508377.	18447793.	22711883.	62572544.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....		29,610.	437,136.			466,746.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....		941,574.	342,057.	47,683.	773,649.	2104963.
<b>c</b> Add lines 7a and 7b .....		971,184.	779,193.	47,683.	773,649.	2571709.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						60000835.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
<b>9</b> Amounts from line 6 .....	3227126.	6677365.	11508377.	18447793.	22711883.	62572544.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	426,504.	385,643.	1492416.	632,239.	612,867.	3549669.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....	426,504.	385,643.	1492416.	632,239.	612,867.	3549669.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....		948,188.				948,188.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	3653630.	8011196.	13000793.	19080032.	23324750.	67070401.

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

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

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f)) .....	15	89.46 %
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15 .....	16	80.55 %

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

<b>17</b> Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) .....	17	5.29 %
<b>18</b> Investment income percentage from 2015 Schedule A, Part III, line 17 .....	18	6.31 %

**19a 33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

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

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>		
<b>2</b> Recoveries of prior-year distributions	<b>2</b>		
<b>3</b> Other gross income (see instructions)	<b>3</b>		
<b>4</b> Add lines 1 through 3	<b>4</b>		
<b>5</b> Depreciation and depletion	<b>5</b>		
<b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<b>6</b>		
<b>7</b> Other expenses (see instructions)	<b>7</b>		
<b>8 Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>		

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
<b>a</b> Average monthly value of securities	<b>1a</b>		
<b>b</b> Average monthly cash balances	<b>1b</b>		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1c</b>		
<b>d Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>		
<b>e Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
<b>2</b> Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>		
<b>3</b> Subtract line 2 from line 1d	<b>3</b>		
<b>4</b> Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>		
<b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>		
<b>6</b> Multiply line 5 by .035	<b>6</b>		
<b>7</b> Recoveries of prior-year distributions	<b>7</b>		
<b>8 Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>		

<b>Section C - Distributable Amount</b>		(A) Prior Year	Current Year
<b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)	<b>1</b>		
<b>2</b> Enter 85% of line 1	<b>2</b>		
<b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)	<b>3</b>		
<b>4</b> Enter greater of line 2 or line 3	<b>4</b>		
<b>5</b> Income tax imposed in prior year	<b>5</b>		
<b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	<b>6</b>		
<b>7</b> <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
<b>9</b> Distributable amount for 2016 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2016</b>	<b>(iii) Distributable Amount for 2016</b>
<b>1</b> Distributable amount for 2016 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
<b>3</b> Excess distributions carryover, if any, to 2016:			
<b>a</b>			
<b>b</b>			
<b>c</b> From 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2016 distributable amount			
<b>i</b> Carryover from 2011 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2016 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
<b>6</b> Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
<b>7 Excess distributions carryover to 2017.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7:			
<b>a</b>			
<b>b</b> Excess from 2013			
<b>c</b> Excess from 2014			
<b>d</b> Excess from 2015			
<b>e</b> Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016











**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Name of the organization

MERCY HOUSING INC

Employer identification number

47-0646706

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization <b>MERCY HOUSING INC</b>	Employer identification number <b>47-0646706</b>
--	---

**Part I Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHP/MERCY HOUSING SOUTHEAST 6521 NORTH AVENUE, SUITE A 150 ATLANTA, GA 30308	\$ 121,282.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	HELEN M DUNLAP 104 E 32ND STREET CHICAGO, IL 60616	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	SCHWAB CHARITABLE 211 MAIN STREET, FLOOR 10 SAN FRANCISCO, CA 94105	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	CAPITAL ONE GRANT 1680 CAPITAL ONE DRIVE MCLEAN, VA 22102-3491	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	NATION AFFORDABLE HOUSING TRUST INCOME 2245 N BANK DRIVE, SUITE 200 COLUMBUS, OH 43220	\$ 61,863.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	DIGNITY HEALTH 185 BERRY STREET, SUITE 300 SAN FRANCISCO, CA 94107	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>MERCY HOUSING INC</b>	Employer identification number <b>47-0646706</b>
--	---

**Part I Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	BANK OF AMERICA FOUNDATION  125 DUPONT DRIVE, RI 1-121-01-30  PROVIDENCE, RI 02907	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	FIDELITY CHARITABLE  P.O. BOX 770001  CINCINNATI, OH 45277-0053	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	TERRA SEARCH PARTNERS  601 MONTGOMERY STREET, SUITE 1090  SAN FRANCISCO, CA 94111	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	EDGEWOOD PARTNERS INSURANCE CENTER  PO BOX 511389  LOS ANGELES, CA 90051-7944	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	COHNREZNICK  4 BECKER FARM ROAD  ROSELAND, NJ 07068	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	CATHOLIC HEALTH INITIATIVES  198 INVERNESS DR. WEST  ENGLEWOOD, CO 80112	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>MERCY HOUSING INC</b>	Employer identification number <b>47-0646706</b>
--	---

**Part I Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	COMMUNITY FOUNDATION OF THE CHATTAHOOCHEE VALLEY  1340 13TH STREET  COLUMBUS, GA 31901	\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	PLAZA MARIA, LLC  115 E REED STREET  SAN JOSE, CA 95112	\$ 2,789,636.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	FRANCISCAN MINISTRIES, INC.  110 COMPTON ROAD  CINCINNATI, OH 45215	\$ 6,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	PNC FOUNDATION  ONE NORTH FRANKLIN, SUITE 2900  CHICAGO, IL 60606	\$ 42,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>MERCY HOUSING INC</b>	Employer identification number  <b>47-0646706</b>
--	---

**Part II Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____



Name of organization <b>MERCY HOUSING INC</b>	Employer identification number <b>47-0646706</b>
--	---

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016**  
**Open to Public Inspection**

**Name of the organization** MERCY HOUSING INC **Employer identification number** 47-0646706

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

Preservation of land for public use (e.g., recreation or education)       Preservation of a historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes  No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

a Revenue included on Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

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

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

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

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

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		855,000.		855,000.
b Buildings		71,748.	71,748.	0.
c Leasehold improvements				
d Equipment		3,828,044.	3,726,370.	101,674.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				<b>956,674.</b>

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) INVESTMENTS - PROGRAM		
(2) RELATED	9,000,094.	COST
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶	9,000,094.	

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) DUE FROM AFFILIATES	13,074,718.
(2) LOAN TO AFFILIATES	6,884,065.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	19,958,783.

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO AFFILIATES	11,373,006.
(3) ACCRUED INTEREST	147,447.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	11,520,453.

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

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

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

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

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

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

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

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, QUESTION 2**

MERCY HOUSING, INC. (MHI) AND ITS CONSOLIDATED NONPROFIT CORPORATIONS ARE EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND COMPARABLE STATE STATUTES AND DID NOT HAVE ANY UNRELATED BUSINESS INCOME FOR THE YEAR ENDED DECEMBER 31, 2016. DUE TO THEIR TAX EXEMPT STATUS, MHI AND THE CONSOLIDATED NONPROFIT CORPORATIONS ARE NOT SUBJECT TO INCOME TAXES. MHI AND THE CONSOLIDATED NONPROFIT CORPORATIONS ARE REQUIRED TO FILE TAX RETURNS WITH THE IRS AND OTHER TAXING AUTHORITIES. ACCORDINGLY, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR INCOME TAXES AND THERE ARE NO OTHER TAX POSITIONS WHICH MUST BE CONSIDERED FOR DISCLOSURE. INCOME TAX RETURNS FILED BY THE CORPORATION ARE SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR A PERIOD OF

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

THREE YEARS. WHILE NO INCOME TAX RETURNS ARE CURRENTLY BEING EXAMINED BY THE INTERNAL REVENUE SERVICE, TAX YEARS SINCE 2013 REMAIN OPEN.

