Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047
2009

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

AF	or th	e 2009	calen	dar year, or tax year beginning , 2009, and ending	_	, 20
B c	heck if ap		Please	C Name of organization REGIONAL HOUSING & COMMUNITY DEVELOPMENT	D Employer identific	cation number
	Addre chang		use IRS label or	Doing Business As RHCDA	43-1611669)
	Name	change	print or	Number and street (or P.O. box if mail is not delivered to street address) Room/sui	ite E Telephone number	
	Initial	return	type. See	611 OLIVE STREET, STE. 1641	(314) 231-9	400
	Termi	nated	Specific Instruc-	City or town, state or country, and ZIP + 4		
	Amen		tions.	SAINT LOUIS, MO 63101	G Gross receipts \$	3,589,754.
	return Applic	ation	F Na	me and address of principal officer: STEPHEN ACREE	H(a) Is this a group return	
_	_ pendii	ng		DLIVE ST STE 1641 ST LOUIS, MO 63101	affiliates? H(b) Are all affiliates inclu	
_	Tay-ey	empt st		X 501(c) (3) ◄ (insert no.) 4947(a)(1) or 527	If "No," attach a list.	
				RHCDA.COM	H(c) Group exemption nu	
		of organi			mation: 1992 M State	
	rt I		nmary	X Corporation Trust Association Other ▶ L Year of for	mation. 1992 W State	or legal domicile. MO
& Governance	1	REME		e the organization's mission or most significant activities: ING NEIGHBORHOOD BLIGHT if the organization discontinued its operations or disposed of more than 259		
တိ					1.1	24
	3			ing members of the governing body (Part VI, line 1a)		
Activities	4				4	24
₹	5			of employees (Part V, line 2a)	5	0
Ą	6			of volunteers (estimate if necessary)	6	24
	7 a	Total (gross ur	related business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net ur	related	business taxable income from Form 990-T, line 34	7b	0.
Revenue					Prior Year	Current Year
	8	Contri	butions	and grants (Part VIII, line 1h)	328,951.	1,900,616.
	9	Progra	am serv	ce revenue (Part VIII, line 2g)	1,336,400.	1,684,450.
eve	10			ome (Part VIII, column (A), lines 3, 4, and 7d)	135,875.	422.
œ	11	Other	revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	4,266.
	12			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,801,226.	3,589,754.
	13			nilar amounts paid (Part IX, column (A), lines 1-3)	55,250.	79,900.
				(0.	
	14			o or for members (Part IX, column (A), line 4)		
Expenses	15			compensation, employee benefits (Part IX, column (A), lines 5-10)	1,158,700.	1,141,889.
ens	16 a	Profes	sional f	ındraising fees (Part IX, column (A), line 11e)	0.	0.
Ϋ́	ı			ng expenses, Part IX, column (D), line 25) 19,704.		
	17	Other	expens	s (Part IX, column (A), lines 11a-11d, 11f-24f)	223,586.	402,109.
	18	Total 6	expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,437,536.	1,623,898.
	19	Reven	ue less	expenses. Subtract line 18 from line 12	363,690.	1,965,856.
Net Assets or Fund Balances					Beginning of Year	End of Year
sets	20	Total a	assets (Part X, line 16)	9,772,304.	13,756,515.
Age	21			(Part X, line 26)	3,796,150.	6,049,209.
Ĕ.Š	22			und balances. Subtract line 21 from line 20	5,976,154.	7,707,306.
	rt II	Sic	natur	Block	. ,	· · · · · · · · · · · · · · · · · · ·
s	ign ere	Under and b	penaltion	s of perjury, I declare that I have examined this return, including accompanying schedules s true, correct, and complete. Declaration of preparer (other than officer) is based on all e of officer	and statements, and to the information of which prepulation Date	ne best of my knowledge arer has any knowledge.
			Type or	rint name and title		
Paid		Prepa	arer's	Date Check self-employ	(see instru	identifying number ctions)
	arer's	Firm's	name (d	yours RUBINBROWN LLP	EIN ▶ 4	3-0765316
use	Only	I II Sell-	employe ss, and 2	l), ————————————————————————————————————	Phone no. ▶ 3	14-290-3300
May	the IF	RS disc	uss this	return with the preparer shown above? (see instructions)		X Yes No

