## **Return of Organization Exempt From Income Tax**

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

2017

DLN: 93493316036058 OMB No 1545-0047

Department of the Treasury

 ▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> Open to Public

Interna	ıl Rever	nue Service			•			Inspection
A F	or the	e <b>2017</b> ca		ning 01-01-2017 , and ending 12-	31-2017			
☐ Ad	dress o	pplicable change	C Name of organization MIDWEST HOUSING EQUITY GROUP	INC		<b>D Employe</b> 47-0767		cation number
☐ Ini	me cha itial ret al return	-	Doing business as					
		return on pending	Number and street (or P O box if ma 515 N 162ND AVE NO 202		suite	E Telephone (402) 33		
			City or town, state or province, coun OMAHA, NE 68118	try, and ZIP or foreign postal code		<b>G</b> Gross rec	eıpts \$ 11	,340,650
			<b>F</b> Name and address of principal JASON MAIN	officer	H(a) Is this	s a group reti	urn for	
			515 N 162ND AVE NO 202 OMAHA, NE 68118			dinates?    subordinate  ed?	es	□Yes <b>☑</b> No □Yes □No
<b>I</b> Ta	x-exen	npt status	<b>☑</b> 501(c)(3)	nsert no ) 4947(a)(1) or 527	1	," attach a lis	st (see i	nstructions)
J W	ebsit	e:► WW	W MHEGINC COM		H(c) Group	exemption i	number	•
		ganızatıon	✓ Corporation ☐ Trust ☐ Associ	ciation  Other	<b>L</b> Year of forma	ation 1993	<b>M</b> State o	of legal domicile NE
Pa	rt I	Sumi	mary		·			
ance	N	4IDWEST	cribe the organization's mission or HOUSING EQUITY GROUP INC'S M AINABILITY OF QUALITY AFFORDA	ISSION IS TO CHANGE LIVES FOR A B	ETTER TOMORR	OW BY PROM	MOTING T	THE DEVELOPMENT
Governance	-							
				continued its operations or disposed of g body (Part VI, line 1a)			sets 3	8
Activities &			-	the governing body (Part VI, line 1b)			4	7
Œ.	I		•	endar year 2017 (Part V, line 2a)			5	41
₹	I		, ,	essary)			6	0
ĕ	I		•	VIII, column (C), line 12			7a	0
	1			Form 990-T, line 34			7b	0
				·	Pri	or Year		Current Year
_	8	Contribut	ons and grants (Part VIII, line 1h)			34,1	16	0
Ravenue	9	Program s	service revenue (Part VIII, line 2g)			10,227,8	46	11,117,275
ōΛċ	10	Investme	nt income (Part VIII, column (A), l	ines 3, 4, and 7d )		157,7	58	176,824
<u> </u>	11	Other rev	enue (Part VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)			0	0
	12	Total reve	enue—add lines 8 through 11 (mus	st equal Part VIII, column (A), line 12)		10,419,7	20	11,294,099
	13	Grants an	nd sımılar amounts paıd (Part IX, c	olumn (A), lines 1–3 )		30,0	75	45,343
	14	Benefits p	oald to or for members (Part IX, co	lumn (A), line 4)			0	0
SS.	15	Salaries,	other compensation, employee bei	nefits (Part IX, column (A), lines 5–10)		5,426,4	81	5,729,741
Expenses	16a	Professio	nal fundraising fees (Part IX, colur	nn (A), line 11e)			0	0
e d	Ь	Total fundr	aising expenses (Part IX, column (D), lir	ne 25) ▶0				
Ω	17	Other exp	oenses (Part IX, column (A), lines :	11a-11d, 11f-24e)		2,356,7	76	2,534,445
	18	Total exp	enses Add lines 13–17 (must equa	al Part IX, column (A), line 25)		7,813,3	32	8,309,529
	19	Revenue	less expenses Subtract line 18 fro	m line 12		2,606,3	88	2,984,570
Net Assets or Fund Balances					Beginning	of Current Ye	ear	End of Year
SS6 Bak	20	Total asse	ets (Part X, line 16)			39,212,7	93	42,868,240
₹ 월	21	Total liabi	ılıtıes (Part X, lıne 26)			2,611,6	76	2,914,747
žΞ	22	Net asset	s or fund balances Subtract line 2	1 from line 20		36,601,1	17	39,953,493
	<b>rt III</b> r pena		ature Block erjury, I declare that I have examı	ned this return, including accompanyin	ig schedules and	statements,	, and to	the best of my
	ledge :nowle		f, it is true, correct, and complete	Declaration of preparer (other than of	ficer) is based o	n all informa	tion of w	hich preparer has
		*****	*		201	8-11-12		
Sign	ı	Signatu	ure of officer		Dat	e		<del></del>
Here	e		MAIN CFO r print name and title					
			rınt/Type preparer's name LLEN WILDE	Preparer's signature ELLEN WILDE	Date Che		TIN 01254265	
Paid		<u> </u>			self	-employed		
	pare	*¹   <del>_</del>	irm's name ► DAUBY O'CONNOR & ZA irm's address ► 501 CONGRESSIONAL B			n's EIN > 35-1		
Use	On	ly			Pho	one no (317) 8	-U-3/UU	
			CARMEL, IN 46032					
•			this return with the preparer show	· · · · · · · · · · · · · · · · · · ·			<b>✓</b> Y	es 🗆 No
For P	aper	work Red	duction Act Notice, see the sepa	arate instructions.	Cat No 1	1282Y		Form <b>990</b> (2017)

Form	990 (2017)						Page <b>2</b>
Par	t IIII Statem	ent of Program Servic	e Accomplis	hments			
	Check if S	Schedule O contains a respo	nse or note to a	any line in this Part III .			. 🗹
1	Briefly describe t	the organization's mission					
		QUITY GROUP INC'S MISSIC UALITY AFFORDABLE HOUS:		GE LIVES FOR A BETTER	TOMORROW BY PROMOTING THE	DEVELOPMENT A	AND
2	Did the organiza	tion undertake any significa	nt program ser	vices during the year whi	ch were not listed on		
	the prior Form 9	90 or 990-EZ?				🗌 Yes 🔽	No
	If "Yes," describe	e these new services on Sch	edule O				
3	Did the organiza	tion cease conducting, or m	ake significant	changes in how it conduc	ts, any program		
		these changes on Schedul				☐Yes	<b>☑</b> No
4	Describe the org Section 501(c)(3	anızatıon's program service	accomplishmer	to report the amount of	rgest program services, as measi grants and allocations to others, t		5
4a	(Code	) (Expenses \$	6,773,148	including grants of \$	45,343 ) (Revenue \$	11,115,224 )	
	See Additional Data	a					
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	
		, (Expenses \$		including grants or \$	, (notende \$		
4d	Other program s (Expenses \$	services (Describe in Schedu incli	lle O) uding grants of	\$	) (Revenue \$	)	
4e	Total program	service expenses ▶	6,773,1	48			

Yes

Page 3

No

Nο

Νo

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Yes

Yes

Yes

Yes

16

17

18

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 Section 501(c)(3) organizations.

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 assessments, or similar amounts as defined in Revenue Procedure 98-19?

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

5 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 🛸 . . .

6 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian

8 for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . .

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 11a assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . . . 11b

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸 If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13

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

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15

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

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

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

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

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

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

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο complete Schedule G, Part III Form **990** (2017)

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Page 4

Part IV	Checklist of Required Schedules (continued)

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . .

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

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . . Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

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

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a 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

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

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

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

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

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

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

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

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

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

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

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

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

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

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

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

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

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

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

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

instructions for applicable filing thresholds, conditions, and exceptions)

Yes 20a

20b

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Yes

Yes

Form 990 (2017)