Multiple horizontal lines for supplemental information.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization **MERCY HOUSING INC** Employer identification number **47-0646706**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
MERCY HOUSING LAKEFRONT 120 SOUTH LASALLE STREET, SUITE 185 CHICAGO, IL 60603	36-3453183	501(C)(3)	108,034.	0.			LOW-INCOME HOUSING
MERCY HOUSING MOUNTAIN PLAINS 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	20-1583332	501(C)(3)	23,700.	0.			LOW-INCOME HOUSING
MERCY HOUSING CALIFORNIA 130 MISSION STREET, SUITE 300 SAN FRANCISCO, CA 94103	94-3081666	501(C)(3)	138,000.	0.			LOW-INCOME HOUSING
MERCY HOUSING SOUTHEAST 6521 NORTH AVENUE, SUITE A 150 ATLANTA, GA 30308	56-1993872	501(C)(3)	64,457.	0.			LOW-INCOME HOUSING
MERCY PORTFOLIO SERVICES 120 SOUTH LASALLE STREET, SUITE 185 CHICAGO, IL 60603	26-4002114	501(C)(3)	1,340,408.	0.			LOW-INCOME HOUSING
MERCY HOUSING NORTHWEST 2505 THIRD AVENUE, SUITE 204 SEATTLE, WA 98121	91-1546525	501(C)(3)	45,109.	0.			LOW-INCOME HOUSING

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **8.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2016)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERCY HOUSING SOUTHWEST 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	86-0743192	501(C)(3)	10,350.	0.			LOW-INCOME HOUSING
MISCELLANEOUS < \$5,000 1999 BROADWAY, SUITE 1000 DENVER, CO 80202			18,657.	0.			LOW-INCOME HOUSING
MERCY HOUSING MIDWEST 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	47-0772351	501(C)(3)	10,350.	0.			LOW-INCOME HOUSING



**Part III** **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV** **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I**

THE MAJORITY OF GRANTS EXPENSE REPRESENTS CONTRIBUTIONS TO AFFILIATED ORGANIZATIONS. DONORS CONTRIBUTE TO THE ORGANIZATION FOR SPECIFIC CAPITAL PORJECTS OR OTHER RESTRICTED OPERATING AND PROGRAM ACTIVITIES AND THE ORGANIZATION PASSES THE CONTRIBUTION TO A RELATED ENTITY IN ACCORDANCE WITH THE DONOR RESTRICTION.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2016**

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

▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

MERCY HOUSING INC

Employer identification number

47-0646706

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence    |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input checked="" type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2016

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC 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
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BILL RUMPF SENIOR VICE PRESIDENT	(i)	206,530.	0.	0.	2,599.	10,801.	219,930.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CADE SCHOLL VICE PRESIDENT	(i)	162,281.	0.	0.	5,216.	30,258.	197,755.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CAROL BRESLAU SENIOR VICE PRESIDENT	(i)	190,925.	0.	0.	5,947.	1,019.	197,891.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CHERYLL O'BRYAN SENIOR VP/PRESIDENT OF MHM	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	286,386.	0.	0.	10,691.	19,589.	316,666.	0.
(5) CHRIS BURCKHARDT SENIOR VICE PRESIDENT/ COO	(i)	279,517.	0.	0.	7,397.	31,405.	318,319.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CHRISTOPHER REED VICE PRESIDENT	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	241,767.	0.	0.	9,410.	1,443.	252,620.	0.
(7) CHRISTY RICHARDSON SENIOR VICE PRESIDENT	(i)	194,635.	0.	0.	5,136.	35,530.	235,301.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DOUG SHOEMAKER SENIOR VICE PRESIDENT	(i)	213,552.	0.	0.	5,137.	13,801.	232,490.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) FRANCENA MARIE LOWE SENIOR VICE PRESIDENT	(i)	192,775.	0.	0.	2,619.	1,019.	196,413.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JANE GRAF CHIEF EXECUTIVE OFFICER	(i)	341,529.	0.	0.	10,219.	1,956.	353,704.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) JOHN MARCOLINA VICE PRESIDENT	(i)	150,676.	0.	0.	6,570.	32,705.	189,951.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MARK ANGELINI SENIOR VICE PRESIDENT	(i)	192,056.	0.	0.	6,120.	31,405.	229,581.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MELISSA CLAYTON SENIOR VICE PRESIDENT	(i)	198,698.	0.	0.	5,960.	21,265.	225,923.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) MICHELE MAMET SENIOR VP/CHIEF ADMIN OFFICER	(i)	246,114.	0.	0.	8,611.	31,405.	286,130.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) RON JACKSON VICE PRESIDENT/SECRETARY	(i)	136,291.	0.	0.	1,442.	24,362.	162,095.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) STEVE SPEARS SENIOR VP/CHIEF FINANCIAL OFFICER	(i)	285,664.	0.	0.	7,413.	37,556.	330,633.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC 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
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(17) VAL AGOSTINO SENIOR VICE PRESIDENT	(i)	201,197.	0.	0.	7,032.	13,111.	221,340.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) VINCE DODDS VICE PRESIDENT	(i)	184,725.	0.	0.	7,812.	25,512.	218,049.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) EDWARD HOLDER EMPLOYEE	(i)	196,869.	0.	0.	6,104.	31,405.	234,378.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) DAVID GRAHAM LYON EMPLOYEE	(i)	173,453.	0.	0.	6,585.	31,859.	211,897.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(21) GUNNAR TANDE EMPLOYEE	(i)	135,033.	0.	0.	4,312.	27,847.	167,192.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

MERCY HOUSING INC

Employer identification number

47-0646706

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ELDERLY, HOMELESS, POTENTIALLY HOMELESS, HANDICAPPED & OTHERWISE  
DISADVANTAGED PERSONS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND PEOPLE WITH SPECIAL NEEDS WHO LACK THE ECONOMIC RESOURCES TO ACCESS  
QUALITY, SAFE HOUSING OPPORTUNITIES. MERCY HOUSING, INC., EITHER  
DIRECTLY OR INDIRECTLY, WILL SUPPORT OR FOSTER THE DEVELOPMENT,  
ACQUISITION, FINANCING, OPERATION AND MANAGEMENT OF QUALITY, AFFORDABLE  
PROGRAM-ENRICHED HOUSING FOR LOW AND MODERATE INCOME PERSONS.

FORM 990, PART VI, SECTION A, LINE 1:

MERCY HOUSING, INC. IS CO-SPONSORED BY NINE CONGREGATIONS OF RELIGIOUS  
WOMEN WHO APPOINT MEMBERS TO THE SPONSOR COUNCIL. THE SPONSOR COUNCIL  
APPOINTS THE CORPORATE MEMBER GROUP. THE RESERVED RIGHTS HELD BY THE  
CORPORATE MEMBER GROUP INCLUDE APPROVAL OF THE FOLLOWING ACTIVITIES:  
CERTAIN REVISIONS TO ARTICLES AND BYLAWS, MERGERS AND ACQUISITIONS,  
PLEDGING, MORTGAGING, OR DISPOSING OF ALL OR SUBSTANTIALLY ALL ASSETS, AND  
APPOINTMENT OR REMOVAL OF GOVERNANCE BOARD MEMBERS AND OFFICERS AND  
APPOINTMENT/TERMINATION OF THE CHIEF EXECUTIVE OFFICER.

FORM 990, PART VI, SECTION A, LINE 6:

MERCY HOUSING, INC., IS CO-SPONSORED BY NINE CONGREGATIONS OF WOMEN  
RELIGIOUS ORDERS.

FORM 990, PART VI, SECTION A, LINE 7A:

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

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization MERCY HOUSING INC	Employer identification number 47-0646706
---	--

THE BOARD OF TRUSTEES OF MERCY HOUSING, INC. HAS AUTHORITY IN VARIOUS ASPECTS OF OPERATIONS AND MANAGEMENT WHICH ARE SET FORTH IN THE RESERVED RIGHTS OF THE BYLAWS. THE RESERVED RIGHTS HELD BY THE MERCY HOUSING, INC. BOARD OF TRUSTEES, MANY OF WHICH HAVE BEEN FURTHER DELEGATED TO THE PRESIDENT AND CEO OF MERCY HOUSING, INC., INCLUDE APPROVAL OF THE FOLLOWING ACTIVITIES: REVISIONS TO ARTICLES AND BYLAWS; MERGERS AND ACQUISITIONS, ESTABLISHMENT OF SUBSIDIARY ENTITIES; PLEDGING, MORTGAGING, OR DISPOSING OF ALL OR SUBSTANTIALLY ALL ASSETS; OBLIGATIONS OF NEW OPERATING AND MORTGAGE DEBT; AND APPOINTMENT OR REMOVAL OF GOVERNING BOARD MEMBERS AND OFFICERS.

FORM 990, PART VI, SECTION A, LINE 7B:

SAME AS LINE 7A.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS SUBMITTED TO THE GOVERNING BOARD MEMBERS FOR REVIEW AND IF, WITHIN 7 DAYS, THERE ARE NO FURTHER COMMENTS, QUESTIONS OR MODIFICATIONS, THE FORM 990 IS FILED WITH THE IRS.

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

THE AUDIT COMMITTEE OF MERCY HOUSING, INC. REVIEWS ANNUALLY THE CONFLICT OF INTEREST DISCLOSURES AND DETERMINES WHETHER ANY ACTION IS REQUIRED.

FORM 990, PART VI, SECTION B, LINE 15:

ANNUALLY THE EXECUTIVE COMMITTEE WITHIN THE MERCY HOUSING, INC. BOARD OF TRUSTEES WILL REVIEW EXECUTIVE SALARIES TO ENSURE COMPETITIVENESS WITH EXTERNAL MARKETS AND FOR INTERNAL EQUITY IN RELATION TO GENERAL EMPLOYEE WAGES AND BENEFITS, INDIVIDUAL AND ORGANIZATIONAL PERFORMANCE, AND THE FINANCIAL RESOURCES OF THE ORGANIZATION.