Pa	art III	Statement of Program Service Accomplishments	
1	Briefly	/ describe the organization's mission:	
		DIATING NEIGHBORHOOD BLIGHT	
2	Did th	ne organization undertake any significant program services during the year which were not listed on	
			es X No
	If "Yes	s," describe these new services on Schedule O.	
3	Did th	ne organization cease conducting, or make significant changes in how it conducts, any program	
	service		es X No
	If "Yes	s," describe these changes on Schedule O.	
4		ibe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
	Sectio	on 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	and
	allocat	tions to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code	e:) (Expenses \$ _{751,084} . including grants of \$ ₀ .) (Revenue \$ _{1,162,3}	17
	•	LOPMENT PROJECTS: RHCDA PROVIDED ASSISTANCE AS THE DEVELOPER	, , , ,
		CONSULTANT OF RESIDENTIAL DEVELOPMENT PROJECTS.	
		ONDOLLIMI OI MOIDEMIIIE DEVELOIMEMI IMODOIO.	
41.	(OI -	\(\(\Gamma \) \(\G \) \(\Gamma \) \(\Gam	```
4b		e:)(Expenses\$320,277including grants of \$79,900)(Revenue \$ CAPACITY BUILDING AND COLLABORATIVE GRANT PROGRAMS: PROVIDES	0)
		CITY BUILDING TECHNICAL ASSISTANCE TO COMMUNITY-BASED	
		CONTROL CORPORATIONS TO HELP THEM REVITALIZE NEIGHBORHOODS.	
		COLLABORATIVE GRANT PROGRAM PROVIDES ENHANCED CAPACITY	
		DING TECHNICAL ASSISTANCE COUPLED WITH OPERATING SUPPORT	
	GRAN'	ITS TO TARGETED CDC'S.	
4c	(Code		<u>91.</u>)
		T MANAGEMENT: PROVIDES OVERSIGHT OF RESIDENTIAL RENTAL	
		PERTIES THAT ARE DIRECTLY MANAGED ON A DAY TO DAY BASIS BY	
	THIR	D PARTY PROPERTY MANAGEMENT FIRMS.	
4d	Other	program services. (Describe in Schedule O.) ATTACHMENT 3	
	(Exper	nses \$ 231,139. including grants of \$ 0.) (Revenue \$ 346,008.)	
4e	<u> </u>	program service expenses \(\bigs\) 1,425,948.	
_			

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Χ
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes,"complete Schedule D, Part V	10		Χ
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>			
	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes,"</i>			
12	complete Schedule D. Parts XI. XII. and XIII.	12		Χ
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No	12		Λ
127	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?			X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	14a		Λ
b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	4.4h		v
15		14b		X
13	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		37
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		37
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	_		3.7
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Χ

Part IV **Checklist of Required Schedules** (continued) Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 21 Χ in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 Χ 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated Χ Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25 24a Χ **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Χ with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 25b 990-EZ? If "Yes," complete Schedule L. Part I Χ 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Χ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II, Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? Χ 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV...... A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Χ conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Χ Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Χ Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable 9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		3.7
_	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7-		v
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7e		Х
f	benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	. 9		
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			

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.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		X
	ion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	enue Code.)		V	NI-
			Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		X	
	form?	11	Λ	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	21	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	X	
•	rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
. •	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a				
	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE REQUIRED NONE REQUIRED			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only	·)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ►MR. RON KRAUS 611 OLIVE STREET, STE 1641 ST LOUIS, MO 63101			