No

Yes Yes

Nο

Νo

Nο

No

Nο

Νo

Nο

Check of Schedule O Contains a response or note to any line in this Part V.  1s Enter the number reported in Box 3 of Form 1095 Enter-0- if not applicable  1	orm '	990 (2017)			Page <b>5</b>
Senser the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   14   15   15   15   15   15   15   15	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
1. Either the number reported in Dox 3 of form 1.996 Enter -0- if not applicable   1.		Check if Schedule O contains a response or note to any line in this Part V			
be Enter the number of Forms W-2G included in line 1a Enter-0-rd find applicable in the operation contribution badies and which does not have designed by the operation of the provided payments to vendors and reportable gaming of the provided payments to vendors and reportable gaming of the provided payments to vendors and reportable gaming of the provided payments of t				Yes	No
be the organization combined backs on withholding rules for reportable payments to vendors and reportable gamming (gambling) withings to prize withings to the summers?  2 Enter the number of employees recorsed on form W.3, Transmittal of Vigor and Tax Statements, field for the calded ry-see reding with or within the year covered by this return.  3 If a least one is reported on line 2a, did the organization of the 3rd required federal employment tax returns?  Note: 1 the sum of lines 1 and 2a is greater han 250, you may be required to enhigh cell emistrations.  3 Did the organization have unrelated business greater can 250, you may be required to enhigh cell emistrations.  3 Did the organization have unrelated business greater can 250, you may be required to enhigh cell emistrations.  3 Did the organization of the foreign country (such as a bank account, securities account, or other financial accounts or firegen country (such as a bank account, securities account, or other financial accounts of thing requirements for fincial from 114, Report of Foreign Bank and financial Accounts (FBAR)  5 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 Did any taxable party notify the donor of the value of the goods or services attement that such contributions or gifts were not tax deductible.  5 If Yes, 1 or in 5 and 50, did the organization risks were not tax deductible as chartable contributions and early for goods and services provided to the programation include with every solication an express ratement that such contributions or gifts were not tax deductible?  6 Did the organization ravial process of the value of the goods or services provided.  6 Did the organization in servi					
(agambing) winnings to prize winners?  2 Effect 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.  4 If I all least one is reported on line 2a, did the organization file all required federal employment tax returns?  Ab. If all least one is reported on line 2a, do the organization file all required federal employment tax returns?  3a Did he organization aver unrelated business gross income of 51,000 or more curing the year?  3a Did he organization aver unrelated business gross income of 51,000 or more curing the year?  3a Did he organization aver unrelated business gross income of 51,000 or more curing the year?  3a Did he organization is floring for for the year! "More for the 3p are required to efficie en instructions?"  4a A tax my time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  4b If Yes, "enter the name of the foreign country."  5c Interest the organization is party to a prohibited that is a shall be a financial accountry?  5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization file form 8886-17?  5c Did any taxable party notify the organization file form 8886-17?  5c Did she organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions shall are received eductible contributions under section 170(c).  7c July 1982, "I will be organization include with every solicitation an express statement that such contributions or girts were not tax declutible?  7b Under the organization network an experiment is excess of \$75 made party that as contribution and party for goods and services provided to the payor?  7d If I will be organization received a contribution of the value of the goods or services provided?  7c I will be organization received a contr					
Tax Setatements, field for the celendar year ending with or within the year covered by this return.  It is less on an is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines is a and 2a is greater than 230, you may be required to e-file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more uning the year?  3b If If Yes, ' files if deal form 990 CT for the year! 'We' to be 3b, grounder an explanation in Schedule 0 .  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  4b If Yes, ' enter the name of the foreign country.  5c If Yes, ' enter the name of the foreign country.  5c If Yes, ' enter the name of the foreign country.  5c If Yes, ' enter the name of the foreign country.  5c If Yes, ' to line 5a or 5b, did the organization hat it was or is a party to a prohibited tax she liter transaction?  5c If Yes, ' to line 5a or 5b, did the organization file Form 6886-17?  6c Do dany taxable party notify the organization hat it was or is a party to a prohibited tax she liter transaction?  5c If Yes, ' to line 5a or 5b, did the organization file Form 6886-17?  6c Do do she organization have annual gross receipts that are normally greater than \$100,000, and did the organization organization received where not tax diductible is a charactic contributions.  6c Did the organization received a symmetri in excess of \$75 made party to a prohibited tax she ter transaction?  7c Justiness of the payor?  7d Justiness of the organization notify the donor of the value of the goods or services provided?  7d Justiness of the organization notify the donor of the value of the goods or services provided?  7d Justiness of the organization received a contribution of qualified intellectual property for which it was recuired to file form 8890 as recuired?  7d Justiness of the organization received a contribution of organization have excess bu	С		1c	Yes	
If all least one is reported on line 2a, did the organization file all required forefrice (see instructions)  3a. Did the organization have unrelated business gross income of \$1.000 or more during the year?  3b. If "Yes," has it filed a Form 990-17 for this year?/?" "No" to line 3b, provide an explanation in Schedule 0.  3c. 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 accounts)?  4c. If "Yes," either the name of the foreign country.  5c. By If "Yes," either the name of the foreign country.  5c. By If "Yes," either the name of the foreign country.  5c. By If "Yes," either the name of the foreign country.  5c. By If "Yes," either the name of the foreign country.  5c. By If "Yes," do the San's 5b, did the organization that it was on is a party to a prohibited tax shelter transaction?  5c. By If "Yes," do the San's 5b, did the organization file Form 8886-17.  5c. By If "Yes," do the organization as annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charactible contributions?  5c. By If "Yes," do the organization shall were not tax deductible as charactible contributions.  5c. By If "Yes," do the organization that may receive deductible contributions under section 170(c).  5c. By If yes, "do the organization that may receive deductible contributions under section 170(c).  5d. If "Yes," do the organization organized in macross of \$73 made partly as a contribution and partly for goods and services provided to the payor?  5d. If "Yes," indicate the number of Forms \$222 filed during the year.  5d. If the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7d. If the organization during the year, pay premiums, directly or indirectly, to pay organized the organization file a Form 1992.		Tax Statements, filed for the calendar year ending with or within the year covered by			
Note: If the sum of lines 1a and 2a is greater than 250, you may be recurred to e-file (see instructions) 3a bill the organization have united business gross increme of \$1,000 or more during the ver? 3b If "Yes," has it filed a Form 990-T for this year?!!" "No" to line 3b, provide an explanation in Schedule 0 4a. At any time during the calendar year, did the organization have an interest in, or a agrination or other authority ower, a financial account in a foreign country. Such as a shesh account, secretives excord, or other financial accounts? 4a  If "Yes," enter the name of the foreign country. P. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b ID did any taxable party notify the organization file Form 8866-T?  5c If "Yes," to line 5a or 5b, did the organization file Form 8866-T?  5c In "Yes," to line 5a or 5b, did the organization file Form 8866-T?  5c In "Yes," and the organization include with every solicitation an express statement that such commodutions or gifts were not tax deductible as charactive contributions.  5c In "Yes," and the organization include with every solicitation an express statement that such commodutions or gifts were not tax deductible to payor.  5c In "Yes," and the organization include with every solicitation an express statement that such commodutions or gifts were not tax deductible to payor.  5c In the commodution of the payor of the organization file forms 822 filed during the year.  5c In the organization state may receive deductible contributions under section 170(c).  5c In the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c If If "Yes," indicate the number of Forms 8322 filed during the year.  6d If "Yes," indicate the number of Forms 8322 filed during the year.  6d If "Yes," indicate the number of Forms 8322 filed during the year.  6d If "Ye				Yes	
b If "res," has it filed a Form 990-T for this year? "Wo" to line 3b, provide an explanation in Schedule 0  4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account, in a foreign country (such as a bank account, securities account, or other financial accounts).  4a  b If "res," enter the name of the foreign country. ►  5a  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b Did any taxable party notify the organization file Form 8885-T?  5c  6a Does the organization have annual gross receives that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charable contributions.  5c  6a Does the organization have annual gross receives that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charable contributions.  6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization necesive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 Did the organization necesive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor.  7 Did the organization increase a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor.  7 Did the organization services any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization flower provided to the payor provided to the payor.  9 Did the organization with the payor provided to the payor pr	D				
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financial account; in a foreign country (such as a bank account, securities account, or other financial account;)?  4a  b If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5a  b Did any taxeble party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b  c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  5c  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions or gifts were not tax deductible as that tax deductions under section 170(c).  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7b  b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7c  7d  7d  1f Yes, "indicate the number of Forms 8282 filed during the year.  7d  1f Yes," indicate the number of Forms 8282 filed during the year.  7d  1f Yes, "indicate the number of Forms 8282 filed during the year.  7f  7g  1f the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e  7f  7g  1f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7g  8 Sponsoring organizations analitating donor advised funds.  Did a conor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year.  1 In a conor advised fund maintained by the sponsoring organization filing Form 990 in leu of Form 1041?  1 Da  1 Gross receipts,	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b D any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6a If "Yes," to the 5a or 5b, did the organization file Form 8886-T?  5c C  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  9 If "Yes," did the organization notify the donor of the value of the goods or services provided?  10 If "Yes," did the organization notify the donor of the value of the goods or services provided?  10 If "Yes," did the organization notify the donor of the value of the goods or services provided?  10 If the organization sell, exchange, or otherwise cispose of tangible personal property for which it was required to file form 8292?  11 If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  70 If the organization received any funds, directly or indirectly, on a personal benefit contract?  71 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-67  71 If the organization eleved a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-67  72 Sponsoring organization make a distribution of donor, donor advisor, or related person?  9a Did the sponsoring organization make any tax			4a		No
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Form 8282?  d If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7f  g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7f  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1998-C?  8 Did a donor advised fund maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  9a Did the sponsoring organization make any taxable distributions under section 4966?  9b Did the sponsoring organization make any taxable distributions under section 4966?  9b Did the sponsoring organization make any taxable distributions under section 4966?  9b Gestion 501(c)(17) organizations. Enter  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross income from members or shareholders  11a	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	d	If "Yes," indicate the number of Forms 8282 filed during the year			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7g  h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  7h  7h  8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?  8 Did the sponsoring organization make any taxable distributions under section 4966?  9a  9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b  9cetion 501(c)(7) organizations. Enter  a 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 a 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)  11a  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 11b  12a Section 501(c)(29) qualified nonprofit health insurance issuers.  13 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O  13a  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c  14a  Did the organization receive any payments for indoor tanning services during the tax year?  14a	f	Did the organization, during the year, nay premiums, directly or indirectly, on a personal henefit contract?			No
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Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	h		7h		No
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a Initiation fees and capital contributions included on Part VIII, line 12			- <u></u>		_
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a Gross income from members or shareholders					
a Gross income from members or shareholders					
against amounts due or received from them )					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule 0  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
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additional information the organization must report on Schedule O  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13				
which the organization is licensed to issue qualified health plans			13a		
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a	b				
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O   14b					No
Form 900	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			0 /20:=:

orm	990 (2017)			Page <b>6</b>
Pari	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to lı	
Se	Check if Schedule O contains a response or note to any line in this Part VI	• •		<b>✓</b>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	2.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	_
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b	Yes	
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►  OK			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available.			
	Own website  Another's website  Upon request  Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	▶JASON MAIN 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 (402) 334-8899			

SECRETARY (4) DENNIS BRAND

(8) JOHN WIECHMANN

PRESIDENT AND CEO

(9) JASON MAIN

(10) ANN BURGE

(12) TOM STRATMAN

VP OF ACQUISITIONS

(13) ANDREA FRYMIRE

(14) JEN OSCARSON

VP/BUS DEV OFFICER - SOU

VP/BUS DEV OFFICER - NW

(15) SCOTT FITZPATRICK

(16) PATRICK MICHAELIS

(17) SHANNON FOSTER

ACCOUNTING MANAGER

VP/BUS DEV OFFICER - NE

VP/BUS DEV OFFICER - CEN

CFO

COO

44,612

39,787

33,039

37.796

33,529

26,258

2.125

17,675

28,286

22.691

Form 990 (2017)

0

0

## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Part VII and Independent Contractors

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

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

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

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

compensated employees, and former such perso	ns				
Check this box if neither the organization no	or any related o	rganization compensated any c	current officer, dire	ector, or trustee	
(A)	(B)	(c)	(D)	(E)	(F
Name and Title	Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)	Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	Estima amount o compen from organizat

☐ Check this box if neither the organizatio	n nor any related o	rganization compensated any c	current officer, dire	ctor, or trustee
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	(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	(E) Reportable compensation from related organizations
	for related organizations below dotted	Former Highest employ Key em Officer Institution direct	(W- 2/1099- MISC)	(W- 2/1099- MISC)

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	(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	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	<u> </u>		Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) DAVID FISHER	1 00	×						0	0	0	
CHAIRMAN		_ ^_						0	0		
(2) CHRIS HENSLEY	20 00							24.000			

	any hours				ustee		organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) DAVID FISHER CHAIRMAN	1 00	x					0	0	0	
(2) CHRIS HENSLEY VICE CHAIRMAN	20 00	x					24,000	0	0	
(3) BARRY G SANDSTROM	1 00	x					0	0	0	

DIRECTOR							
(5) RICHARD A HOIEKVAM	1 00	l 🗸			0	0	0
FORMER DIRECTOR		_ ^			0	0	
(6) KIRK KELLNER	1 00	l 🗸			0	0	0
DIRECTOR		_ ^			9	3	
(7) FRANK HAYES	1 00	l 🗸			0	0	0
DIRECTOR		^			ĺ	Ü	

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540.234

318,818

304,067

337,228

234,827

194,774

27.175

132,859

202,657

131.055

40 00

40 00

40.00

40 00

40 00

40.00

40 00

40 00

40 00

40 00

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

Page 8

	Section A. Officers, Directors	, iiustees, K	CA LIII	PIOA		<u>, an</u>	<u>,u 1110</u>	<u>,,,es</u>	- Compensate	- Filibiosees (	CUIT	inaeu)	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than o	one b	οx, ι an of tor/t	ot che unles fficer truste	eck moss ss pers r and a tee)	son a	(D) Reportable compensation from the organization (W-		on d is	Estima amount o compen from	ated of other isation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated emptovies	Former	2/1099-MISC)	(W- 2/1099 MISC)	-	organızat relat organıza	ted
·····	CINDY KOSTER DR ACQUISITIONS MANAGER	40 00					×		115,03	2	0		19,120
(19) J	IAKE JACOBSEN TRUCTION MANAGER	40 00					х		114,26	.3	0		13,472
	ANWER SAMMY EHTISHAM STANT VP OF ACQUISITION	40 00					×		129,02	2	0		25,030
(21)	CHRIS IMMING ISITIONS MANAGER	40 00	ļ				×		127,74	.9	0		14,814
(22) J	ORDAN ABBOUD TY DIRECTOR OF SPECIAL	40 00			_		х		104,97	6		11,971	
					<u> </u>	<del>                                     </del>		<del>                                     </del>					
		-		<del>                                     </del>	$\vdash$	<del>  '</del>				+			
сТ	Sub-Total	VII, Section A	٠		<del>.</del>	•	<b>P</b>		3,038,736		0		370,205
2	Total number of individuals (including but of reportable compensation from the orga	t not limited to t						ceiv			<u>~I</u>		
												Yes	No
3	Did the organization list any <b>former</b> officine 1a? <i>If "Yes," complete Schedule J for</i>			key e		•	e, or h	nghe •	est compensated e	employee on	3		No
4	For any individual listed on line 1a, is the organization and related organizations grandividual									the	4	Yes	
5	Did any person listed on line 1a receive o services rendered to the organization? If "									ridual for	5		No
Se	ection B. Independent Contractors				—	—		—			_		
1	Complete this table for your five highest of from the organization. Report compensation	compensated in	depend ndar ye	lent c	ontr ding	acto wit	rs tha	t rec	ceived more than the organization	\$100,000 of com 's tax year	npen	isation	
		(A) business address			_				Descr	(B) iption of services	_	(C) Compen	
	Y O'CONNOR & ZALESKI CONGRESSIONAL BLVD SUITE 300									ND TAX SERVICES			,156,342
CARM	EL, IN 46032								DATA MANAC				257 752
28925	SOFTWARE LLC 5 FOUNTAIN PARKWAY N, OH 44139								DATA MANAG	iEMENT			357,752
KUTAI	K ROCK LLP								LEGAL SERVI	CES			188,381
OMAH	FARNAM STREET HA, NE 68102 TECHNOLOGY								INFORMATIO	N TECHNOLOGY			106,995
13616	5 CALIFORNIA STREET STE 300 IA, NE 68154												100,330
	7,												