Name of the organization <b>MERCY HOUSING INC</b>	Employer identification number <b>47-0646706</b>
--	---

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
 AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY  
 NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:  
 GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS  
 ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

PART XII

#2B: THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED IN ACCORDANCE  
 WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES. THE AUDITED FINANCIAL  
 STATEMENTS ARE REPORTED WITHIN THE CONSOLIDATED FINANCIAL STATEMENTS  
 AND SUPPLEMENTAL INFORMATION OF MERCY HOUSING, INC.

#2C: RESPONSIBILITY FOR SELECTION OF AN INDEPENDENT ACCOUNTANT AND  
 OVERSIGHT OF THE ANNUAL AUDIT IS RESERVED BY THE MERCY HOUSING, INC.  
 BOARD OF TRUSTEES.

#3: THE ORGANIZATION RECEIVED FEDERAL LOANS OR AWARDS AND ACCORDINGLY  
 WAS INCLUDED IN THE SINGLE AUDIT ACT AND OMB CIRCULAR A-133 AUDIT AS  
 REPORTED WITHIN THE CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTAL  
 INFORMATION OF MERCY HOUSING, INC.



**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public Inspection

Name of the organization

**MERCY HOUSING INC**

Employer identification number

**47-0646706**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
2101 TELEGRAPH AVENUE, INC. - 94-3222935 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
ALEXANDRIA MINISTRIES, INC. - 47-5177987 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	INDIANA	501 (C) (3)	10	N/A		X
ALL HALLOWS COMMUNITY - 94-2722870 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
ALLEGRE POINT SENIOR RESIDENCES - 20-4295472 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)	10	N/A		X

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

Schedule R (Form 990) 2016

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
ASSISI HOMES OF GURNEE, INC. - 36-3942336 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
ASSISI HOMES OF ILLINOIS, INC. - 36-3803443 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)		N/A		X
ASSISI HOMES - BATAVIA APARTMENTS, INC. - 36-3914084, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
ASSISI HOMES - COLONY PARK, INC. - 36-4039278, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
ASSISI HOMES - CONSTITUTION HOUSE, INC. - 36-4049150, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
ASSISI HOMES - JEFFERSON COURT, INC. - 39-1771526, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	WISCONSIN	501 (C) (3)	10	N/A		X
ASSISI HOMES - KENOSHA, INC. - 39-1814815 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	WISCONSIN	501 (C) (3)	10	N/A		X
ASSISI HOMES - LASALLE MANOR, INC. - 80-0623447, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
ASSISI HOMES - NEENAH, INC. - 36-3767250 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	WISCONSIN	501 (C) (3)	10	N/A		X
AVONDALE SENIOR VILLAGE - 86-0980810 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARIZONA	501 (C) (3)	10	N/A		X
CAMELOT CASITAS - 86-0980809 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARIZONA	501 (C) (3)	10	N/A		X
CANTEBRIA SENIOR HOMES - 94-3361794 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
CANTICLE PLACE, INC. - 36-3957850 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
CASA DE MERCED - 86-0808941 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	10	N/A		X
CASA DE SHANTI - 86-0728526 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	12A	N/A		X
CENTRAL COAST HOUSING - 77-0117473 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
CHARLES CREST CORPORATION - 34-1399869 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
CHARLES CREST II, CORPORATION - 34-1714407 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
CHARLES MEADOWS CORPORATION - 34-1552671 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
CLARE GARDENS, INC. - 23-7200039 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)		N/A		X
CLARE OF ASSISI HOMES-WESTMINSTER, INC. - 74-2740978, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)		N/A		X
DECATUR PLACE - 84-1062097 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)	10	N/A		X
DUBLIN MANOR, INC. - 02-0655254 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	KENTUCKY	501 (C) (3)	10	N/A		X
EAGLE SENIOR VILLAGE - 03-0410639 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	IDAHO	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
EFFINGHAM MINISTRIES, INC. - 47-5190275 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
EH/CC HOUSING CORP. (EDEN HOUSE) - 94-3234538, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	12A	N/A		X
EL MIRAGE SENIOR - 86-0847975 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARIZONA	501 (C) (3)	10	N/A		X
FAIRFAX NONPROFIT HOUSING DEVELOPMENT CO - 94-2772546, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
FLORIN HOUSING CORP. - 68-0336533 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	12A	N/A		X
FRANCIS HEIGHTS, INC. - 84-0626174 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)		N/A		X
FRANCIS OF ASSISI COMMUNITY - 94-2366315 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
GARDEN PARK APT COMMUNITY - 68-0484147 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	12A	N/A		X
GAULT STREET SENIOR - 75-2983979 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
GUADALUPE SENIOR VILLAGE - 86-0897709 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARIZONA	501 (C) (3)	10	N/A		X
INDEPENDENCE HILL, INC. - 72-1545927 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IDAHO	501 (C) (3)	12A	N/A		X
INTERCOMMUNITY HOUSING FERNDAL - 91-1667138 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	WASHINGTON	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
JOHN W. KING SENIOR COMMUNITY - 94-3282891 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
KOKOMO MINISTRIES, INC. - 47-5189624 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	INDIANA	501 (C) (3)	10	N/A		X
MERCY HOUSING WHEATON, NFP - 27-2239991 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
LAKE WALES MINISTRIES, INC. - 47-5190723 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	FLORIDA	501 (C) (3)		N/A		X
MACLEAV NON-PROFT HOUSING DEVELOPMENT - 94-2762529, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
MARIA B. FREITAS SENIOR HOUSING CORP. - 94-3190261, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
MARIAN HOUSING CENTER, INC. - 39-1515867 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WISCONSIN	501 (C) (3)	10	N/A		X
MARIAN PARK, INC. - 36-2750105 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
MARIN HOMES FOR INDEPENDENT LIVING - 94-2787430, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
MARIN HOUSING CORP. - 94-1358291 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
MARLTON AFFORDABLE HOUSING CORP - 91-2164481 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
MARSHSIDE VILLAGE, INC. - 20-1910771 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	SOUTH CAROLINA	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MCAULEY MANOR, INC. - 31-1548500 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	KENTUCKY	501 (C) (3)	10	N/A		X
MERCY BOND PROPERTIES AZ I - 94-3142767 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARIZONA	501 (C) (3)	12A	N/A		X
MERCY BOND PROPERTIES COLORADO I - 94-3286321, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	COLORADO	501 (C) (3)	12A	N/A		X
MERCY BOND PROPERTIES NEBRASKA I - 68-0378674, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	NEBRASKA	501 (C) (3)	12A	N/A		X
MERCY COMMUNITY HOUSING GEORGIA - 58-2461689 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GEORGIA	501 (C) (3)	12A	N/A		X
MERCY GARDENS - 33-0809069 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY HOLLY PARK EAST - 84-1347445 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	COLORADO	501 (C) (3)	12A	N/A		X
MERCY HOUSING CA HOLDING CO. - 94-2834861 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	12A	N/A		X
MERCY HOUSING CALIFORNIA - 94-3081666 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY HOUSING CALIFORNIA FAMILY PROPERTIES - 33-0998451, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	12A	N/A		X
MERCY HOUSING CALIFORNIA SENIOR PROPERTIES - 20-3177114, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	ILLINOIS	501 (C) (3)	10	N/A		X
MERCY HOUSING CALIFORNIA SPECIAL NEEDS - 94-3088260, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	12A	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MERCY HOUSING CALWEST - 94-2963228 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY HOUSING FRANCISCAN CAMPUS, INC. - 81-3397958, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)	10	N/A		X
MERCY HOUSING LAKEFRONT - 36-3453183 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	7	N/A		X
MERCY HOUSING MANAGEMENT GROUP - 82-0376108 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
MERCY HOUSING MIDWEST - 47-0772351 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	NEBRASKA	501 (C) (3)	10	N/A		X
MERCY HOUSING MOUNTAIN PLAINS - 20-1583332 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)	10	N/A		X
MERCY HOUSING NORTHWEST - 91-1546525 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WASHINGTON	501 (C) (3)	10	N/A		X
MERCY HOUSING NORTHWEST IDAHO, INC. - 36-3453183, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IDAHO	501 (C) (3)	12A	N/A		X
MERCY HOUSING OHIO, INC. - 20-2373936 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	12A	N/A		X
MERCY HOUSING PEMBROKE, INC. - 13-4224803 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	GEORGIA	501 (C) (3)	10	N/A		X
MERCY HOUSING SOUTHEAST - 56-1993872 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	NORTH CAROLINA	501 (C) (3)	10	N/A		X
MERCY HOUSING SOUTHWEST - 86-0743192 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MERCY HOUSING WEST - 68-0254564 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY HOUSING, 2904 N 45TH ST, OMAHA - 37-1068780, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	NEBRASKA	501 (C) (3)	10	N/A		X
MERCY HOUSING, INC. - 47-0646706 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY LOAN FUND - 84-1559406 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY MANOR, INC. - 61-1344092 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	TENNESSEE	501 (C) (3)	10	N/A		X
MERCY MIDTOWN, INC. - 68-0002157 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY MOSCOW, INC. (HAWTHORNE) - 82-0475388 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IDAHO	501 (C) (3)	10	N/A		X
MERCY OAKS VILLAGE - 75-3134134 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY OAKWOOD GARDENS - 84-1344220 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARIZONA	501 (C) (3)	10	N/A		X
MERCY PLACE BELMONT INC. - 80-0034784 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	NORTH CAROLINA	501 (C) (3)	10	N/A		X
MERCY PORTFOLIO SERVICES - 26-4002114 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	COLORADO	501 (C) (3)	10	N/A		X
MERCY PROPERTIES ARIZONA - 86-0772987 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	ARKANSAS	501 (C) (3)	10	N/A		X