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

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. Use Schedule J-2 if additional space is needed.
- 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. 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 the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average	(C) Position (check all that apply)				hat ann	lv)	(D) Reportable	(E) Reportable	(F) Estimated
realite and The	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARY CAMPBELL										
DIRECTOR	2.00	X						0.	0.	0.
JOHN DUBINSKY										
DIRECTOR	2.00	X						0.	0.	0.
SETH LEADBEATER										
DIRECTOR	2.00	Х						0.	0.	0.
DAVID C. MASON										
DIRECTOR	2.00	Х						0.	0.	0.
DEBRA MOORE										
DIRECTOR	2.00	Х						0.	0.	0.
TOM PICKEL										
DIRECTOR	2.00	X						0.	0.	. 0.
TOM REEVES										
VICE CHAIR	2.00	Х		Х				0.	0.	0.
GINA RYAN										
DIRECTOR	2.00	Х						0.	0.	0.
BETH STOHR										
DIRECTOR	2.00	X						0.	0.	0
PETER BENOIST										
CHAIR	2.00	Х		Х				0.	0.	0
ELIZABETH WRIGHT										
DIRECTOR	2.00	Х						0.	0.	. 0
ROBERT CANNON										
DIRECTOR	2.00	X						0.	0.	0
JIM HOLTZMAN	1									
EX OFFICIO DIRECTOR	2.00	X						0.	0.	. 0.
GREG VATTEROTT	1	† <u></u>								
DIRECTOR	2.00	X						0.	0.	0
JILL CLAYBOUR	1									
EX-OFFICIO DIRECTOR	2.00	X						0.	0.	0
JONATHAN GOLDSTEIN		<u> </u>								
DIRECTOR	2.00	X						0.	0.	0
		1 23						<u> </u>		F 990 (2222)

Form **990** (2009)

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Part VII Section A. Officers, Directors, Tru	ustees, Ke	tees, Key Employees, and Highest Compensated Employe								es(continued)		
(A)	(B)				C)			(D)	(E)	(F)		
Name and title	Average hours per week	ndividual trustee or director	n Institutional trustee	Officer	all t Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations		
KIMBERLY MCKINNEY												
DIRECTOR	2.00	X						0.	0.	0.		
SUE MCCOLLUM												
DIRECTOR	2.00	X						0.	0.	0.		
PETER PIEROTTI												
DIRECTOR	2.00	X						0.	0.	0.		
ALLAN IVIE, IV												
DIRECTOR	2.00	Х						0.	0.	0.		
HENRY WEBBER												
DIRECTOR	2.00	Х						0.	0.	0.		
BRENT WROTEN												
DIRECTOR	2.00	Х						0.	0.	0.		
KAREN DAVIS												
DIRECTOR	2.00	X						0.	0.	0.		
LAUREL PETERSON												
DIRECTOR	2.00	Х						0.	0.	0.		
STEPHEN ACREE												
PRESIDENT	40.00			Х				109,272.	0.	10,195.		
RONALD R KRAUS JR												
CHIEF FINANCIAL OFFICER	40.00			Х				92,882.	0.	18,594.		
J. DAVID DODSON												
DEPUTY DIRECTOR	40.00					Х		102,716.	0.	7,731.		
1b Total	<u></u>							304,870.	0.	36,520.		

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated			
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		Х
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? If "Yes," complete Schedule J for such			
	individual	4		Х
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for			
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		Х

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

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

Part VIII		Statement of Revenue		43-1611669						
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514			
ts ts	1a	Federated campaigns 1a								
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b								
ts, g	С	Fundraising events 1c								
igi ilar	d	Related organizations	1,491,669.							
ons	е	Government grants (contributions) 1e	63,602.							
oution	f	All other contributions, gifts, grants,								
a di di		and similar amounts not included above . 1f	345,345.							
a Ĉ	g h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f		1 000 616						
	-"	Total. Add lines 1a-11	Business Code	1,900,616.						
Program Service Revenue	2a	REAL ESTATE DEVELOPMENT	541900	1,158,051.	1,158,051.					
Re	b	LOAN FUNDS	522292	25,505.	25,505.					
<u>ic</u>	C	ASSET MANAGEMENT	523920	180,391.	180,391.					
Serv	d	INTEREST (PROGRAM RELATED INV)	900099	320,503.	320,503.					
Ē	е									
ogra	f	All other program service revenue								
<u> </u>	g	Total. Add lines 2a-2f	<u> ▶</u>	1,684,450.						
	3	Investment income (including dividends, interes								
		other similar amounts)		422.			422.			
	4	Income from investment of tax-exempt bond pr		0.						
	5	Royalties (i) Real	(ii) Personal	0.						
	_		(ii) i diddiidii							
	6a	Gross Rents.								
	b	Less: rental expenses								
	d	Net rental income or (loss)		0.						
		(i) Securities	(ii) Other							
	7a	Gross amount from sales of assets other than inventory								
	b	Less: cost or other basis								
		and sales expenses								
	С	Gain or (loss)								
	d	Net gain or (loss)	. <u> </u>	0.						
ne	8a	Gross income from fundraising								
en		events (not including \$								
Şe		of contributions reported on line 1c).								
ř	١.	See Part IV, line 18								
Other Revenue	b	Less: direct expenses		0.						
O	9a	Gross income from gaming activities.		0.						
	Ja	See Part IV, line 19								
	b	Less: direct expenses b								
	C	Net income or (loss) from gaming activities		0.						
	10a	Gross sales of inventory, less								
		returns and allowances a								
	b	Less: cost of goods sold b								
	С	Net income or (loss) from sales of inventory		0.						
		Miscellaneous Revenue	Business Code							
	11a	OTHER INCOME	900099	4,266.	4,266.	0.	0.			
	b									
	C	All others assessed				0.	0.			
	d	All other revenue		4,266.		U.	0.			
	12	Total Revenue. See instructions		3,589,754.	1,688,716.	0.	422.			
				0,000,104.	1,000,710.	٠.	422.			