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 ▶ 4

Part	90 (2017) VIIII Statement	t of Revenue							Page <b>9</b>
	Check if Scho	edule O contains	a respo	onse or note to any	(A) Total revent		(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
	1a Federated camp	paigns	1a				revenue		512-514
Grants Imounts	<b>b</b> Membership du	es	1b						
Gra mo	c Fundraising eve	ents	1c						
fš A	d Related organiz	ations	1d						
nija Bila	e Government grant	s (contributions)	1e						
Contributions, Gifts, Grants and Other Similar Amounts	f All other contribut and similar amour	ions, gifts, grants, nts not included							
inti her	above		1f						
를 를	g Noncash contrib in lines 1a-1f \$								
Cor	h Total.Add lines		<del>.</del> .	•					
	_			Business	Code	_			
F. 1	2a ACQUISITION/ADVI	SORY			531110	8,395,7	86 8,39	5,786	
å	<b>b</b> MONITORING FEES				531110	1,305,1		5,167	
٠ ج	c ORGANIZATION/OF				531110	519,4		7,418	
₹	d asset mgmt fees e miscellaneous in				531110	515,7 332,0		5,700 2,043	
Program Service Revenue			_			49,1		9,161	
Togi	f All other program			11,	117,275			•	•
	gTotal.Add lines 2				1			1	
	3 Investment incom similar amounts)	e (including divid		Interest, and other	,   :	178,875			178,875
	4 Income from inves				•				
	<b>5</b> Royalties	(ı) Rea		(II) Personal	<u> </u>				
	<b>6a</b> Gross rents	(1) Nec	''	(II) Tersorial	1				
	L. Logg, rontal avnon				4				
	<b>b</b> Less rental expens	ses							
	c Rental income or (loss)								
	d Net rental incom	ne or (loss)			-				
		(ı) Securi	ties	(II) Other					
	7a Gross amount from sales of			44,50	0				
	assets other than inventory			,					
	<b>b</b> Less cost or				-				
	other basis and sales expenses			46,55	╛				
	C Gain or (loss)	<u></u>		-2,05	1	2.054	2.054		
	d Net gain or (loss <b>8a</b> Gross income fro			<b>•</b>		-2,051	-2,051		
<u>a</u>	(not including \$	-	of						
Other Revenue	contributions rep See Part IV, line	orted on line 1c) 18	. a	}					
Re	<b>b</b> Less direct expe	nses	ь		1				
ier	<b>c</b> Net income or (lo	-	_	ents					
₽	<b>9a</b> Gross income fro See Part IV, line		ies						
			а						
	<b>b</b> Less direct expe		Ь						
	c Net income or (lo 10aGross sales of inv		activit	ies •	1				
	returns and allow			J					
	<b>h</b>	414	a		4				
	<b>b</b> Less cost of goo <b>c</b> Net income or (lo		b funyant		J				
		ous Revenue	illivelli	Business Code					
	11a				1				
	b								
	c								
	ما ما معام الم								
	d All other revenue e Total. Add lines			•					
	12 Total revenue.								
	rotar revenue.	See Thathactions	• •	· · · •	11,2	294,099	11,115,224		0 178,875

Circles of Schedule Q Contains a response or note to any line in the Part IX.	Form 990 (2017)				Page <b>10</b>
Do not include amounts reported on lines 6by, 7b, 8b, 9b, and 100 of Part VIII.  1. Grants and other assistance to domestic organizations and domestic governments. See Part IV. Ine 21  2. Grants and other assistance to domestic individuals. See Part IV. Ine 12  3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. Ine 15 and 15  3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. Ine 15 and 15  3. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV. Ine 15 and 15  3. Grants and other assistance to foreign organizations and incident and incid	Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must comp	lete column (A)	
Total expenses   Program larves   Prog	Check if Schedule O contains a response or note to any	line in this Part IX	<u> </u>		🗆
Gamast and other assistance to domestic individuals   See Part IV, line 22   Grants and other assistance to domestic individuals   See Part IV, line 23   Grants and other assistance to foreign organizations, foreign governments, and foreign individuals   See Part IV, line 15   Grants and other assistance to foreign organizations, foreign governments, and foreign individuals   See Part IV, line 15   Grants   See Part IV, line 16   Grants   See Part IV, line 17   Grants   Grants   See Part IV, line 17   Grants   Gr			Program service	Management and	<b>(D)</b> Fundraisingexpenses
17, line 22   3   3   3   4   4   4   5   5   4   4   5   5   4   5   5		45,343	45,343	-	
governments, and foreign individuals. See Part IV, line 15 and 15 and 15 and 16					
5. Compensation of current officers, directors, trustees, and key employees 6. Compensation not included above, to disqualified persons (as sefficied under exciton 4958(f)(1)) and persons described in section 4958(c)(3)(8) 7. Other salares and wages 8. Pension plan accruels and contributions (include section 491 (i.) and 493(b) employer contributions) 9. Other employee benefits 9. Other employee benefits 10. Payroll taxes 10. Payroll taxes 10. Payroll taxes 10. Accounting 11. Fees for services (non-employees) 12. Accounting 13. June 13. June 14. June 15. June 15. June 17 15. June 15. June 15. June 17 16. Personal fundraising services See Part IV, line 17 17. Investment management fees 19. Other employees 10. Advertising and promotion 10. June 15. Ju	governments, and foreign individuals See Part IV, line 15				
key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(13)) and persons described in section 4958(f)(3)(8) 7 Other salaries and wages 2,414,596 2,414,596 3,247,096 4,27,096 4,27,096 8, 247,096 9 Other employee benefits 295,517 10 Payroll taxes 11 Fees for services (non-employees) 2 Management 2 Management 3 Management 3 Management 3 Management 4 Management 5 Professional fundraising services See Part IV, line 17 1 Investment management fees 9 Other (file in Et gla expenses on Schedule O) 13 Advertising and promotion 13 Monuth, list line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 14 Advertising and promotion 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conference, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Payments to affiliates 12 Payments to affiliates 12 Payments to affiliates 12 Payments of line 25, cultum (A) amount, list line 124 expenses on Schedule O) 14 Monagement 14 Management 15 Management 16 Occupancy 15 Management 16 Management 17 Management 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 18 Payments of filiates 19 Conference, conventions, and meetings 14 Management 14 Management 14 Management 14 Management 15 Management 16 Management 17 Management 18 Payments to affiliates 19 Conference, conventions, and meetings 10 Management 14 Management 15 Management 16 Management 17 Management 18 Management 19	4 Benefits paid to or for members				
defined under section 4958(f)(13) and persons described in section 4958(c)(3)(8)		2,336,963	2,336,963		
8 Pension plan accruals and contributions (include section 401 (i.) and 493(b) employer contributions).  9 Other employee benefits	defined under section 4958(f)(1)) and persons described in				
(K) and 403(b) employer contributions) . 9 Other employee benefits	7 Other salaries and wages	2,414,596	2,414,596		
10 Payroll taxes		427,056	427,056		
11 Fees for services (non-employees) a Management b Legal	9 Other employee benefits	295,517	295,517		
a Management b Legal	<b>10</b> Payroll taxes	255,609	255,609		
b Legal	11 Fees for services (non-employees)				
13,100	a Management				
1   10   10   10   10   10   10   10	<b>b</b> Legal	37,998	37,998		
## Professional fundraising services See Part IV, line 17  ## Investment management fees	c Accounting	13,100		13,100	
f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  12 Advertising and promotion	d Lobbying	25,200	25,200		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  12 Advertising and promotion	· · ·				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  A devertising and promotion	f Investment management fees				
13 Office expenses	g Other (If line 11g amount exceeds 10% of line 25, column	648,962		648,962	
14 Information technology	12 Advertising and promotion	1,349	1,349		
15   Royalties	13 Office expenses	212,337	11,115	201,222	
15   Royalties	14 Information technology				
17 Travel					
17 Travel	16 Occupancy	536,775		536,775	
federal, state, or local public officials  19 Conferences, conventions, and meetings  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  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 0)  a BAD DEBT  439,504  439,504  439,504  b  c  d  e All other expenses. Add lines 1 through 24e  25 Total functional expenses. Add lines 1 through 24e  a lother expenses. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	· · · · ·	41,695	41,695		
19 Conferences, conventions, and meetings					
20 Interest	19 Conferences, conventions, and meetings	441,203	441,203		
22 Depreciation, depletion, and amortization	<b>F</b>				
22 Depreciation, depletion, and amortization	21 Payments to affiliates				
14,194  14,194  14,194  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 BAD DEBT  439,504  439,504  b  c  d  e All other expenses  Total functional expenses. Add lines 1 through 24e  25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	·	122,128		122,128	
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 BAD DEBT  439,504  439,504  b  c  d  e All other expenses. Add lines 1 through 24e  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	F	14,194		14,194	
b c d e All other expenses  Total functional expenses. Add lines 1 through 24e  3,309,529  6,773,148  1,536,381  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
c d e All other expenses  Total functional expenses. Add lines 1 through 24e  Solint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	a BAD DEBT	439,504	439,504		
d e All other expenses  25 Total functional expenses. Add lines 1 through 24e 8,309,529 6,773,148 1,536,381  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	b				
e All other expenses  25 Total functional expenses. Add lines 1 through 24e 8,309,529 6,773,148 1,536,381  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	С				
Total functional expenses. Add lines 1 through 24e 8,309,529 6,773,148 1,536,381  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	d				
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	e All other expenses				
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	25 Total functional expenses. Add lines 1 through 24e	8,309,529	6,773,148	1,536,381	0
	reported in column (B) joint costs from a combined				
	<u> </u>				

Assets or 30

Net

31

32

33

34

(B)

Page **11** 

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

Beginning of year End of year 801,479 1 799,836 Cash-non-interest-bearing . 16.406.795 13.514.295 2 Savings and temporary cash investments . . . 2 3 3 Pledges and grants receivable, net . . .

(A)

30

31

32

33

34

39,953,493

42.868.240

Form **990** (2017)

36,601,117

39.212.793

19,578,139 4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L . . . . . . . Loans and other receivables from other disqualified persons (as defined under

22,977,347 section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net . . 1.359.784 Inventories for sale or use . 8 429.463 9 Prepaid expenses and deferred charges .

4.531.536 442.242 10a Land, buildings, and equipment cost or other 10a 1,007,778 basis Complete Part VI of Schedule D 457.778 586 143 550,000 Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities . 11 Investments—other securities See Part IV, line 11 . 12 12 13 13 Investments—program-related See Part IV, line 11 .

14 14 Intangible assets . . . . . 50.990 15 15 52.984 Other assets See Part IV, line 11 . 39,212,793 16 Total assets.Add lines 1 through 15 (must equal line 34) . . . 16 42.868,240 17 Accounts payable and accrued expenses 1,807,036 17 2,133,147 18 18 Grants payable . . . 19 767,739 19 736,896 Deferred revenue . . . .

Tax-exempt bond liabilities . . . . . . 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities 22 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 . 22 23 23

Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties, 36.901 25 44.704 25 and other liabilities not included on lines 17-24)

Complete Part X of Schedule D 2,611,676 2,914,747

26 Total liabilities. Add lines 17 through 25 . . 26

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and complete lines 27 through 29, and lines 33 and 34. 27 36.601.117 27 Unrestricted net assets 28 28

Fund Balances 39,953,493 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958),

check here 

and complete lines 30 through 34.

Total net assets or fund balances

Total liabilities and net assets/fund balances .

Capital stock or trust principal, or current funds . . . .

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

Retained earnings, endowment, accumulated income, or other funds

			,
Par	XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII	 	✓
		Yes	No
1	Accounting method used to prepare the Form 990		

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2a

2b

2c

3a

3b

Yes

Yes

Nο

No

Form 990 (2017)

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

Consolidated basis

Consolidated basis

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

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both Separate basis

Audit Act and OMB Circular A-133?