**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MERCY PROPERTIES CALIFORNIA - 68-0233835 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
MERCY PROPERTIES II, INC. - 82-0485862 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	IDAHO	501 (C) (3)	12A	N/A		X
MERCY PROPERTIES WA II - 30-0117515 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WASHINGTON	501 (C) (3)	10	N/A		X
MERCY PROPERTIES WASHINGTON - 91-1903782 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WASHINGTON	501 (C) (3)	12A	N/A		X
MERCY PROPERTIES WASHINGTON II - 30-0117515 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WASHINGTON	501 (C) (3)	10	N/A		X
MERCY PROPERTIES, INC. (MPI) - 84-1173689 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY SENIOR HOUSING OXNARD - 94-3224446 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY SOUTHEAST IDAHO, INC. - 84-1284293 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
MERCY VILLAGE JOPLIN - 37-1459692 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	MISSOURI	501 (C) (3)	10	N/A		X
MESA SENIOR MEADOWS - 86-0897708 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	10	N/A		X
MOLINE MINISTRIES 1, INC. - 47-5216971 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
MOLINE MINISTRIES 2, INC. - 47-5217175 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
MOST HOLY REDEEMER SENIOR HOUSING CORPORATION - 94-3044873, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
NEARY LAGOON, INC. - 77-0214799 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
NOTRE DAME SENIOR HOUSING CORP. - 94-3209503 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
OCEANA SENIOR HOUSING CORP. - 94-3167825 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
PADRE APARTMENTS COMMUNITY - 84-0789830 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
PADUCAH MINISTRIES I, INC. - 47-5203278 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)		N/A		X
PEORIA PLACE - 86-0980811 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	10	N/A		X
PLAZAS DE MERCED - 86-0758961 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	10	N/A		X
PRESENTATION SENIOR COMMUNITY - 94-3264209 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
PRINCETON MINISTRIES 4, INC. - 47-5202983 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)		N/A		X
RICHARDSON MINISTRIES, INC. - 47-5202868 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)		N/A		X
RIVERVIEW - ST. MARY'S INC. - 62-1782683 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	TENNESSEE	501 (C) (3)	10	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
ROSELAND PLACE INC NFP - 26-2330256 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
ROSELAND VILLAGE INC - 26-4723017 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)	10	N/A		X
RUSSELL MANOR - 93-1189914 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
SACRED HEART VILLAGE I, INC. - 31-1411531 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	KENTUCKY	501 (C) (3)	10	N/A		X
SACRED HEART VILLAGE II, INC. - 61-1339396 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	KENTUCKY	501 (C) (3)	10	N/A		X
SACRED HEART VILLAGE III, INC. - 61-1367719 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
SAN JUAN HOUSING CORP. - 68-0378676 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
SAVANNAH GARDENS SENIOR RESIDENCES, INC - 27-3400284, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GEORGIA	501 (C) (3)	10	N/A		X
SIENA SPRINGS (SIENA SPRINGS I) - 31-1052772 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
SIENA SPRINGS II - 31-1591780 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
SOUTH OF MARKET MERCY - 94-3199902 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
ST. CATHERINE RESIDENCE, INC - 39-0857537 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WISCONSIN	501 (C) (3)	1	N/A		X

**Part II** Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
ST. ELIZABETH HOUSING CORP. - 94-2705149 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
ST. MARY'S VILLA AT RIVERVIEW II, INC. - 31-1723287, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	TENNESSEE	501 (C) (3)	12A	N/A		X
ST. MARY'S VILLA, INC. - 31-1548512 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	KENTUCKY	501 (C) (3)	10	N/A		X
ST. THERESA VILLAGE, INC. - 31-1411529 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	OHIO	501 (C) (3)	10	N/A		X
STERLING SENIOR HOUSING - 14-1866405 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WASHINGTON	501 (C) (3)	10	N/A		X
SUNSET LANE APARTMENTS LLC - 45-3959651 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
TIERRA DEL SOL, INC. - 75-3004763 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
TRANSBAY BLOCK 6 LLC - 46-5357713 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
VILLA CARIDAD SENIOR HOUSING - 68-0387620 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	10	N/A		X
VILLA MARIA, INC. - 84-1347868 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ILLINOIS	501 (C) (3)		N/A		X
VISITACION VALLEY AFFORDABLE HOUSING - 94-3273336, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
VISTA ALEGRE - 86-0947230 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	ARIZONA	501 (C) (3)	10	N/A		X

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	
						Yes	No
WALNUT GROVE - 68-0233835 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CALIFORNIA	501 (C) (3)	12A	N/A		X
WILLOW STREET APARTMENTS - 84-1334167 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	COLORADO	501 (C) (3)	10	N/A		X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
1028 HOWARD ST. ASSOCIATES - 94-3160742, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
104TH STREET LP - 27-2755027 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
1100 OCEAN AVENUE LP - 45-4437017, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
1101 HOWARD ST. ASSOCIATES - 94-3160341, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
104TH STREET MM LLC - 27-2754418 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	IL	N/A	C CORP					X
111TH & WENTWORTH APARTMENTS CORP. - 38-3648994, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	C CORP					X
AFFORDABLE HOUSING CORP - 84-1173690 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	C CORP					X
AFFORDABLE HOUSING INITIATIVE (AHI) - 94-3096988, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	C CORP					X
ANTIOCH II, LLC - 27-3209358 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	GA	N/A	C CORP					X

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
111 JONES STREET ASSOC. (111 JONES ST) - 94-3142765, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
1475 167TH AVENUE ASSOC. - 94-3249328, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
16TH & CHURCH STREET ASSOC. - 94-3135262, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
180 PROPERTIES - 27-0561021 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
1760 BUSH, LP - 47-3449006 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
1880 PINE, LP - 47-1291546 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
2000 ILLINOIS AURORA LLC - 46-2558442, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
2101 TELEGRAPH AVENUE ASSOC. - 94-3222935, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
2220 10TH AVENUE ASSOC. (SANTANA APTS.) - 94-3140163, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
2698 CALIFORNIA, LP - 47-3462784, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
2814 FIFTH STREET ASSOCIATES, LP - 68-0340317, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
455 FELL, LP - 47-4654112 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
4707 MALDEN LTD PARTNERSHIP - 36-3762788, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
5042 WINTHROP APARTMENTS LP - 36-3855358, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
55 LAGUNA LP - 45-3582721 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
901 WEST 63RD LP (ENGLEWOOD APARTMENTS) - 26-1233617, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
ACQUISITION PROPERTIES GEORGIA I - 20-4465851, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
ADAMSVILLE GREEN, LP - 26-2252791, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	