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) but are not required to complete columns (B), (C), and (D).

Do	All other organizations must complete not include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundráising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	79,900.	79,900.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	0			
	U.S. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,	230,943.	157,410.	59,764.	13,769.
c	trustees, and key employees	230, 343.	137,410.	33,704.	13,703.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4938(r)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	688,276.	619,231.	68,440.	605.
	Pension plan contributions (include section 401(k)	0007270.	013/231.	00,110.	
8	and section 403(b) employer contributions)	19,798.	18,377.	1,421.	
9	Other employee benefits	135,826.	117,844.	16,233.	1,749.
10	Payroll taxes	67,046.	56,944.	9,096.	1,006.
11	Fees for services (non-employees):	21,020	,	2,000.	_, =, = = =
	Management	0.			
	Legal	7,798.	6,623.	1,058.	117.
	Accounting	49,669.	42,184.	6,740.	745.
	Lobbying	0.	,	,	
	Professional fundraising services. See Part IV, line 17	0.			
	Investment management fees	0.			0
g	Other	43,126.	43,126.		
12	Advertising and promotion	17,982.	15,273.	2,440.	269.
13	Office expenses	62,012.	52 , 677.	8,406.	929.
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	0.			
17	Travel	9,503.	8,071.	1,290.	142.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	0.			
20	Interest	135,710.	135,710.	0.	0
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	1,099.	933.	149.	17.
23	Insurance	4,719.	4,008.	640.	71.
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
	BAD DEBTS	51,557.	51,557.	2 11 1	
	OTHER TAXES AND LICENSES	15,582.	13,234.	2,114.	234.
	TRAINING AND EDUCATION	1,527.	1,297.	207.	23.
	DUES AND SUBSCRIPTIONS	1,110.	942.	151.	17.
	CHARITABLE CONTRIBUTIONS	715.	607.	97.	11.
	All other expenses	1 (02 000	1 405 040	170 046	10 704
	Total functional expenses. Add lines 1 through 24f	1,623,898.	1,425,948.	178,246.	19,704.
26	Joint Costs. Check here ▶ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
JSA	runuraising solicitation				5 000 (0000)