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

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

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

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

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

### Additional Data

Software ID:

Software Version:

**EIN:** 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

Form 990 (2017)

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

MIDWEST HOUSING EOUITY GROUP, INC. (MHEG) PROVIDES ACQUISITION, ADVISORY AND ASSET MANAGEMENT SERVICES PRIMARILY BY ACTING AS THE GENERAL PARTNER OF APPROXIMATELY 45 LIMITED PARTNERSHIPS (THE "FUNDS") WHICH INVEST EQUITY CAPITAL IN OTHER PARTNERSHIPS OR LLCS FORMED TO DEVELOP, OWN AND OPERATE AFFORDABLE HOUSING PROJECTS WHICH ARE ELIGIBLE FOR FEDERAL TAX CREDITS UNDER SECTION 42 OF THE INTERNAL REVENUE CODE. IN ADDITION TO PROVIDING EQUITY FOR THESE PROJECTS. MHEG PROVIDES TECHNICAL AND ADVISORY SERVICES TO THE PARTNERSHIPS FOR A FEE IN 2017, MHEG PARTNERED. WITH 24 DEVELOPERS TO CLOSE \$130 MILLION IN EQUITY FOR 29 DEVELOPMENTS, CREATING 1,013 AFFORDABLE HOUSING UNITS AMONG THOSE NEW DEVELOPMENTS

WERE TWELVE AGE RESTRICTED HOUSING PROJECTS, 12 MULTIFAMILY DEVELOPMENTS, THREE SINGLE FAMILY HOME PROPERTIES, AND 2 SPECIAL NEEDS HOUSING DEVELOMENTS PROJECTS RANGED FROM A 10 UNIT RURAL DEAL TO A 92 UNIT AGE RESTRICTED DEAL AND REPRESENTED 26 MIDWEST COMMUNITIES FROM INCEPTION THROUGH THE END OF 2017, MHEG FUNDS HAVE INVESTED IN 509 TOTAL AFFORDABLE HOUSING DEVELOPMENTS WHICH COMPRISE OVER 15,000 UNITS LOCATED IN 229 CITIES IN THE MIDWEST REGION OF THE UNITED STATES

efil	e GR/	APHIC pri	<u>nt - DO N</u> O	T PROCESS	As Filed Data -			DLN: 9:	3493316036058
SC	H <b>ED</b> m 99	ULE A		Public (	Charity Staturganization is a sect	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017
Depar	lment of	f the Treasury	▶ Inf	ormation abou	► Attach to Form it Schedule A (Form www.irs.q			ections is at	Open to Public Inspection
Nam	e of th	nie service he organiza DUSING EQUITY						Employer identific	ation number
								47-0767984	
	rt I rganiz				<b>us</b> (All organization : it is  (For lines 1 thro			see instructions.	
1			•		sociation of churches	<b>5</b> ,	,	(Δ)(i).	
2		•		·	1)(A)(ii). (Attach Sch				
3					vice organization desc	•	• •		
_		·	•	•	-			•	- <b> </b>
4	Ш		esearch orga and state _	nization operati	ed in conjunction with	a nospital descri	bed in <b>section</b> .	170(B)(1)(A)(III). E	nter the nospital s
5		(b)(1)(A)	( <b>iv).</b> (Comple	ete Part II )	t of a college or unive				ped in <b>section 170</b>
6		A federal, s	tate, or local	government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	()(v).	
7		_		mally receives (vi). (Complete	a substantial part of it Part II )	s support from a	governmental u	init or from the genera	al public described in
8					170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a
10	<b>✓</b>	from activit	ies related to income and	its exempt fur unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ition organize	ed and operated	l exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported:	organizations of	dexclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a	e purposes of one or )(3). Check the box
а		<b>Type I.</b> A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by	
b		<b>Type II.</b> A manageme	supporting on t of the sup	rganization sup porting organiza	ervised or controlled i				
с		Type III f	unctionally		and C. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrate The organizatio	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	in connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon recei	ved a written determir	nation from the II		pe I, Type II, Type II	I functionally
f				ion-functionally Lorganizations	integrated supporting	organization			
g				-	ipported organization(	c)			
		Name of support organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organia (in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota		wante Dade	lian A-L NI-	ing go the T	structions for	Cat No 11285	<u> </u>	 Schedule A (Form 9	00 04 000 57) 3617

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

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

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

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

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

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

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

(or fiscal year beginning in) 🟲

49,929,118

49,929,118

49,929,118

971,035

971,035

50,900,153

(f) Total

0

0

(f) Total

Gifts, grants, contributions, and membership fees received (Do not 66,063 34,116 100,179 include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in 9,246,384 9,802,756 9,434,678 10,227,846 11,117,275 49,828,939 any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf

9,802,756

**(b)** 2014

9,802,756

227,992

227,992

10,030,748

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

**(b)** 2014

(a) 2013

9,246,384

(a) 2013

9,246,384

183,071

183,071

9,429,455

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

(c) 2015

9,500,741

(d) 2016

10,261,962

(e) 2017

11,117,275

Total. Add lines 1 through 5

received from other than c Add lines 7a and 7b from line 6)

Calendar year

amount on line 13 for the year Public support. (Subtract line 7c

3 received from disqualified persons Amounts included on lines 2 and 3 disqualified persons that exceed the greater of \$5,000 or 1% of the

7a Amounts included on lines 1, 2, and

The value of services or facilities furnished by a governmental unit to the organization without charge

Section B. Total Support

(or fiscal year beginning in) ▶

9 Amounts from line 6 10a Gross income from interest, dividends, payments received on

securities loans, rents, royalties and income from similar sources Unrelated business taxable income

(less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b С

Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on

Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )

12 Total support. (Add lines 9, 10c, 11, and 12)

check this box and stop here

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. 14 15

16

17

18

20

Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))

Public support percentage from 2016 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage

Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) Investment income percentage from 2016 Schedule A, Part III, line 17 19a 331/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

225,431

9,726,172

(c) 2015

9,500,741

225,431

(d) 2016

10,261,962

155,666

155,666

10,417,628

16

17

(e) 2017

11,117,275

178,875

178,875

11,296,150

98 090 %

98 250 % 1 910 %

		1		750	%
e	17	ıs not	-		
	Þ	<b>✓</b>			

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is ▶□

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

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

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the	·		
	determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			

				3.
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\rightarrow$	
	supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

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

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

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

organization's organizing document?

10a

answer line 10b below

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

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

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

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

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

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

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

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization			
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct  The organization satisfied the Activities Test. Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<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.</i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

**10** Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
<b>b</b> From 2013		
c From 2014		
<b>d</b> From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2017 distributable amount		
<ul> <li>Carryover from 2012 not applied (see instructions)</li> </ul>		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u>      \$                              </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

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

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

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

c Excess from 2015. . . . .

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

Schedule A (Form 990 or 990-EZ) 2017 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V. Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation SCHEDULE A. PART III. LINE 12 INCLUDED ON PAGE 9. PART VIII IN CURRENT YEAR OTHER REVENUE LINE 7C IS A LOSS ON DISPOSAL OF DEPRECIABLE ASSETS OF \$2,050 THE LOSS IS NOT BEING INCLUDED ON SCHEDULE A, PART III, LI NE 12 BECAUSE IT DOES NOT MEET THE DEFINITION OF SUPPORT AS DEFINED IN SECTION 509(D) OF T

HE INTERNAL REVENUE CODE

**SCHEDULE C** 

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

DLN: 93493316036058

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Inspection

f the	Section 527 organizations Complet e organization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 9 t have filed Form 5768 (election under s t have NOT filed Form 5768 (election ui n Form 990, Part IV, Line 5 (Proxy Ta s), then	<b>990-EZ, Part VI, I</b> II section 501(h)) Co nder section 501(h	ne <b>47 (Lobbying Activitio</b> Omplete Part II-A Do not o Omplete Part II-B Do	es), then complete Part II-B onot complete Part II-A
	me of the organization DWEST HOUSING EQUITY GROUP INC			Employer ide	entification number
	-			47-0767984	
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is	a section 527 organ	ization.
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political car	mpaign activities ir	n Part IV (see instructions	for definition of
2	Political campaign activity expend	litures (see instructions)		<b>•</b>	\$
3	Volunteer hours for political camp	paign activities (see instructions)			
Par	t I-B Complete if the orga	nization is exempt under section	on 501(c)(3).		
1	Enter the amount of any excise to	ax incurred by the organization under se	ection 4955	<b>•</b>	\$
2	Enter the amount of any excise to	ax incurred by organization managers u	inder section 4955	<b>&gt;</b>	\$
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	this year?		🗌 Yes 🔲 No
4a	Was a correction made?				☐ Yes ☐ No
Ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the orga	nization is exempt under sectio	on 501(c), exc	ept section 501(c)(3	).
1	Enter the amount directly expend	ed by the filing organization for section	527 exempt funct	tion activities	\$
2	Enter the amount of the filing org function activities	anization's funds contributed to other o	organizations for se	ection 527 exempt	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and o	n Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the am- that were promptly and directly deliver ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	e filing organization's fund political organization, such	s Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1					
2					
3					
1					
5					
5					
· F	Danamusuk Dadustian Ast Natura and	the instructions for Form 000 or 000-F7			<u></u>

513,275

26,637

128,319

26,637

519,262

33.360

129,816

33,360

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

540,667

20,200

135,167

20,200

565,476

25,200

141,369

25,200

Schedule C (Form 990 or 990-EZ) 2017

2,138,680

3,208,020

105,397

534,671

802,007

105,397

activity

Volunteers?

Part IV

PART II-A, LINE 1A

Return Reference

Supplemental Information

instructions), and Part II-B, line 1 Also, complete this part for any additional information

1

(b)

Amount

(a)

No

Yes

### Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? d Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 1 Were substantially all (90% or more) dues received nondeductible by members? 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year 2c c Total 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 5 Taxable amount of lobbying and political expenditures (see instructions)

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

AFFORDABLE HOUSING TAX CREDIT IN NEBRASKA

Explanation

LOBBYING EXPENDITURES WERE MADE IN ORDER TO INFLUENCE LEGISLATORS TO ENACT PROPERTY TAX

LEGISLATION TO PROTECT AFFORDABLE HOUSING DEVELOPMENTS AND TO ADVOCATE FOR AN

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

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

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

**Supplemental Financial Statements** 

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

DLN: 93493316036058 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

	me of the organization DWEST HOUSING EQUITY GROUP INC				Employer Id	entification number
					47-0767984	
Pa	ort I Organizations Maintaining Donor Advi	sed Funds or C	ther	Similar Funds o	or Accounts.	
	Complete if the organization answered "Ye			IV, line 6. sed funds	(b)Eund	s and other accounts
	Total number at and of year	(a) Done	JI auvi	sea runus	(B)Fund	s and other accounts
	Total number at end of year					
	Aggregate value of contributions to (during year)					
	Aggregate value of grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor advisorganization's property, subject to the organization's explicit to the organization inform all grantees, donors, and donors.	kclusive legal contr	ol?			🗌 Yes 🗌 No
	charitable purposes and not for the benefit of the donor private benefit?	r or donor advisor,	or for	any other purpose	conferring impei	rmissible 🔲 Yes 🔲 No
a	rt III Conservation Easements. Complete if the	ne organization a	answe	red "Yes" on Fori	m 990, Part IV	/, line 7.
	Purpose(s) of conservation easements held by the orga	nızatıon (check all	that a	pply)		
	$\square$ Preservation of land for public use (e g , recreatio	n or education)		Preservation of ar	historically imp	ortant land area
	Protection of natural habitat			Preservation of a	certified historic	structure
	Preservation of open space					
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conserva	tion co	ntribution in the fo		ation at the End of the Year
а	Total number of conservation easements				2a	at the Bita of the Tear
b	Total acreage restricted by conservation easements				2b	
С	Number of conservation easements on a certified histor	ıc structure ınclude	d ın (a	)	2c	
d	Number of conservation easements included in (c) acquistructure listed in the National Register	red after 8/17/06,	and n	ot on a historic	2d	
	Number of conservation easements modified, transferred tax year ▶	ed, released, exting	juished	l, or terminated by	the organization	n during the
	Number of states where property subject to conservation	on easement is loca	ated ►			
	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		rıng, ır	spection, handling	of violations,	☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring, inspect	cting, handling of v	riolatio	ns, and enforcing c	onservation eas	ements during the year
	Amount of expenses incurred in monitoring, inspecting,  ▶ \$	handling of violati	ons, a	nd enforcing conser	vation easemen	ts during the year
	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(ii)^2$	above satisfy the	requir	ements of section 1	.70(h)(4)(B)(ı)	☐ Yes ☐ No
	In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer	footnote to the or				and
a	<b>t III</b> Organizations Maintaining Collections Complete if the organization answered "Ye				ner Similar As	ssets.
а	If the organization elected, as permitted under SFAS 1: art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition,	educat	on, or research in	atement and bal furtherance of p	ance sheet works of ublic service,
b	If the organization elected, as permitted under SFAS 1: historical treasures, or other similar assets held for pub following amounts relating to these items					
(	(i) Revenue included on Form 990, Part VIII, line 1				▶ \$	
ľ	ii)Assets ıncluded ın Form 990, Part X				<u> </u>	
•	If the organization received or held works of art, historical following amounts required to be reported under SFAS				· · · · ·	ide the
а	Revenue included on Form 990, Part VIII, line 1	,	-		<b>▶</b> \$	
b	Assets included in Form 990, Part X				· ▶ \$	
	Paperwork Poduction Act Notice see the Instruction			C 1 N		odulo D (Form 990) 201