**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
ALLEGRE MERCY REDEVELOPMENT LLLP - 45-3540725, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
ANTIOCH VILLAS, LP - 27-0194197, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
APPIAN WAY MERCY LLC - 91-1546525, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
AROMOR MERCY LLC (AROMOR APARTMENTS) - 30-0296042, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
BAYSHORE COURT - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
BELRAY APARTMENTS - 36-4027474, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
BENNETT HOUSE, LP - 65-1308081, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
BISHOPS BLOCK (BISHOPS BLOCK) - 01-0477157, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IA	N/A	RELATED				X	N/A		X	
BLUFF MERCY, LLC - 27-0954394 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
BOISE SENIOR 202 OWNER, LP - 27-0992784, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	ID	N/A	RELATED				X	N/A		X	
BOUNDARY VILLAGE - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
BRENTWOOD GREEN VALLEY APTS - 94-3135990, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
BRITTON STREET ASSOC.(BRITTON COURT) - 94-3300509, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
CAMBRIDGE APARTMENTS - 20-1031378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
CASCADE APARTMENTS - 77-0601463, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
CASCADE VILLAGE - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
CEDARWOOD I - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
CEDARWOOD IV - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
CENTRO PARTNERS - 77-0295344 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
CHENEY GARDENS - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
COASTSIDE SENIOR HOUSING LP - 45-2262853, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
COLONIA SAN MARTIN ASSOCIATES, LP - 83-0481233, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
COMMONS ON MAIN LP - 20-8033896, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	OH	N/A	RELATED				X	N/A		X	
COUNTRYSIDE SENIOR APARTMENTS LP - 26-1483851, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
DANVILLE VETERANS HOUSING LLC - 35-2441770, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
DOROTHY DAY COMMUNITY, LP - 65-1308078, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
DOVE FAMILY HOUSING ASSOCIATES LP - 33-0975782, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
EDEN HOUSE LP - 46-2704216 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
EL MONTE LP - 46-1360554 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
EVERGREEN MANOR - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
EVERGREEN VISTA 1 OWNER LP - 27-4160484, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
FAMILY TREE & LINCOLN WAY LLLP - 46-2841485, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
FERNDALE VILLA - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
FIRCREST - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
FLORIN WOOD ASSOC. - 68-0318012, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
FRANCISCAN HOMES III, LP - 31-1394513, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	OH	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
FRANCISCAN HOMES IV, LP - 31-1463371, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	OH	N/A	RELATED				X	N/A		X	
GALEWOOD SLF ASSOCIATES, LP - 20-1882654, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
GRAYSLAKE SENIOR HOUSING - 26-3800351, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
GREENWICH PARK APARTMENTS LLC - 32-0453460, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WI	N/A	RELATED				X	N/A		X	
HAROLD WASHINGTON APARTMENTS - 36-3556291, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
HWA-850 EASTWOOD LP - 27-1257130, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
IMPACT FAMILY VILLAGE GP LLC - 36-4715432, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
IMPACT FAMILY VILLAGE LP - 80-0769567, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
JFK TOWER, LP - 47-3477829 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
JOHNSTON CENTER OUTLOTS LLC - 27-0162550, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WI	N/A	RELATED				X	N/A		X	
JOHNSTON CENTER RE-USE LP - 30-0529359, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
JUNIPERO SERRA, LP - 65-1308082, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
KANKAKEE STATION STREET SENIOR HOUSING - 46-1841937, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
KENNEDY ESTATES HSG. ASSOC. - 68-0355465, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
LA PLAYA RESIDENTIAL - 77-0278613, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
LAKE STEVENS - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
LAKE VILLAGE EAST - 77-0601463, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MABTON GARDENS - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MAGNOLIA LIMITED PARTNERSHIP - 36-3822288, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
MALDEN LIMITED PARTNERSHIP II - 20-8746121, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
MARLTON AFFORDABLE HSG. ASSOC. - 04-3594636, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY ALSTON LAKE LLC - 20-2948887, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	SC	N/A	RELATED				X	N/A		X	
MERCY CRESTVIEW VILLAGE HOUSING, LP - 26-4578510, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	NE	N/A	RELATED				X	N/A		X	
MERCY EDEN HOUSE LLC - 46-4227209, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY FAMILY PLAZA L.P. - 94-3094867, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING ARIZONA I - 86-0791473, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	AZ	N/A	RELATED				X	N/A		X	
MERCY HOUSING ARIZONA II (PAGE COMMONS) - 33-1075152, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	AZ	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CA XXXIII - 43-2100410, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CA XXXVII - 68-0631916, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 47, LP - 27-2930358, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 48, LP - 27-3117667, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 49, LP - 27-3277379, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 50, LP - 27-3381977, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 51, LP - 94-2963228, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 52, LP - 45-2751062, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 53, LP - 45-2050339, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	



**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA 54 LP - 94-2963228, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 55, LP - 45-3710672, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 56, LP - 45-4659051, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 57, LP - 45-4711412, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 58 LP - 45-4486957, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 59, LP - 46-2537487, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 60, LP - 46-1239561, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 61, LP - 46-3636570, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 62, LP - 46-3424351, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA 63, LP - 46-3921420, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 64, LP - 46-5015672, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 65, LP - 47-1120541, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 66, LP - 47-3441276, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 67, LP - 47-3628711, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 68, LP - 47-4992813, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 69, LP - 47-5419818, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 70, LP - 47-5463378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 71, LP - 47-5468338, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA 72, LP - 81-1758210, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 73, LP - 81-2079108, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 74, LP - 81-2465663, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 75, LP - 81-2748406, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA 76, LP - 36-4847211, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA I - 84-1210914, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA II - 94-3187825, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA III - 94-3187826, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA IX - 94-3230471, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA V - 94-3229051, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA VI - 94-3224528, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA VII - 94-3229540, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA X (THE ROSE) - 94-3232501, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XI - 94-3244521, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XII - 94-3366333, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XIII - 94-3377935, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XIV - 94-3377941, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XIX - 01-0716135, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA XL - 26-1398920, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XLI - 26-2350027, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XLII - 26-2575525, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XLIII - 26-2553554, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XLIV - 26-3583090, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XLV - 65-1308076, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XLVII - 27-2930358, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XV - 94-3379316, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XVI - 94-3381170, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA XVII - 94-3400496, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XVIII - 03-0376881, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XX - 36-4497277, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXI - 48-1259652, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXII - 35-2172040, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXIII - 82-0560494, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXIV - 74-3052786, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXIX - 73-1729092, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXV - 81-0564415, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA XXVI - 58-2679059, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXVII - 65-1207291, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXVIII - 73-1721242, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXX - 61-1488186, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXXI - 87-0756700, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXXII - 87-0756940, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXXIV, LP - 51-0594948, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXXIX - 01-0885277, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXXV - 76-0827799, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING CALIFORNIA XXXVI - 56-2568833, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING CALIFORNIA XXXVIII - 33-1153406, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO I, LTD - 84-1176712, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO III - 84-1292696, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO V - 84-1318329, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO VI - 84-1361296, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO VII - 84-1473883, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO VIII - 93-1190349, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO XI, LLC - 20-5331841, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	



**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING COLORADO-I, LTD (GRACE) - 84-1176712, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING COLORADO-IX - 87-0706258, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA 12, LP - 27-2987561, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA 13, LP - 45-5108221, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA 14, LP - 46-2787254, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA 15, LP - 46-5547801, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA I - 58-2461689, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA III - 43-1954812, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA IV - 56-2328730, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING GEORGIA IX, LP - 20-8829418, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA V, LP - 90-0284434, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA VI, LP - 20-4466474, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA VIII LP - 58-2461689, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA X - 27-0162550, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING GEORGIA XI, LP - 26-2523190, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MERCY HOUSING IDAHO NSP LLC (NSPID) - 27-1039061, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	ID	N/A	RELATED				X	N/A		X	
MERCY HOUSING IDAHO V (SISTERS VILLA) - 04-3624359, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	ID	N/A	RELATED				X	N/A		X	
MERCY HOUSING IOWA II L.P. - 84-1284752, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING MIDWEST NEBRASKA, LLC - 20-1583332, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	NE	N/A	RELATED				X	N/A		X	
MERCY HOUSING S. CAROLINA I - 59-3767323, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	SC	N/A	RELATED				X	N/A		X	
MERCY HOUSING SENIOR PROPERTIES LLC - 94-3081666, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MERCY HOUSING SOUTH CAROLINA I - 59-3767323, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	SC	N/A	RELATED				X	N/A		X	
MERCY HOUSING SOUTH DAKOTA I, LLC - 20-2830331, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	SD	N/A	RELATED				X	N/A		X	
MERCY HOUSING SOUTH DAKOTA II, LLC - 20-2830356, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	SD	N/A	RELATED				X	N/A		X	
MERCY HOUSING UTAH I - 02-0564555, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	UT	N/A	RELATED				X	N/A		X	
MERCY HOUSING WASHINGTON III - 91-1676111, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MERCY HOUSING WASHINGTON IX, LP - 65-1186086, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MERCY HOUSING WASHINGTON V - 84-1457612, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	OR	N/A	RELATED				X	N/A		X	
MERCY HOUSING WASHINGTON VI - 84-1459924, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MERCY HOUSING WASHINGTON VII - 91-2038920, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MERCY HOUSING WASHINGTON VIII - 91-2124779, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MERCY HOUSING WASHINGTON X, LLC - 55-0887839, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MERCY LOAN FUND SUB-CDE , LLC - 27-1326149, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CO	N/A	RELATED				X	N/A		X	
MERCY PROPERTIES WASHINGTON I, LLC - 20-1031378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MERCY PROPERTIES WASHINGTON III LLC - 77-0601463, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHC HEALTH 1 LP - 47-3554305 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MHC HEALTH 2, LP - 47-4515862 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
MHNW 9 OTHELLO EAST LP - 47-1620007, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHNW 10 OTHELLO WEST LP - 47-1614235, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHNW 11 WOODLAKES LP - 47-2334969, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHNW 12 ELEANOR APARTMENTS LLLP - 47-3599013, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHNW 13 BUILDING 9 SOUTH LP - 47-4660134, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHNW 14 BUILDING 9 NORTH LP - 47-4683004, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHNW 15 BUILDING 9 CENTER LP - 81-3897409, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MHSE ADAMSVILLE GREEN SENIOR PARTNERS - 26-2523190, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MHSE HERITAGE SENIOR LP - 27-5085069, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MHSE MERCY PARK LP - 61-1757712, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MHSE PINELAKE LP - 80-0616765 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MHSE PINELAKE I LP - 90-0856866, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MHSE REYNOLDSTOWN SENIOR GP, LLC - 46-3048811, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MHSE REYNOLDSTOWN SENIOR LP - 46-3054017, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MSHE WILSON SENIOR RESIDENCE LP - 46-4907701, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
MONROE VILLA - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MONSIGNOR LYNE, LP - 65-1308080, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
MORTGAGE RESOLUTION FUND LLC - 45-3801619, 120 LASALLE SUITE 1850, CHICAGO, IL 60603	MANAGEMENT	IL	N/A	RELATED				X	N/A		X	
MOSES LAKE ESTATES - 20-1031378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
MPI HIGHLAND PLACE APARTMENTS, LP - 58-2461689, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	GA	N/A	RELATED				X	N/A		X	
NEAR NORTH PARTNERSHIP - 32-0143113, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
NEARY LAGOON PARTNERS - 77-0256317, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
NEW DANA STRAND IV-A, LP - 47-3082758, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
NEW DANA STRAND PARTNERS I, LP - 51-0524022, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
NEW DANA STRAND TOWNHOMES - 51-0524022, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
NEW STERLING PARK LLC - 27-2523530, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
NEW STERLING PARK MM LLC - 27-2523309, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
NEW TACOMA PHASE I OWNER LP - 26-4569316, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
NEW TACOMA PHASE II MERCY LLC - 45-2478067, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
NEW TACOMA SENIOR HOUSING PHASE I - 26-4569316, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
NORTHGLEN, LP - 26-4578510 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	NE	N/A	RELATED				X	N/A		X	
OAK HARBOR - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
OLYMPIC - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
PARK TERRACE APTS. (PARK TERRACE APTS.) - 94-3332881, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
PARKSIDE TERRACE LP - 36-3914505, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	