JSA 9E1052 1.000

Form 990 (2009) Part X Balance Sheet

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	87,531.	1	79,246.
	2	Savings and temporary cash investments	26,809.	2	298,220.
	3	Pledges and grants receivable, net	45,500.	3	45,500.
	4	Accounts receivable, net	220,929.	4	370,652.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or 10a 26,777.			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	2,886.	10c	1,787.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	9,306,022.	13	12,514,837.
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	82,627.	15	446,273.
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,772,304.	16	13,756,515.
	17	Accounts payable and accrued expenses	59,589.	17	36,620.
	18	Grants payable		18	
	19	Deferred revenue	15,000.	19	0.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
jab		employees, highest compensated employees, and disqualified			
_		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties ATCH 5	2,617,019.	23	5,248,388.
	24	Unsecured notes and loans payable to unrelated third parties	1 104 540	24	7.64 001
	25	Other liabilities. Complete Part X of Schedule D	1,104,542.	25	764,201.
_	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ► X and	3,796,150.	26	6,049,209.
S		Organizations that follow SFAS 117, check here ► △ and complete lines 27 through 29, and lines 33 and 34.			
ű	27	Unrestricted net assets	4,737,066.	27	7,591,604.
<u>a</u>	28	Temporarily restricted net assets	1,239,088.	28	115,702.
B B	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. ■			
<u>8</u>	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	5,976,154.	33	7,707,306.
	34	Total liabilities and net assets/fund balances	9,772,304.	34	13,756,515.
			·		Farm QQ0 (2000

Form 990 (2009) Page **12**

Pa	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	Separate basis X Consolidated basis Both consolidated and separate basis			
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?	3a		X
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.	3b		
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

2009					
Open to Public Inspection					

Nan	ne of t	he organizatio	n REGIONAL H	HOUSING & COMMU	NITY DEV	ELOPMEN	T		Employe	r identifica	tion number
AL	LIAN	ICE								43-16	511669
Pa	rt I	Reason fo	or Public Char	ity Status (All organi	izations m	ust compl	ete this p	oart.) Se	e instruc	tions.	
The	orga	nization is no	t a private founda	ation because it is: (For	lines 1 thro	ugh 11, ch	eck only c	ne box.)			
1		A church, co	onvention of churc	ches, or association of	churches d	escribed in	section	n 170(b)(′	l)(A)(i).		
2		A school de	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sched	ule E.)					
3	Ш	A hospital or	r a cooperative h	ospital service organiza	ation descril	oed in se	ction 170	(b)(1)(A)(i	iii).		
4		A medical	research organiz	zation operated in co	njunction v	with a hos	pital desc	cribed in	section	170(b)(1)	(A)(iii). Enter the
		-	ame, city, and sta								
5		•	•	or the benefit of a col	lege or un	iversity ow	ned or o	perated b	by a gove	rnmental	unit described in
			(b)(1)(A)(iv). (Co								
6			_	ernment or government						_	
7	X	_		lly receives a substan	-	its support	from a q	governme	ntal unit	or from	the general public
_				1)(A)(vi). (Complete F							
8				in section 170(b)(1)(a							
9		_		ly receives: (1) more							-
				ted to its exempt fun		-		-			
			•	ment income and un				•		511 tax)	trom businesses
40			•	after June 30, 1975.					,		
10 11		-	_	nd operated exclusively and operated exclusi	-		=			oo of or	to corry out the
• •		_	-	ublicly supported orga	=		-				-
				at describes the type of					-		
		a Typ				e III - Func					pe III - Other
•	•		_	ertify that the organiz			-	-			/ I:
			=	on managers and oth				=			
		-	section 509(a)(2	-			. ,		J		
f	;	If the organ	nization received	a written determinat	tion from t	he IRS tha	at it is a	Type I, T	ype II, o	r Type III	supporting
		organization	, check this box								
Ç	3	Since Augus	st 17, 2006, has t	he organization accept	ed any gift	or contribut	ion from a	ny of the			
		following pe								•	
		(i) A perso	on who directly	or indirectly controls	, either ald	one or toge	ether witl	h person	s describ	ed in (ii)	Yes No
			_	erning body of the sup	-	inization?					11g(i)
				erson described in (i) at							11g(ii)
			-	of a person described in							11g(iii)
ŀ				tion about the supporte		· ,					
(i)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) lis	rganization sted in vour	(v) Did y	ou notity ization in	organizát	s the ion in col.	(vii) Amount of support
				above or IRC section	governing		col. (i)	of your	(i) organiz	zed in the	
				(see instructions))	Yes	No	Yes	oort?	Yes	S.? No	
					163	140	163	140	163	140	
Tot	al										

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 43-1611669 Page **2**

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.)