Par	t III	Organizations Maintaining Co	llections o	of Art, His	torical T	reası	ures, or	Other	Similar A	ssets (cor	ntınued)	
3		the organization's acquisition, accession (check all that apply)	on, and other	records, ch	eck any of	the fo	ollowing t	hat are a	significant	use of its c	ollection	
а		Public exhibition			d 🗌	Loan	or excha	inge prog	ırams			
b		Scholarly research			е 🗌	Othe	r					
С		Preservation for future generations										
4	Provid Part >	de a description of the organization's co	ollections and	explain ho	w they furt	her the	e organız	ation's ex	kempt purpo	ose in		
5		g the year, did the organization solicit s to be sold to raise funds rather than t							nılar	☐ Yes		No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization ans X, line 21.		" on Form	990, Part	IV, lı	ine 9, or	reporte	ed an amo	unt on For	m 990,	Part
1a		e organization an agent, trustee, custoc ded on Form 990, Part X?	lian or other	ıntermediar	y for contri	bution	s or othe	r assets	not	☐ Yes	□ r	No
ь	If "Ye	es," explain the arrangement in Part XII	II and comple	ete the follo	wing table		[			Amount		
С		ining balance	'		,			1c				_
d	_	ions during the year					Ì	1d				_
е		butions during the year					Ì	1e				_
f		g balance					Ì	1f				_
2a		ne organization include an amount on F	orm 990 Par	t X line 21	for escrov	v or ci	ıstodial a	ccount lia	ability?			_
b		s," explain the arrangement in Part XII	•						,	Yes	□ L	No
Pa	rt V	Endowment Funds. Complete										
		·	(a)Currer		<b>(b)</b> Prior yea				(d)Three ye		)Four yea	rs back
<b>1</b> a	Beginn	ing of year balance										
b	Contrib	outions										
C	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
e		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2	Provid	de the estimated percentage of the cur	rent year end	l balance (lı	ne 1g, colu	mn (a	)) held a:	5				_
а	Board	d designated or quasi-endowment <b>&gt;</b>										
ь	Perma	anent endowment 🕨										
С	Temp	orarily restricted endowment >										
_	The p	ercentages on lines 2a, 2b, and 2c sho	uld equal 100	)%								
3а		nere endowment funds not in the posse nization by	ssion of the	organizatior	n that are h	eld an	ıd admını	stered fo	r the		Yes	No
	(i) ur	nrelated organizations								3a(i	)	
b	. ,	elated organizations	ns listed as r	equired on	 Schedule R	. ?	• •			3a(i . 3b	-	
4	Descr	ribe in Part XIII the intended uses of th	e organizatio	n's endowm	ent funds							•
Pa	rt VI	Land, Buildings, and Equipme										
		Complete if the organization ans										
	Descri	ption of property (a) Cost or o (investre		(b) Cost or	other basis (	other)	(c) Acci	umulated o	lepreciation	(d)	Book valu	те
1a	Land											
b	Buildin	gs										
c	Leaseh	old improvements			19	90,769			56,070			134,699
d	Equipm	nent			3:	61,461			252,712			108,749
е	Other				4	55,548			148,996			306,552
Tat	- I Add	lines 12 through 10 (Column (d) must	agual Form O	00 D=++ V	column (P)	1	10(-) )					550.000

Part VII Investments—Other Securities. Complete if the of See Form 990, Part X, line 12.	organization ar	nswered "Yes" or	Form 990, Part IV, line 11b	),
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuation st or end-of-year market value	
(1) Financial derivatives          (2) Closely-held equity interests          (3)Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>•</b>			
Part VIII Investments—Program Related.  Complete if the organization answered 'Yes' on Fori	m 990, Part IV	, line 11c. See Fo	orm 990, Part X, line 13.	
(a) Description of investment	(b) Book val	ue	(c) Method of valuation	
(1)			,	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization answered 'Ye	• Farm 000	Down IV I was 11 d	Con Form 000 Part V line 15	
(a) Description	es 011101111 990,	rait IV, iiile IIu	(b) Book v	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)				
Part X Other Liabilities. Complete if the organization ans		Form 990, Part		
See Form 990, Part X, line 25.  1. (a) Description of liability  (1) Federal income taxes	(b)	) Book value		
INVESTMENT IN LIMITED PARTNERSHIPS (2)		44,704		
(3)				
(4)				
(5)				
(6)				
(7)			•	
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<u> </u> 	44,704		
2. Liability for uncertain tax positions. In Part XIII, provide the text of thorganization's liability for uncertain tax positions under FIN 48 (ASC 740)		organization's fina		_
organization's nability for uncertain tax positions under FIN 48 (ASC 740	, check here if t	TIG TEXT OF THE 100T	note has been provided in Part X.	· · · · · · ·

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Page 4

11,678,462

384,363

n

11,294,099

11,294,099

8,329,607

20,078

8,309,529

8.309.529

Schedule D (Form 990) 2017

4c

5

2e

3

4c

5

20,078

а Net unrealized gains (losses) on investments . . . . 2a 373.147 Donated services and use of facilities . . . . . . 2b b

2c c d 2d 11.216

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

2e e 3 3

4b

2a 2b

2c

2d

4a

4b

Explanation

Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a

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

4

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

b c

5 Part XII

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

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

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

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . . .

**Supplemental Information** 

Add lines 2a through 2d . . . .

Schedule D (Form 990) 2017

Part XI

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

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

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

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

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Page <b>5</b>		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

### **Additional Data**

Software Version:

Software ID:

EIN: 47-0767984 Name: MIDWEST HOUSING EQUITY GROUP INC

### Supplemental Information

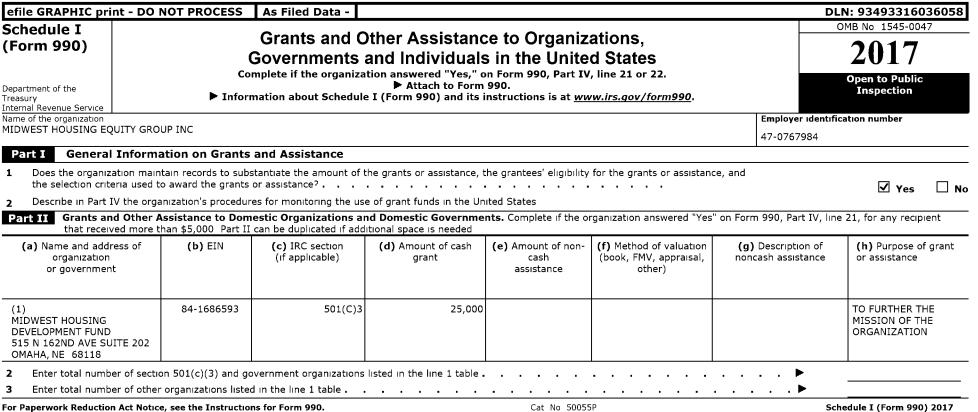
Return Reference	Explanation
PART X, LINE 2	THE CORPORATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL

N REVENUE AND INCOME HAS BEEN RECOGNIZED IN THE ACCOMPANYING FINANCIAL STATEMENTS GENERAL LY, THE FEDERAL AND STATE RETURNS ARE SUBJECT TO EXAMINATION FOR THREE YEARS AFTER THE LAT ER OF THE ORIGINAL OR EXTENDED DUE DATE OR THE DATE FILED WITH THE APPLICABLE TAX AUTHORIT IES

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	TAX LOSS IN PARTNERSHIP INVESTMENTS 7,803 LOSS ON SALE OF ASSETS 3,413

Supplemental Information		_
Return Reference	Explanation	
PART XII, LINE 2D - OTHER ADJUSTMENTS	GAAP/TAX DIFFERENCE IN DEPRECIATION EXPENSE 19,766 GAAP LOSS IN PARTNERSHIP INVESTMENTS 312	

\_ \_ \_



Page **2** 

Schedule I (Form 990) 2017

# (4) (5)

(6) (7)

Schedule I (Form 990) 2017

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

THE ORGANIZATION MAKES GRANTS TO OTHER 501(C)(3) ORGANIZATIONS THE AMOUNT OF GRANT FUNDING AVAILABLE VARIES BASED ON THE NET INCOME OF PART I, LINE 2 THE ORGANIZATION THE ORGANIZATION'S EXECUTIVE COMMITTEE IS RESPONSIBLE FOR SELECTING THE TAX EXEMPT ORGANIZATIONS THAT WILL RECEIVE GRANTS

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed Data -		DLN: 934	9331	.6036	058
Schedule J		Compensation I	Information	ОМ	3 No	1545-0	0047
(For	n 990)	For certain Officers, Directors, Trustee					
		Compensated E		line 23.	2()	17	7
Б	64 7	► Attach to Fo  Information about Schedule J (Forn	rm 990.			o Pul	
•	tment of the Treasurv al Revenue Service	www.irs.gov/fo				ection	
	ne of the organiza WEST HOUSING EQ			Employer identificati	on nu	ımber	
- MID	WEST HOOSING EQ	iii droof inc		47-0767984			
Pa	rt I Questi	ons Regarding Compensation					
						Yes	No
1a		piate box(es) if the organization provided any of the foection A, line 1a Complete Part III to provide any relev					
			ing allowance or residence for p				
	_	·	ents for business use of person				
		, , , , , , , , , , , , , , , , , , ,	h or social club dues or initiation mal services (e.g., maid, chauff				
	LI Discretion	ary spending account L Perso	mai services (e g , maid, chaum	eur, cner)			
b		ses in line 1a are checked, did the organization follow a Il of the expenses described above? If "No," complete F		ent or reimbursement	1b		
2	Did the organiza	tion require substantiation prior to reimbursing or allov es, officers, including the CEO/Executive Director, regai	wing expenses incurred by all	1 - 2	2		
	directors, truste	es, officers, including the CEO/Executive Director, regal	irding the items checked in line	lar			
3		of any, of the following the filing organization used to es		е			
		EO/Executive Director Check all that apply Do not che d organization to establish compensation of the CEO/Ex		Part III			
	✓ Compens						
			en employment contract pensation survey or study				
	·	_ :	oval by the board or compensati	ion committee			
4		did any person listed on Form 990, Part VII, Section A					
•	related organiza		a, inte 1a, with respect to the fin	ing organization or a			
а	Receive a sever	ance payment or change-of-control payment?			4a		No
b	Participate in, o	receive payment from, a supplemental nonqualified re	etirement plan?		4b		No
c	•	receive payment from, an equity-based compensation	<del>-</del>		4c		No
	If "Yes" to any o	f lines 4a-c, list the persons and provide the applicable	e amounts for each item in Part	III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) organizations must (	complete lines 5-9				
5		ed on Form 990, Part VII, Section A, line 1a, did the org	•				
	compensation c	ontingent on the revenues of					
а	The organization	۶		_	5a		No
b	Any related orga			-	5b		No
	-	5a or 5b, describe in Part III					
6		d on Form 990, Part VII, Section A, line 1a, did the orgontingent on the net earnings of	ganization pay or accrue any				
а	The organization	17		-	<b>6</b> a	Yes	
b	Any related orga			_	6b		No_
_	•	6a or 6b, describe in Part III					
7		ed on Form 990, Part VII, Section A, line 1a, did the org escribed in lines 5 and 6? If "Yes," describe in Part III	ganization provide any nonfixed		7		No
8		nts reported on Form 990, Part VII, paid or accured pur itial contract exception described in Regulations section		scribe			
				<u> </u>	8		No
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow the rebuttable presur	mption procedure described in F	Regulations section	9		
For F		ction Act Notice, see the Instructions for Form 99	20 Cat No. 50	0053T Schedule 1 (		000)	2017