**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
PILCHUCK - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
PINE ROAD VILLAGE - 20-1031378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
PINEWOOD COURT APARTMENTS - 68-0435836, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
PLAZA MARIA LP - 47-5513121 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
RAINER VISTA BLOCK 43 OWNER LP - 27-3221112, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
RED DOOR LIMITED PARTNERSHIP - 36-3915050, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
ROCK CREEK TERRACE - 20-1031378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
ROSELAND LIMITED PARTNERHSIP - 36-4304416, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
ROSELAND PLACE LP - 80-0195044, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
SAN FELIPE HOMES (SAN FELIPE HOMES) - 95-4384732, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
SANDSTONE - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
SAXONY MANOR, LLC - 35-2521928, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WI	N/A	RELATED				X	N/A		X	
SC RESIDENCE LLC - 26-0675562 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WI	N/A	RELATED				X	N/A		X	
SILVERCREST - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
SKAGIT VILLAGE - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
SOMERSET SENIOR HSG. - 74-2765568, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	TX	N/A	RELATED				X	N/A		X	
SOUTH LOOP APARTMENTS - 36-4027476, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
ST. ANDREW COMMUNITY, LP - 65-1308080, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
ST. MARY TOWER LLC - 47-5627488, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
SUNNYDALE DEVELOPMENT CO LLC - 26-3566543, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
SYCAMORE STREET COMMONS LLC - 77-0117473, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
TAHOE VALLEY TOWNHOMES ASSOC. - 94-3298324, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
THE KEATING BUILDING LITTLE VILLAGE LLC - 26-4584321, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
THIRD AND LECANTE LP - 26-4176495, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
VILLA COLUMBA MERCY RIVERSIDE, LP - 65-1308076, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
VILLA KATHLEEN REDEVELOPMENT - 77-0601463, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
VILLAGE PARK HOUSING ASSOCIATES - 68-0254566, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	

**Part III** Continuation of Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
VISITATION VALLEY FAM. HSG. ASSOC. - 94-3275566, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
WAPATO GARDENS - 20-1031378 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
WASHINGTON SQUARE - 20-1031378, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
WENTWORTH COMMONS - 30-0082553, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	IL	N/A	RELATED				X	N/A		X	
WEST 28TH STREET - 95-4550003 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	CA	N/A	RELATED				X	N/A		X	
WESTERN MANOR, LP - 26-4578652, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	NE	N/A	RELATED				X	N/A		X	
WOODLAKE MANOR - 77-0601463 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	
WOODLAKE MANOR II - 77-0601463, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNG	WA	N/A	RELATED				X	N/A		X	

**Part IV** Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
AURORA SENIOR APARTMENTS GP, LLC - 27-2564297, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
BELRAY APARTMENTS CORPORATION - 36-4027474 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
BELVIDERE PLACE CORP., I, NFP - 26-3800299 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	KY	N/A	C CORP					X
COUNTRYSIDE SENIORS LLC - 26-1483851 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
DANVILLE VETERANS HOUSING MM, LLC - 36-4728761, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
ENGLEWOOD APARTMENTS NFP - 26-1233523 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
ESPERANZA CROSSING II, LLC - 81-3887973 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CA	N/A	C CORP					X
GREENWICH PARK APARTMENTS MM LLC - 61-1750718, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	WI	N/A	C CORP					X
HAROLD WASHINGTON APARTMENTS CORPORATION - 36-3556291, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
HWA 850 EASTWOOD GP - 27-1257072 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
IMPACT FAMILY VILLAGE GP, LLC - 36-4715432 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	WA	N/A	C CORP					X
KANKAKEE STATION STREET SENIOR HOUSING MM LLC - 32-0399823, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X

**Part IV** Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
MALDEN ARMS CORP II NFP - 36-3815990 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CA	N/A	C CORP					X
MCDERMOTT PLACE - 47-0779682 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IA	N/A	C CORP					X
MCHG PARTNERS, INC. (MCHG) - 20-8824753 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MERCY AFFORDABLE HOUSING, INC. (MAHI) - 82-0489878, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	ID	N/A	C CORP					X
MERCY COMMERCIAL CALIFORNIA - 94-3382154 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CA	N/A	C CORP					X
MERCY GALEWOOD SLF, INC. - 20-5825081 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
MERCY HOUSING GEORGIA XI GP, LLC - 27-3316657, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MERCY LITHONIA PARK VIEW, INC. - 20-8829364 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MERCY OTHELLO PLAZA CONDOMINIUM ASSOCIATION 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	WA	N/A	C CORP					X
MERCY STERLING NFP - 27-4446431 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
MHMP CO GP INC - 61-1689475 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CO	N/A	C CORP					X
MHSE ADAMSVILLE GREEN SENIOR PARTNERS - 27-1321251, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X

**Part IV** Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
MHSE ARBORS LLC - 27-3284075 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MHSE MERCY PARK GP, LLC - 47-3464689 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MHSE SAVANNAH GARDENS PHASE III LLC - 58-2434289, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MHSE SAVANNAH GARDENS PHASE IV GP - 45-4967129, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MHSE SAVANNAH GARDENS PHASE V GP LLC - 46-2777338, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
MHL KEATING MM, LLC - 26-4584262 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
MPI HIGHLAND PLACE LLC - 26-2380898 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X
NEAR NORTH APARTMENTS CORP. NF - 36-4570431 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
NEW STERLING PARK MM, LLC - 27-2523309 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
NEW TACOMA CONDOMINIUM ASSOCIATION - 47-3225087, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	WA	N/A	C CORP					X
ROSELAND APARTMENTS CORPORATION - 36-4304417 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
SAVANNAH ROSE OF SHARON, LLC - 20-3591948 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	GA	N/A	C CORP					X

**Part IV** Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
SOUTH LOOP APARTMENTS CORPORATION - 36-4027475, 1999 BROADWAY, SUITE 1000, DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X
STAPLETON II MERCY LLC - 27-0954394 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	CO	N/A	C CORP					X
WINTHROP APARTMENTS CORPORATION - 36-3855355 1999 BROADWAY, SUITE 1000 DENVER, CO 80202	LOW-INC HSNB	IL	N/A	C CORP					X



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

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

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....	X	
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....	X	
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	X	
<b>e</b> Loans or loan guarantees by related organization(s) .....	X	
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MERCY HOUSING CALIFORNIA	A	147,802.	CASH
(2) MERCY HOUSING CALIFORNIA	B	103,000.	CASH
(3) MERCY HOUSING LAKEFRONT	B	108,034.	CASH
(4) MERCY HOUSING SOUTHEAST	B	64,457.	CASH
(5) MERCY PORTFOLIO SERVICES	B	1,340,408.	CASH
(6) MERCY HOUSING SOUTHEAST	C	121,282.	CASH