Sec	tion A. Public Support								
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,195,126.	675,335.	621,937.	328,951.	1,900,616.	6,721,965.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3	3,195,126.	675,335.	621,937.	328,951.	1,900,616.	6,721,965.		
5	The portion of total contributions by each								
	person (other than a governmental unit or								
	publicly supported organization) included								
	on line 1 that exceeds 2% of the amount								
_	shown on line 11, column (f)						4,099,076.		
6	Public support. Subtract line 5 from line 4.						2,622,889.		
	tion B. Total Support	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
_	endar year (or fiscal year beginning in)	,	, ,						
7	Amounts from line 4	3,195,126.	675,335.	621,937.	328,951.	1,900,616.	6,721,965.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,461.	5,248.	4,913.	5,693.	422.	28,737.		
		,	,	·			· · · · · · · · · · · · · · · · · · ·		
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATCH. 1	1,500.	600.	400.	0.	4,266.	6 , 766 <u>.</u>		
11	Total support. Add lines 7 through 10						6,757,468.		
12	Gross receipts from related activities, etc. (se	ee instructions)				12	4,322,137.		
13	First five years. If the Form 990 is forganization, check this box and stop here	or the organizati	on's first, second	d, third, fourth,	or fifth tax yea				
Sec	tion C. Computation of Public Sup	port Percenta	ge						
14	Public support percentage for 2009 (line	e 6, column (f) di	vided by line 11,	column (f))		14	38.81 %		
15	Public support percentage from 2008 So					15	36.70 %		
16a	33 1/3 % support test - 2009. If the o	-							
	this box and stop here . The organization								
b	33 1/3 % support test - 2008. If the o								
	check this box and stop here. The orga								
17a	10%-facts-and-circumstances test - 2								
	or more, and if the organization me					-			
	Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported								
	organization								
b	10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line								
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.								
	Explain in Part IV how the organzation								
	supported organization						▶ 🔲		
18	Private foundation. If the organizatio								
	instructions						<u> ▶ </u>		

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 43-1611669 Page **3**

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and	 -					
	membership fees received. (Do not include						
	any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities	 -					
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	 -					
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	 -					
	its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the	 -					
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3	 -					
	received from disqualified persons						
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support		I	T	T	Γ	
Ca	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans,	 -					
	rents, royalties and income from similar	 -					
	sources.						
D	Unrelated business taxable income (less	 -					
	section 511 taxes) from businesses	 -					
_	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,	 -					
	whether or not the business is regularly	 -					
	carried on						-
12	Other income. Do not include gain or	 -					
	loss from the sale of capital assets (Explain in Part IV.)	 -					
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	 -					
14	First five years. If the Form 990 is for	the organization	's first. second.	third. fourth. or	fifth tax vear a	s a section 5010	(c)(3)
	organization, check this box and stop here	•					
Sec	tion C. Computation of Public Sup						<u> </u>
15	Public support percentage for 2009 (line 8, co	olumn (f) divided b	y line 13, column	(f))		15	%
16	Public support percentage from 2008 Schedu	ıle A, Part III, line	15			16	%
Sec	tion D. Computation of Investmen	t Income Perc	centage				
17	Investment income percentage for 2009 (lin	ne 10c, column (f)	divided by line 13	, column (f))		17	%
18	Investment income percentage from 2008	Schedule A, Part I	III, line 17			18	%
19 a	33 1/3 % support tests - 2009. If the or	rganization did n	ot check the bo	x on line 14, and	d line 15 is more	e than 331/3 %,	and line
	17 is not more than 33 1/3 %, check the	nis box and sto	p here . The org	anization qualifie	s as a publicly	supported organi	zation ►
b	33 1/3 % support tests - 2008. If the org	anization did not	check a box on	line 14 or line 19	9a, and line 16 is	more than 331/3	3 %, and
	line 18 is not more than $331/3$ %, check			-			
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this bo	x and see instr	uctions

PAGE 15

43-1611669

Page 4

Schedule A (Form 990 or 990-EZ) 2009

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

					ATTACHMENT 1						
SCHEDULE A, PART II - OTHER INCOME											
DESCRIPTION	2005	2006	2007	2008	2009	TOTAL					
OTHER INCOME	1,500.	600.	400.	0.	4,266.	6,766.					
TOTALS	1,500.	600.	400-	0.	4,266.	6.766.					