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

ach individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII  Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual								
(A) Name and Title		( <b>B)</b> Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation PART I. LINE 6 ITHE BONUS POOL IS IN PLACE AND CALCULATED BASED ON THE NET INCOME OF THE COMPANY THE CALCULATION AND FINAL AMOUNT IS APPROVED BY THE INDEPENDENT BOARD OF DIRECTORS. THE BOARD ALSO HAS THE DISCRETION TO AWARD BONUSES TO TEAM MEMBERS REGARDLESS OF THE NET INCOME OF

THE COMPANY, SO LONG AS SUCH BONUS PAYMENTS ALIGN WITH COMPARABILITY DATA FOR SIMILARLY SITUATED ORGANIZATIONS

Schedule J (Form 990) 2017

### **Additional Data** Software ID: **Software Version:** EIN: 47-0767984 Name: MIDWEST HOUSING EQUITY GROUP INC Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (E) Total of columns (A) Name and Title (C) Retirement and (D) Nontaxable (F) Compensation in other deferred benefits (B)(i)-(D)column (B) (i) Base Compensation (iii) reported as deferred on compensation Other reportable Bonus & incentive prior Form 990 compensation compensation 1JOHN WIECHMANN 325,800 (ı) 214,434 29,700 14,912 584,846 PRESIDENT AND CEO 1JASON MAIN 204,295 114,523 29,700 10,087 358,605 CFO

29,700

29,700

26,529

21,605

14,551

22,748

15,195

15,224

3,339

8,096

7,000

4,653

3,124

5,538

7,496

9,806

337,106

375,024

268,356

221,032

150,534

230,943

153,746

154,052

2ANN BURGE

4TOM STRATMAN

VP OF ACQUISITIONS

**5**ANDREA FRYMIRE

VP/BUS DEV OFFICER -

**6**SCOTT FITZPATRICK

7PATRICK MICHAELIS

8SHANNON FOSTER

ASSISTANT VP OF ACQUISITION

VP/BUS DEV OFFICER -

ACCOUNTING MANAGER

9ANWER SAMMY EHTISHAM (1)

VP/BUS DEV OFFICER - NE

(1)

(1)

3BECKY CHRISTOFFERSEN

coo

CIO

SOU

CEN

197,362

216,989

164,532

141,571

117,959

140,307

107,838

106,652

106,705

120,239

70,295

53,203

14,900

62,350

23,217

22,370

efile GRAPH	IC print - DO NOT PROCES	S As Filed Data -		DLN:	93493316036058				
SCHEDUL	E O Suppleme	ental Informatio	on to Form 990 or 9	90-F <i>7</i>	OMB No 1545-0047				
(Form 990 or EZ) Department of the T	990- Complete to Form 9  ▶ Information a	provide information fo 90 or 990-EZ or to prov ▶ Attach to Forn bout Schedule O (Form	r responses to specific questivide any additional information 990 or 990-EZ.  990 or 990-EZ) and its instructory/form990.	ons on n.	2017 Open to Public Inspection				
Internal Revenue & Name of the org MIDWEST HOUSIN	Employer identif	fication number							
990 Schedule O, Supplemental Information									
Return Reference			Explanation						
FORM 990, PART VI, SECTION B, LINE 11B	ROCESS USED BY THE ORGANIZATION TO REVIEW THE 990 PRIOR TO FILING IS AS FOLLOWS A DRAFT O								

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, ALL TRANSACTIONS THAT COULD BE OF FINANCIAL BENEFIT TO THE ABOVE MENTIONED INDIVIDUALS GO
PART VI,
SECTION B,
LINE 12C

Return Explanation
Reference

THE CEO COMPLETES AN ANNUAL SELE-EVALUATION AND SUBMITS IT TO THE BOARD CHAIRMAN. THE BOAR

990 Schedule O, Supplemental Information

FORM 990.

PART VI,
SECTION B,
LINE 15

D CHAIRMAN THEN COMPLETES A SUPPLEMENTAL EVALUATION AND SENDS IT TO THE ENTIRE BOARD FOR R
EVIEW, COMMENT AND ADDITIONAL FEEDBACK THE COMPENSATION COMMITTEE THEN MEETS TO DISCUSS T
HE EVALUATION RESULTS AND FEEDBACK THE COMMITTEE'S RECOMMENDATIONS AND CONCLUSIONS ARE TH
EN PRESENTED TO THE ENTIRE BOARD THERE IS AN EVALUATION PROCESS FOR ALL EMPLOYEES AND THE

OVERALL INCREASE IN SALARIES AND BONUSES IS APPROVED BY THE INDEPENDENT BOARD MEMBERS.

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990,	MIDWEST HOUSING EQUITY GROUP DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST P
PART VI,	OLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
SECTION C,	
LINE 19	

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, QUESTION 2C	THE AUDIT PROCESS IS DIRECTED BY THE CHIEF FINANCIAL OFFICER ONCE THE AUDIT IS COMPLETE, THE AUDIT REPORT IS PRESENTED TO THE AUDIT COMMITTEE BY THE INDEPENDENT AUDITING FIRM ALL AUDIT COMMITTEE MEMBERS HAVE THE OPPORTUNITY TO HAVE ALL QUESTIONS ANSWERED WHEN THE AUD IT COMMITTEE IS SATISFIED WITH THE AUDIT REPORT, THE AUDIT COMMITTEE RECOMMENDS TO THE BOA RD OF DIRECTORS THAT THE AUDIT REPORT BE APPROVED THIS OVERSIGHT PROCESS IS COMPLETED PRI OR TO THE ANNUAL MEETING WHEN THE AUDIT IS UP FOR BID, THE AUDIT COMMITTEE RECOMMENDS TO THE BOARD WHETHER OR NOT THE EXISTING AUDITING FIRM SHOULD BE RETAINED OR REPLACED

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	316036	058
SCHEDULE R (Form 990)		Related O  Complete if the organi  Information about Se	zation an	swered "Yes	s" on Form Form 990.	n 990, Parl	IV, line 33	, 34, 35b,	36, or			OMB No 20 Open to	17	
Internal Revenue Service Name of the organization MIDWEST HOUSING EQUITY GROUP	INC									loyer identif	icatior		ection	
Part I Identification	of Disregarded F	intities Complete if the	ne organ	ization answ	ered "Vec	" on Form	000 Part	IV line 3		767984				
See Additional Data Table	(a) EIN (if applicable) of disr		ic organ	(b) Primary a		( Legal dom	c) nicile (state	(d)		<b>(e)</b> End-of-year as	sets	<b>(f</b> Direct co ent	ntrolling	
	npt organizations di	uring the tax year.	Comple	te if the org	1 .	answered	"Yes" on F		Part I\	/, line 34 be	cause	it had one or	more	
Name, address, an	(a) d EIN of related organizat	ion	Primi	ary activity	Legal dom	nicile (state n country)	Exempt Cod			harity status on 501(c)(3))	Dir	rect controlling entity	Section (13) cor enti Yes	512(b) trolled
For Paperwork Reduction Ac	t Notice, see the Inc	structions for Form 99	0.		Ca	at No 5013	 35Y				Scho	edule R (Form	990) 20	17

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

See Additional Data Table															
(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predomi Income(re unrelat excluded tax uni sections 514	nant elated, f ed, from der 512-	(f) Share of total income		( <b>H</b> Dispropi allocat	rtionate	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or aging	(k Percer owner	ntage
					314	,			Yes	No		Yes	No		
Part IV Identification of Related Organization because it had one or more related org	ions Taxable as a C anizations treated as	Corporation a corporation	or Trus n or tru	<b>st</b> Complet ist during t	e if the or the tax year	ganıza ar.	ition ans	wered "Yes	" on Fo	orm 9	90, Part IV	line	34		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	don (state o	c) gal nicile r foreign	Direc	(d) et controlling entity	(C corp	e) of entity o, S corp, crust)	(f) Share of total Income		(g) of end- year ssets	of- Perce owne	ntage rship	Se (1	(ı) ection 5 3) cont entit	
/1-MIDWEST HOUSING ASSISTANCE CORD	DENTAL DEAL ESTATE		ntry)			c			-		100.00	0.0/	一厂	Yes	No
(1)MIDWEST HOUSING ASSISTANCE CORP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0773664	RENTAL REAL ESTATE	N	E			C					100 00	IU %			No

Schedule R (Form 990) 2017

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?  a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.  b Gift, grant, or capital contribution to related organization(s).  c Gift, grant, or capital contribution to related organization(s).  c Gift, grant, or capital contribution from related organization(s).  d Loans or loan guarantees to or for related organization(s).  d Loans or loan guarantees by related organization(s).  f Dividends from related organization(s).  f Dividends from related organization(s).  g Sale of assets to related organization(s).  f Dividends from related organization(s).  g Sale of assets to related organization(s).  iii No  g Sale of assets to related organization(s).  iii No  g Sale of assets with related organization(s).  iii No  g Lease of facilities, equipment, or other assets to related organization(s).  iii No  k Lease of facilities, equipment, or other assets from related organization(s).  iii No  n Sharing of facilities, equipment, or other assets from related organization(s).  iii No  n Sharing of facilities, equipment, and the related organization(s).  iii No  n Sharing of paid employees with related organization(s).  iii No  n Sharing of paid employees with related organization(s).  iii No  n Sharing of paid employees with related organization(s) for expenses.  iii No  n Sharing of paid tengent and to related organization(s) for expenses.  iii No  n Sharing of paid tengent and to related organization(s) for expenses.  iii No  n Sharing of paid employees with related organization(s) for expenses.  iii No  n Sharing of paid tengent and to related organization(s) for expenses.  iii No  n Sharing of paid employees with related organization(s) for expenses.  iii No  n Sharing of paid employees with related organization(s) for expenses.  iii No  n Sharing of paid employees with related organization(s) for expenses.  iii No  n Sharing of	Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
a Receipt of (i) interest, (ii) interest, (iii) royalities, or (iv) rent from a controlled entity.  b Gift, grant, or capital contribution to related organization(s)  c Gift, grant, or capital contribution from related organization(s)  d Loans or loan guarantees to or for related organization(s)  e Loans or loan guarantees by related organization(s)  f Dividends from related organization(s)  f Dividends from related organization(s)  g Sale of assets to related organization(s)  h Purchase of assets to related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets from related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  ii No  l Performance of services or membership or fundraising solicitations for related organization(s)  n Sharing of facilities, equipment, and individual solicitations by related organization(s)  n Sharing of facilities, equipment, aniling lists, or other assets with related organization(s)  n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  n Sharing of paid employees with related organization(s)  n Remibursement paid to related organization(s) for expenses  q Remibursement paid to related organization(s) for expenses  r Other transfer of cash or property to related organization(s)  11 Ves  12 Ves  13 No	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
b Gift, grant, or capital contribution to related organization(s)	1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
Count of Gift, grant, or capital contribution from related organization(s)  do Loans or loan guarantees to or for related organization(s)  e Loans or loan guarantees by related organization(s)  f Dividends from related organization(s)  g Sale of assets to related organization(s)  h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets to related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  preformance of services or membership or fundraising solicitations for related organization(s)  m Performance of services or membership or fundraising solicitations by related organization(s)  n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  p Reimbursement paid to related organization(s) for expenses  p Reimbursement paid to related organization(s) for expenses  10 No  11 No  12 No  13 No  14 No  15 No  16 No  17 No  18 No  19 No  19 No  10 No  10 No  11 No  11 No  12 No  13 No  14 No  15 No  16 No  17 No  18 No  18 No  19 No	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees to or for related organization(s)  f Dividends from related organization(s)  g Sale of assets to related organization(s)  h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets to related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  l Performance of services or membership or fundraising solicitations for related organization(s)  m Performance of services or membership or fundraising solicitations by related organization(s)  n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  n Sharing of paid employees with related organization(s)  n Reimbursement paid to related organization(s) for expenses  q Reimbursement paid to related organization(s) for expenses  r Other transfer of cash or property to related organization(s)  1	<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No
E Loans or loan guarantees by related organization(s)  f Dividends from related organization(s)  g Sale of assets to related organization(s)  h Purchase of assets from related organization(s)  i Exchange of assets with related organization(s)  j Lease of facilities, equipment, or other assets to related organization(s)  k Lease of facilities, equipment, or other assets from related organization(s)  i Performance of services or membership or fundraising solicitations for related organization(s)  in Performance of services or membership or fundraising solicitations by related organization(s)  n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)  n Sharing of paid employees with related organization(s)  p Reimbursement paid to related organization(s) for expenses  i p No  q Reimbursement paid to related organization(s) for expenses  r Other transfer of cash or property to related organization(s)  ir No	c Gift, grant, or capital contribution from related organization(s)	. 1c		No
f Dividends from related organization(s)	d Loans or loan guarantees to or for related organization(s)	1d	Yes	
g Sale of assets to related organization(s)	e Loans or loan guarantees by related organization(s)	1e		No
h Purchase of assets from related organization(s)	f Dividends from related organization(s)	1f		No
i Exchange of assets with related organization(s)	g Sale of assets to related organization(s)	1g		No
j Lease of facilities, equipment, or other assets to related organization(s)	h Purchase of assets from related organization(s)	1h		No
k Lease of facilities, equipment, or other assets from related organization(s)	i Exchange of assets with related organization(s)	<b>1</b> i		No
I Performance of services or membership or fundraising solicitations for related organization(s)	j Lease of facilities, equipment, or other assets to related organization(s)	1 <u>j</u>		No
m Performance of services or membership or fundraising solicitations by related organization(s)	k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
o Sharing of paid employees with related organization(s)	m Performance of services or membership or fundraising solicitations by related organization(s)	1m	ı e	No
p Reimbursement paid to related organization(s) for expenses	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
q Reimbursement paid by related organization(s) for expenses	o Sharing of paid employees with related organization(s)	10		No
r Other transfer of cash or property to related organization(s)	p Reimbursement paid to related organization(s) for expenses	1p		No
<del>                                     </del>	<b>q</b> Reimbursement paid by related organization(s) for expenses	<b>1</b> q	Yes	
s Other transfer of cash or property from related organization(s)	r Other transfer of cash or property to related organization(s)	1r		No
	s Other transfer of cash or property from related organization(s)	1s		No