**Part V** Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7)MERCY HOUSING CALIFORNIA	C	2,789,636.	CASH
(8)MERCY HOUSING CALIFORNIA PREDEVELOPMENT	D	935,539.	CASH
(9)MERCY HOUSING NORTHWEST PREDEVELOPMENT	D	1,081,259.	CASH
(10)MERCY HOUSING SOUTHEAST PREDEVELOPMENT	E	928,254.	CASH
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			





# TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

DECEMBER 31, 2016

---

**PREPARED FOR:**

MR. JAMES CARROLL  
MERCY HOUSING, INC.  
1999 BROADWAY, SUITE 1000  
DENVER, CO 80202

---

**PREPARED BY:**

COHNREZNICK LLP  
525 NORTH TRYON STREET  
CHARLOTTE, NC 28202

---

**TO BE SIGNED AND DATED BY:**

NOT APPLICABLE

---

**AMOUNT OF TAX:**

TOTAL AX	\$	0
LESS: PAYMENTS AND CREDITS	\$	0
PLUS: OTHER AMOUNT	\$	0
PLUS: INTEREST AND PENALTIES	\$	0
NO PAYMENT IS REQUIRED	\$	0

---

**OVERPAYMENT:**

CREDITED TO YOUR ESTIMATED TAX	\$	0
OTHER AMOUNT	\$	0
REFUNDED TO YOU	\$	0

---

**MAKE CHECK PAYABLE TO:**

NOT APPLICABLE

---

**MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:**

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. PLEASE REVIEW THE RETURN FOR COMPLETENESS AND ACCURACY. WE WILL THEN TRANSMIT YOUR RETURN ELECTRONICALLY TO THE FTB. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.

---

**RETURN MUST BE MAILED ON OR BEFORE:**

NOT APPLICABLE

---

**SPECIAL INSTRUCTIONS:**

# California Exempt Organization Annual Information Return

Calendar Year 2016 or fiscal year beginning (mm/dd/yyyy) \_\_\_\_\_, and ending (mm/dd/yyyy) \_\_\_\_\_

Corporation/Organization name  
**MERCY HOUSING INC**

California corporation number  
**1847229**

Additional information. See instructions.  
FEIN  
**47-0646706**

Street address (suite or room)  
**1999 BROADWAY SUITE 1000**

City  
**DENVER**

State  
**CO**

ZIP code  
**80202**

Foreign country name \_\_\_\_\_ Foreign province/state/county \_\_\_\_\_ Foreign postal code \_\_\_\_\_

**A** First Return  Yes  No

**B** Amended Return  Yes  No

**C** IRC Section 4947(a)(1) trust  Yes  No

**D** Final Information Return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_

**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other

**F** Federal return filed? (1)  990T (2)  990-PF (3)  Sch H (990) (4)  Other 990 series

**G** Is this a group filing? See instructions  Yes  No

**H** Is this organization in a group exemption  Yes  No  
If "Yes," what is the parent's name? \_\_\_\_\_

**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No

**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No

**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_

**L** If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required.

**M** Is the organization a Limited Liability Company?  Yes  No

**N** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No

**O** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No

**P** Is a federal Form 1023/1024 pending?  Yes  No  
Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Instructions B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	13,106,948.00
	2	Gross dues and assessments from members and affiliates	2	00
	3	Gross contributions, gifts, grants, and similar amounts received <b>STMT 1</b>	3	10,217,802.00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Instruction B	4	23,324,750.00
	5	Cost of goods sold	5	00
	6	Cost or other basis, and sales expenses of assets sold	6	00
	7	Total costs. Add line 5 and line 6	7	00
	8	Total gross income. Subtract line 7 from line 4	8	23,324,750.00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	13,499,526.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	9,825,224.00
<b>Filing Fee</b>	11	Total payments	11	00
	12	Use tax. See General Instruction K	12	00
	13	Payment balance. If line 11 is more than line 12, subtract line 12 from line 11	13	00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14	00
	15	Filing fee \$10 or \$25. See General Instruction F	15	N/A 00
	16	Penalties and Interest. See General Instruction J	16	00
	17	<b>Balance due.</b> Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	00
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Title <b>VICE PRESIDENT</b>	Date	<input type="checkbox"/> Telephone
<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	<input type="checkbox"/> PTIN
	Firm's name (or yours, if self-employed) and address <b>COHNREZNICK LLP 525 NORTH TRYON STREET CHARLOTTE, NC 28202</b>			<b>P00450629</b> <input type="checkbox"/> FEIN
				<b>22-1478099</b> <input type="checkbox"/> Telephone <b>704-332-9100</b>
May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

**Part II** Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

628951 11-30-16

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1	12,494,081.00
	2	Interest	•	2	612,867.00
	3	Dividends	•	3	00
	4	Gross rents	•	4	00
	5	Gross royalties	•	5	00
	6	Gross amount received from sale of assets (See Instructions)	•	6	00
	7	Other income	•	7	0.00
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	13,106,948.00
<b>Expenses and Disbursements</b>	9	Contributions, gifts, grants, and similar amounts paid	•	9	1,759,065.00
	10	Disbursements to or for members	•	10	00
	11	Compensation of officers, directors, and trustees	•	11	SEE STATEMENT 2 2,572,253.00
	12	Other salaries and wages	•	12	7,831,419.00
	13	Interest	•	13	1,027,401.00
	14	Taxes	•	14	717,721.00
	15	Rents	•	15	499,776.00
	16	Depreciation and depletion (See instructions)	•	16	23,409.00
	17	Other Expenses and Disbursements	•	17	SEE STATEMENT 3 -931,518.00
	18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	13,499,526.00

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		30,089,309.		• 25,881,453.
2 Net accounts receivable		935,411.		• 3,539,690.
3 Net notes receivable <b>STMT 4</b>		8,099,475.		• 11,353,261.
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments <b>STMT 5</b>		7,927,640.		• 9,000,094.
10 a Depreciable assets	4,701,124.		3,899,792.	
b Less accumulated depreciation	( 3,774,710. )	926,414.	( 3,798,118. )	101,674.
11 Land				• 855,000.
12 Other assets <b>STMT 6</b>		24,269,749.		• 23,222,595.
13 <b>Total assets</b>		72,247,998.		73,953,767.
<b>Liabilities and net worth</b>				
14 Accounts payable		5,874,822.		• 5,211,564.
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable				•
17 Mortgages payable				•
18 Other liabilities <b>STMT 7</b>		42,067,216.		34,611,019.
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund		24,305,960.		• 34,131,184.
22 <b>Total liabilities and net worth</b>		72,247,998.		73,953,767.

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1 Net income per books	• 9,825,224.	7 Income recorded on books this year not included in this return.	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year	•	10 Net income per return.	
5 Expenses recorded on books this year not deducted in this return	•	Subtract line 9 from line 6	9,825,224.
6 Total. Add line 1 through line 5	9,825,224.		

FORM 199

CASH CONTRIBUTIONS  
INCLUDED ON PART I, LINE 3

STATEMENT 1

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
CHP/MERCY HOUSING SOUTHEAST	6521 NORTH AVENUE, SUITE A 150 ATLANTA, GA 30308		121,282.
HELEN M DUNLAP	104 E 32ND STREET CHICAGO, IL 60616		7,500.
SCHWAB CHARITABLE	211 MAIN STREET, FLOOR 10 SAN FRANCISCO, CA 94105		5,000.
CAPITAL ONE GRANT	1680 CAPITAL ONE DRIVE MCLEAN, VA 22102-3491		50,000.
NATION AFFORDABLE HOUSING TRUST INCOME	2245 N BANK DRIVE, SUITE 200 COLUMBUS, OH 43220		61,863.
DIGNITY HEALTH	185 BERRY STREET, SUITE 300 SAN FRANCISCO, CA 94107		200,000.
BANK OF AMERICA FOUNDATION	125 DUPONT DRIVE, RI 1-121-01-30 PROVIDENCE, RI 02907		300,000.
FIDELITY CHARITABLE	P.O. BOX 770001 CINCINNATI, OH 45277-0053		5,000.
TERRA SEARCH PARTNERS	601 MONTGOMERY STREET, SUITE 1090 SAN FRANCISCO, CA 94111		10,000.
EDGEWOOD PARTNERS INSURANCE CENTER	PO BOX 511389 LOS ANGELES, CA 90051-7944		35,000.
COHNREZNICK	4 BECKER FARM ROAD ROSELAND, NJ 07068		15,000.
CATHOLIC HEALTH INITIATIVES	198 INVERNESS DR. WEST ENGLEWOOD, CO 80112		500,000.
COMMUNITY FOUNDATION OF THE CHATTAHOOCHEE VALLEY	1340 13TH STREET COLUMBUS, GA 31901		40,000.



<u>MERCY HOUSING INC</u>		<u>47-0646706</u>
PLAZA MARIA, LLC	115 E REED STREET SAN JOSE, CA 95112	2,789,636.
FRANCISCAN MINISTRIES, INC.	110 COMPTON ROAD CINCINNATI, OH 45215	6,000,000.
PNC FOUNDATION	ONE NORTH FRANKLIN, SUITE 2900 CHICAGO, IL 60606	42,500.
TOTAL INCLUDED ON LINE 3		<u><u>10,182,781.</u></u>

---



---

 FORM 199      COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES      STATEMENT 2
 

---

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
ADRIENNE CROWE 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR/VICE-CHAIRMAN 1.00	0.
BARRY ZIGAS 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR/CHARIMAN 1.00	0.
BARBARA KELLEY 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
BOB TETRAULT 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
CAROL WETMORE 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
CHARLIE FRANCIS 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
DOUG JUTTE 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
JIM PARK 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
LESLIE WITTMANN 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
PATRICIA COCHRAN 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
SCOTT POCOCK 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.

MERCY HOUSING INC

47-0646706

SR. BARBARA BUSCH 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
SR. DIANE HEJNA 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
SR. LINDA WERTHMAN 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
SR. PAT MCDERMOTT 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
SR. ROSE MARIE JASINSKI 1999 BROADWAY SUITE 1000 DENVER 80202	DIRECTOR 1.00	0.
SUZANNE SWIFT 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
YVONNE CAMACHO 1999 BROADWAY SUITE 1000 DENVER, CO 80202	DIRECTOR 1.00	0.
BILL RUMPF 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
CADE SCHOLL 1999 BROADWAY SUITE 1000 DENVER, CO 80202	VICE PRESIDENT 40.00	0.
CAROL BRESLAU 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
CHERYLL O'BRYAN 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VP/PRESIDENT OF MHM 0.00	0.
CHRIS BURCKHARDT 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT/ COO 40.00	0.

MERCY HOUSING INC

47-0646706

CHRISTOPHER REED 1999 BROADWAY SUITE 1000 DENVER, CO 80202	VICE PRESIDENT 0.00	0.
CHRISTY RICHARDSON 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
DOUG SHOEMAKER 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
FRANCENA MARIE LOWE 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
JANE GRAF 1999 BROADWAY SUITE 1000 DENVER, CO 80202	CHIEF EXECUTIVE OFFICER 40.00	0.
JOHN MARCOLINA 1999 BROADWAY SUITE 1000 DENVER, CO 80202	VICE PRESIDENT 40.00	0.
MARK ANGELINI 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
MELISSA CLAYTON 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.
MICHELE MAMET 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VP/CHIEF ADMIN OFFI 40.00	0.
RON JACKSON 1999 BROADWAY SUITE 1000 DENVER, CO 80202	VICE PRESIDENT/SECRETARY 40.00	0.
STEVE SPEARS 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VP/CHIEF FINANCIAL 40.00	0.
VAL AGOSTINO 1999 BROADWAY SUITE 1000 DENVER, CO 80202	SENIOR VICE PRESIDENT 40.00	0.

MERCY HOUSING INC

47-0646706

VINCE DODDS  
1999 BROADWAY SUITE 1000  
DENVER, CO 80202

VICE PRESIDENT  
40.00

0.

EDWARD HOLDER  
1999 BROADWAY SUITE 1000  
DENVER 80202

EMPLOYEE  
40.00

0.

DAVID GRAHAM LYON  
1999 BROADWAY SUITE 1000  
DENVER 80202

EMPLOYEE  
40.00

0.

CHAD LEVERENZ  
1999 BROADWAY SUITE 1000  
DENVER 80202

EMPLOYEE  
40.00

0.

GUNNAR TANDE  
1999 BROADWAY SUITE 1000  
DENVER 80202

EMPLOYEE  
40.00

0.

DAVID FERNANDEZ  
1999 BROADWAY SUITE 1000  
DENVER 80202

EMPLOYEE  
40.00

0.

TOTAL TO FORM 199, PART II, LINE 11

0.

## FORM 199

## OTHER EXPENSES

## STATEMENT 3

DESCRIPTION	AMOUNT
INSURANCE EXP FOR PROPE	3,490,900.
CONTRACT LABOR-TEMP	530,637.
MISCELLANEOUS ADMIN	404,573.
BANK SERVICE CHARGES	362,058.
PENSION PLAN CONTRIBUTIONS	246,723.
OTHER EMPLOYEE BENEFITS	749,039.
MANAGEMENT FEES	438,932.
LEGAL FEES	756,013.
ACCOUNTING FEES	91,751.
OTHER PROFESSIONAL FEES	350,172.
ADVERTISING AND PROMOTION	148,706.
OFFICE EXPENSES	854,419.
INFORMATION TECHNOLOGY	810,435.
TRAVEL	612,730.
CONFERENCES AND CONVENTIONS	19,381.
INSURANCE	18,011.
ALL OTHER EXPENSES	-10,815,998.
TOTAL TO FORM 199, PART II, LINE 17	-931,518.

FORM 199

NET NOTES RECEIVABLE

STATEMENT 4

DESCRIPTION

BEG. OF YEAR

END OF YEAR

NOTES AND LOANS RECEIVABLE, NET

8,099,475.

11,353,261.

TOTAL TO FORM 199, SCHEDULE L, LINE 3

8,099,475.

11,353,261.

FORM 199

OTHER INVESTMENTS

STATEMENT 5

DESCRIPTION

BEG. OF YEAR

END OF YEAR

INVESTMENTS - PROGRAM RELATED

7,927,640.

9,000,094.

TOTAL TO FORM 199, SCHEDULE L, LINE 9

7,927,640.

9,000,094.



FORM 199

OTHER ASSETS

STATEMENT 6

DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	2,550,135.	1,600,135.
PREPAID EXPENSES AND DEFERRED CHARGES	1,880,679.	1,663,677.
DUE FROM AFFILIATES	12,954,870.	13,074,718.
LOAN TO AFFILIATES	6,884,065.	6,884,065.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	24,269,749.	23,222,595.

FORM 199

OTHER LIABILITIES

STATEMENT 7

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DUE TO AFFILIATES	12,458,926.	11,373,006.
ACCRUED INTEREST	123,633.	147,447.
DEFERRED REVENUE	8,430,954.	4,727,189.
UNSECURED NOTES AND LOANS PAYABLE	21,053,703.	18,363,377.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	42,067,216.	34,611,019.

FORM 199

FUND BALANCES

STATEMENT 8

<u>DESCRIPTION</u>	<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
UNRESTRICTED ASSETS	18,492,173.	29,401,663.
TEMPORARILY RESTRICTED ASSETS	5,058,787.	3,974,521.
PERMANENTLY RESTRICTED ASSETS	755,000.	755,000.
TOTAL TO FORM 199, SCHEDULE L, LINE 21	<u>24,305,960.</u>	<u>34,131,184.</u>

TAXABLE YEAR  
**2016**

# California e-file Return Authorization for Exempt Organizations

FORM  
**8453-EO**

Exempt Organization name	Identifying number
<b>MERCY HOUSING INC</b>	<b>47-0646706</b>

**Part I Electronic Return Information** (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	<b>23,324,750.00</b>
2 Total gross income (Form 199, line 8)	2	<b>23,324,750.00</b>
3 Total expenses and disbursements (Form 199, line 9)	3	<b>13,499,526.00</b>

**Part II Settle Your Account Electronically for Taxable Year 2016**

4 <input type="checkbox"/> Electronic funds withdrawal	4a Amount	4b Withdrawal date (mm/dd/yyyy)
--	-----------	---------------------------------

**Part III Banking Information** (Have you verified the exempt organization's banking information?)

5 Routing number _____	7 Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
6 Account number _____	

**Part IV Declaration of Officer**

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2016 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

**Sign Here**

			<b>VICE PRESIDENT</b>
Signature of officer	Date	Title	

**Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.**

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2016 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

<b>ERO</b> <b>Must Sign</b>	ERO's signature	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN
	Firm's name (or yours if self-employed) and address	<b>COHNREZNICK LLP</b> <b>525 NORTH TRYON STREET</b> <b>CHARLOTTE, NC</b>			FEIN <b>22-1478099</b>
					ZIP code <b>28202</b>

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

<b>Paid Preparer</b> <b>Must Sign</b>	Paid preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN	
	Firm's name (or yours if self-employed) and address	<b>COHNREZNICK LLP</b> <b>525 NORTH TRYON STREET</b> <b>CHARLOTTE, NC</b>			FEIN <b>22-1478099</b>
					ZIP code <b>28202</b>