<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)				1m  No
f n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n No
o Sharing of paid employees with related organization(s)				1o No
p Reimbursement paid to related organization(s) for expenses				1p No
<b>q</b> Reimbursement paid by related organization(s) for expenses				1q Yes
f r Other transfer of cash or property to related organization(s)				1r No
s Other transfer of cash or property from related organization(s)				1s No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	, including covered r	elationships and trai	nsaction thresholds	
See Additional Data Table				
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	( <b>d)</b> Method of determining an	nount involved

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

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

- See management of garileactors see and accords regarding exclusion		, countries p	a. c., c., 5,, p.s										
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

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

### **Additional Data**

MHEG 2011 FUND MANAGER LLC

MHEG 2012 FUND MANAGER LLC

MHEG 2013 FUND MANAGER LLC

MHEG 2014 FUND MANAGER LLC

MHEG 2015 FUND MANAGER LLC

MHEG 2016 FUND MANAGER LLC

MHEG 2017 FUND MANAGER LLC

515 N 162ND AVE SUITE 202

OMAHA, NE 68118 61-1641223

OMAHA, NE 68118 35-2439507

OMAHA, NE 68118 37-1714217

OMAHA, NE 68118 46-4553222

**OMAHA. NE 68118** 47-2822086

OMAHA, NE 68118 38-3993214

**OMAHA, NE 68118** 30-0966078

## Software ID: Software Version:

**EIN:** 47-0767984

(b)

Primary Activity

RENTAL REAL ESTATE

(c)

Legal Domicile

(State

or Foreign Country)

NE

NE

NE

NE

NE

NE

NE

(e)

End-of-year

assets

(f)

Direct Controllina

Entity

-3,937 MIDWEST HOUSING EQUITY

-1,814 MIDWEST HOUSING EQUITY

-4.105 MIDWEST HOUSING EQUITY

-3,734 MIDWEST HOUSING EQUITY

-2,475 MIDWEST HOUSING EQUITY

-919 MIDWEST HOUSING EQUITY

0 MIDWEST HOUSING EQUITY

GROUP

GROUP

GROUP

GROUP

GROUP

GROUP

GROUP

(d)

Total income

-592

-246

-800

-1,277

-1,627

-925

O

_	 	 	 				
						C	


	Name:	MIDWEST	HOUSING EQUI	IY GROUP INC	
m 000 Schedule P. Part I - Identification of Disrec	arded Er	stitios			

(a)

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

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

Form 990, Schedule R, Part	III - Identification		ated Organiza	ations Taxable	as a Partner	ship						
(a) Name, address, and EIN of related organization	<b>(b)</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)	(h) Disproprtionate allocations?  Yes No		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r iging ner?	(k) Percentage ownership
10TH STREET APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A				163	140		163	NO	
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-3369758												
10TH STREET TOWNHOMES LLLP	RENTAL REAL ESTATE	IA	N/A									
2401 BROADWAY AVENUE SUITE 4												
SLAYTON, MN 56172 46-1503289												
125 9TH STREET LLLP	RENTAL REAL ESTATE	IA	N/A									
14 WEST 21ST STREET-PO BOX 473 SPENCER, IA 51301 27-2092627												
2401 FARNAM LLC	RENTAL REAL ESTATE	NE	N/A									
1524 CUMING STREET OMAHA, NE 68102 90-0821620												
2723 Q STREET LLC	RENTAL REAL ESTATE	NE	N/A									
2723 Q ST OMAHA, NE 68107 36-3363994												
3101 S 24TH ST LLC	RENTAL REAL ESTATE	NE	N/A									
505 WALKER ST WOODBINE, IA 51579 45-2574167												
3612 CUMING LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
5550 PRAIRIE STONE PARKWAY HOFFMAN ESTATES, IL 60192 32-0479905												
405 WEST BROADWAY LLC	RENTAL REAL ESTATE	NE	N/A									_
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 39-2011010												
4318 FORT STREET HTC LLC	RENTAL REAL ESTATE	NE	N/A									
2101 SOUTH 42ND STREET OMAHA, NE 68105 47-2446790												
5217 SOUTH 28TH STREET LLC	RENTAL REAL ESTATE	NE	N/A									
2723 Q STREET OMAHA, NE 68107 20-3145069												
710 SOUTH 20TH STREET LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0837624												
7400 MILITARY AVENUE LLC	RENTAL REAL ESTATE	NE	N/A									
1323 WILLIAM STREET OMAHA, NE 68108 47-3952218												
821 JACKSON LLLP	RENTAL REAL ESTATE	IA	N/A									
520 NEBRASKA ST SUITE 233 SIOUX CITY, IA 51101 26-3580347												
A & P II LLC	RENTAL REAL ESTATE	NE	N/A									
PO BOX 1987 HUTCHINSON, KS 67504 46-2405514												
ADEL ASSISTED LIVING LP	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 20-0326338												

Form 990, Schedule R, Part	III - Identification	1	ated Organiza	tions Taxable	as a Partner	ship			I	/:	<b>、</b> 1	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gend O Mana Partr	eral r Iging ner?	<b>(k)</b> Percentage ownership
AMO HOUSING I LP	RENTAL REAL ESTATE	KS	N/A				res	NO		res	NO	
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 48-1251559 ANISTON VILLAGE LP	RENTAL REAL ESTATE		N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 42-1508090												
APPLE RIDGE SENIORS II LLC 3390 CRESTBROOK LANE SALT LAKE CITY, UT 84109 30-0830615	RENTAL REAL ESTATE	ОК	N/A									
APPLE RIDGE SENIORS LP 3785 ASH CIRCLE	RENTAL REAL ESTATE	ок	N/A									
SALT LAKE CITY, UT 84109 35-2479635												
APPLE RIVER CROWN LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118	RENTAL REAL ESTATE	NE 	N/A									
20-2523225 ARDMORE AFFORDABLE HOUSING LP	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-0287120												
ARK RIVER NORTH LLC	RENTAL REAL ESTATE	KS	N/A									_
1313 STONE GREAT BEND, KS 67530 46-3364474												
ARKOMA HOUSING ASSOCIATES	RENTAL REAL ESTATE	ок	N/A									_
111 N MAIN ST CLARKTON, MO 63837 47-5632082												
AUTUMN CREEK VILLAS PHASE II LP	RENTAL REAL ESTATE	ОК	N/A									
1401 SOUTH MAIN ST STILLWATER, OK 74074 47-4016324												
AUTUMN CREEK VILLAS LP	RENTAL REAL ESTATE	ок	N/A									
1401 S MAIN ST STILLWATER, OK 74074 45-2066377												
BAKER CREEK SENIOR LIVING I LLLP	RENTAL REAL ESTATE	IA	N/A									
4224 HUBBELL AVENUE DES MOINES, IA 50317 27-5317473												
BEACON APARTMENTS LIMITED PARTNERSHIP	RENTAL REAL ESTATE	SD	N/A									
4100 S WESTERN AVE SIOUX FALLS, SD 57105 47-1232136												
BEDFORD PLACE LLC	RENTAL REAL ESTATE	KS	N/A									_
1313 STONE ST GREAT BEND, KS 67530 45-5629819												
BERRY COURT LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5823686												
BF III LP	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3164260												

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

(c) (e) (f) (g) (h) (ii) (General Control of

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal Domicile (State or Foreign	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under	(f) Share of total Income	(g) Share of end- of-year assets	(h Dispropi allocat	rtionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r iging	<b>(k)</b> Percentage ownership
		Country)		sections 512-514)			Yes	No		Yes	No	
BLUE TERRACE CROWN LTD	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 75-3045097												
	RENTAL REAL ESTATE	KS	N/A									
2145 NORTH TOPEKA WICHITA, KS 67214 47-4402374												
BOONE 2 LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A									_
1909 SYCAMORE AVE PO BOX 456 GRANGER, IA 50109 20-4882105												
BOONE COUNTY SPECIAL NEEDS AFFORDABLE HOUSING LP	RENTAL REAL ESTATE	МО	N/A									
1209 E WALNUT COLUMBIA, MO 65201 81-0902772												
BRAD BLACK RIVER HOUSING LP	RENTAL REAL ESTATE	AR	N/A									
1403 HOSPITAL DRIVE POCAHONTAS, AR 72455 47-2661208												
BRIARWOOD ESTATES AT JONESBORO LP	RENTAL REAL ESTATE	AR	N/A									
109 E MADISON AVE BASTROP, LA 71220 47-3232045												
	RENTAL REAL ESTATE	IA	N/A									
2024 FOREST AVENUE DES MOINES, IA 50311 81-0732496												
BROADWAY POINTE APARTMENTS	RENTAL REAL ESTATE	ок	N/A									
2813 NW 122ND OKLAHOMA CITY, OK 73120 20-1055550												
BROOKDALE PARTNERS LP	RENTAL REAL ESTATE	МО	N/A									
1021 NORTH SEVENTH STREET KANSAS CITY, KS 66101 46-5189214												
BROWN APARTMENTS LP	RENTAL REAL ESTATE	IA	N/A									
5400 KIRKWOOD BOULEVARD SW CEDAR RAPIDS, IA 52404 26-1195327												
BSSR LP	RENTAL REAL ESTATE	KS	N/A									
1712 E 123RD ST OLATHE, KS 66061 46-3512338												
BUCHANAN'S CROSSING SUBDIVISION KANSAS CITY LP	RENTAL REAL ESTATE	KS	N/A									
1301 QUINDARO BLVD KANSAS CITY, KS 66104 80-0889149												
CALLYN HEIGHTS APARTMENTS LP	RENTAL REAL ESTATE	МО	N/A									
900 E LAHARPE KIRKSVILLE, MO 63501 36-4752772												
CANTERBURY IV LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A									
319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766417												
CARDINAL ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0762767												

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	<b>(f)</b> Share of total income	(g) Share of end- of-year assets	(h Dispropr allocat	tionate	<b>(i)</b> Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Parti	eral r ging ner?	(k) Percentage ownership
CASTLE ON THE HILL LLC	RENTAL REAL ESTATE	NE	N/A					.,5		. 03		
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 39-2034832												
CEDAR PARK PRESERVATION ALP	RENTAL REAL ESTATE	IA	N/A									
2930 BELL AVENUE DES MOINES, IA 50321 20-0401516												
CENTERVIEW PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-4807530												
CENTRAL VILLAS LP	RENTAL REAL ESTATE	SD	N/A									
310 S ROOSEVELT ABERDEEN, SD 57401 81-1822246												
CHAMBROOKE HOMES OF ARDMORE LLC	RENTAL REAL ESTATE	OK	N/A									
600 S WASHINGTON STREET ARDMORE, OK 73401 46-1514242												
CHAMBROOKE HOMES OF DURANT LLC	RENTAL REAL ESTATE	ОК	N/A									
600 S WASHINGTON ST ARDMORE, OK 73401 46-4192383												
CHAPEL RIDGE WEST I LP	RENTAL REAL ESTATE	IA	N/A									
319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766414												
CHAPEL RIDGE WEST II LP	RENTAL REAL ESTATE	IA	N/A									
319 7TH STREET SUITE 500 DES MOINES, IA 50309 26-3465397												
CHARMED-PERKINS AFFORDABLE HOUSING PARTNERS II LLC	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3797392												
	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5096477												
CHECOTAH VILLAGE APTS LIMITED PTRN	RENTAL REAL ESTATE	ОК	N/A									
2537 NORTH HIGHWAY 81 DUNCAN, OK 73533 20-2557635												
CHERRY CREEK TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-4694250												
CHESTNUT PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
2107 INDUSTRIAL DR MCPHERSON, KS 67460 47-5558346												
CHEYENNE RIDGE LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3278617												
CHI MILFORD LLLP	RENTAL REAL ESTATE	IA	N/A									
14 WEST 21ST ST SPENCER, IA 51301 32-0394563												

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropr allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gene oi Mana Partr	eral r ging ner?	(k) Percentage ownership
CHICKASHA SENIOR LIMITED PARTNERSHIP	RENTAL REAL ESTATE	ОК	N/A					.110			.10	
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-2370359												
CHLOE PLACE APARTMENTS LP	RENTAL REAL ESTATE	МО	N/A									
900 E LAHARPE KIRKSVILLE, MO 63501 47-2660591												
CIRRUS HOUSE APARTMENTS LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 46-0479865												
CIRRUS SOUTH BEND LP	RENTAL REAL ESTATE	NE	N/A									·
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-2931187												
CITY IMPACT HOMES LLC	RENTAL REAL ESTATE	NE	N/A									
8551 LEXINGTON AVENUE LINCOLN, NE 68505 45-4798601												
CLARY VILLAGE LLC	RENTAL REAL ESTATE	NE	N/A									
402 NORRIS AVE SUITE 301 MCCOOK, NE 69001 47-1704675												
CLASS HOMES I LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3583386												
COFFEYVILLE GARDEN APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
2145 NORTH TOPEKA WICHITA, KS 67214 39-2073831												
COLUMBIA HEIGHTS LP	RENTAL REAL ESTATE	AR	N/A									_
1501 N UNIVERSITY SUITE 740 LITTLE ROCK, AR 72207 47-3104415												
COMMERCE GARDENS APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
7701 E KELLOGG DR SUITE 895 WICHITA, KS 67207 46-5657928												
COMMUNITY HOMES LP	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 20-5859839												
CORNERSTONE APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3408436												
CORRIDOR WOODS LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A									
1700 S FIRST AVE STE 25B IOWA CITY, IA 522404501 27-5170816												
COTTAGE PARK LP 1	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5129779												
COTTAGE PARK LP	RENTAL REAL ESTATE	NE	N/A									
1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-2807222												

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total	(g) Share of end- of-year assets	(h Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r Iging ner?	<b>(k)</b> Percentage ownership
COTTAGE PARK LP 2	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 23-1339001												
COUNTRY CLOVER CROWN LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2168070												
COURTHOUSE VILLA LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1179264												
COVENTRY COURT TOWNHOMES II LLC	RENTAL REAL ESTATE	KS	N/A									
501 EAST NORTHVIEW ROAD PO												
BOX 843 MCPHERSON, KS 67460 26-2867341												
COVENTRY COURT TOWNHOMES	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 01-0714018												
COWETA SENIOR VILLAS LP	RENTAL REAL ESTATE	ок	N/A									
205 W WALNUT SUITE 200 SPRINGFIELD, MO 65806 81-2744496												
CREEKSIDE PARTNERS LLC	RENTAL REAL ESTATE	KS	N/A									
7500 COLLEGE BLVD STE 500 OVERLAND PARK, KS 66210 20-8119009												
CREEKSIDE PLACE	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5913377												
CRESTVIEW TERRACE LLLP	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 26-1232468												
CROWN HOMES OF HUTCHINSON LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-2780457												
CROWN HOMES OF PARSONS LLC	RENTAL REAL ESTATE	KS	N/A								T	
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1619531												
CROWN VII LP	RENTAL REAL ESTATE	NE	N/A									<del></del>
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 80-0280008												
CURTIS CENTER HOUSING LP	RENTAL REAL ESTATE	NE	N/A									_
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5708223												
CYPRESS POINTE II LLC	RENTAL REAL ESTATE	NE	N/A									
8551 LEXINGTON AVENUE LINCOLN, NE 68505 46-2523983												
CYPRESS POINTE LLC	RENTAL REAL ESTATE	NE	N/A								T	
3801 VERMASS PLACE LINCOLN, NE 68502 45-4794848												

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropri allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gene or Mana Partr	eral · ging ner?	<b>(k)</b> Percentage ownership
DAWSON ESTATES LP	RENTAL REAL ESTATE	NE	N/A							1.55		
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3560185												
DEER RIDGE VI LP	RENTAL REAL ESTATE	IA	N/A									
319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766416												
DELAWARE HIGHLANDS ASSISTED LIVING LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 42-1619270												
DES MOINES GREYSTONE HOMES LP	RENTAL REAL ESTATE	IA	N/A									
1312 LOCUST ST 300A DES MOINES, IA 50309 27-5091568												
DH HOUSING LIMITED PARTNERSHIP	RENTAL REAL ESTATE	ОК	N/A									
1502 NORTH 1ST STREET DURANT, OK 74701 45-5561692												
DIXIE GARDENS LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1061371												
DUNBAR HOMES OF ATOKA LLC	RENTAL REAL ESTATE	ок	N/A									
721 HIGHWAY 70 E PO BOX 1766 KINGSTON, OK 73439 47-5655548												
DUNCAN AFFORDABLE HOUSING LLC	RENTAL REAL ESTATE	ок	N/A									
600 S WASHINGTON STREET ARDMORE, OK 73401 35-2446741												
DUNLAP ASSISTED LIVING LLC	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738210												
EASTSIDE ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
2604 26TH AVE CENTRAL CITY, NE 68826 32-0493800												
EASTSIDE TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									·
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 48-1225181												
EASTWOOD APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
1313 STONE GREAT BEND, KS 67530 47-4429710												
ECHO RIDGE LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-3254493												
EMERALD VILLAGE AT HOPE LP	RENTAL REAL ESTATE	AR	N/A									
109 E MADISON AVE BASTROP, LA 71220 46-4638588												
EMERSON ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
301 S BURLINGTON AVE PO BOX 1005 HASTINGS, NE 68902												
47-1704549												

Form 990, Schedule R, Part	III - Identificatio	n of Re	lated Organiz	ations Taxable	e as a Partne	rship						
(a) Name, address, and EIN of related organization	<b>(b)</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)	(-)	(h Dispropr allocat	tionate ions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Part	eral r iging ner?	(k) Percentage ownership
	RENTAL REAL ESTATE	KS	N/A	,			Yes	No		Yes	No	
LP 7701 E KELLOGG SUITE 820 WICHITA, KS 67207 27-1165456												
EQUITY FUND OF NEBRASKA IX LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-259	47,275		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0844673												
EQUITY FUND OF NEBRASKA IX-B LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-9	-298		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0845255												
EQUITY FUND OF NEBRASKA VII LP	RENTAL REAL ESTATE	NE	N/A	RELATED				No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0819366												
EQUITY FUND OF NEBRASKA VIII LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-36	17,304		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0828532												
	RENTAL REAL ESTATE	NE	N/A	RELATED	-180	11,757		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 11-3645080												
EQUITY FUND OF NEBRASKA XI LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-222	11,383		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 71-0969038												
EQUITY FUND OF NEBRASKA XII	RENTAL REAL ESTATE	NE	N/A	RELATED	-209	41,980		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 03-0607491												
	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 48-1233794												
EUFAULA AFFORDABLE HOUSING PARTNERS LP	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 14-1983401												
2221 N 24TH STREET OMAHA, NE 68110	RENTAL REAL ESTATE	NE	N/A									
45-4056336 FB HARLAN LP	RENTAL REAL ESTATE	IA	N/A									
8201 NW 97TH TERRACE KANSAS CITY, IA 64153 14-2009063												
	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-8501575	DENTAL SEAL SCIA	1/5	NI/A									
FLOR DE SOL III LLC 534 S KANSAS AVE SUITE 900 TOPEKA, KS 66603 27-4280085	RENTAL REAL ESTATE	KS	N/A									
	RENTAL REAL ESTATE	KS	N/A									
534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 26-3942869												

(a) Name, address, and EIN of related organization	<b>(b)</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 Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen	ner <sup>9</sup>	(k) Percentage ownership
FLOR DE SOL PARTNERS LLC	RENTAL REAL ESTATE	KS	N/A							1.55		
7500 COLLEGE BLVD STE 500 OVERLAND PARK, KS 66210 26-0633223	ESTATE											
FNBO COMMUNITY FUND I LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-74	1,132,906		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 81-1895490												
FONTENELLE COTTAGES LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0830593												
FRENCH QUARTER II LLC	RENTAL REAL ESTATE	KS	N/A									
2145 NORTH TOPEKA WICHITA, KS 67214 47-1904610												
FRIENDSHIP PLACE I LLC	RENTAL REAL ESTATE	KS	N/A									
600 WEST BLANCHARD AVENUE SOUTH HUTCHINSON, KS 67505 20-4694152												
FRONTIER HOUSING LLC	RENTAL REAL ESTATE	KS	N/A									
400 S BROADWAY STREET WICHITA, KS 67202 45-4152907												
FULLWOOD SQUARE APARTMENTS LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
1701 N 24TH ST STE 102 OMAHA, NE 68110 47-0842565												
GARDEN AT FLINT HILLS LP	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3006177												
GARDNER PROPERTIES LP	RENTAL REAL ESTATE	KS	N/A									
111 N MAIN STREET CLARKTON, MO 63837 47-3978991												
GENESIS HOMES LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 80-0667381												
GERING VALLEY ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1029899												
GI VENTURE LP	RENTAL REAL ESTATE	NE	N/A									
13057 WEST CENTER ROAD OMAHA, NE 68144 20-1470744												
GLENN OAKS CITY CENTRE LP	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 90-0188716												
GODDARD SENIOR APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3006604												
GOLDENROD VILLAGE LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3278935												

Form 990, Schedule R, Part	111 - Identification	ı	ated Organiza 	tions Taxable	as a Partner 	snip 	1		1	١ ,٠	. 1	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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	alloca	rtionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Parti	eral r iging ner?	<b>(k)</b> Percentage ownership
GOLDFINCH GROVE LLC	RENTAL REAL ESTATE	IA	N/A				163	110		163	110	
8551 LEXINGTON AVE LINCOLN, NE 68505 47-2334422												
GRAHAM PARK ESTATES LP	RENTAL REAL ESTATE	NE	N/A									
1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-5593902												
	RENTAL REAL ESTATE	ок	N/A									
2537 N HIGHWAY 81 DUNCAN, OK 73533 20-1681071												
GRANT PRAIRIE TOWNHOMES II LLC	RENTAL REAL ESTATE	KS	N/A									
600 E 103RD ST SUITE 200 KANSAS CITY, MO 64131 47-5179070												
	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 20-3773650												
GREAT WEST TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3991280												
GREENVIEW ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0576269												
	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1901751												
GTMC LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2404983												
HAMPTON WEST LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-3101834												
HEARTHSTONE LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2389519												
HEATHER ESTATES LP	RENTAL REAL ESTATE	NE	N/A									<del></del>
1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-2819158												
HELP THE HOMELESS OF THE METRO LLC	RENTAL REAL ESTATE	NE	N/A				_					
2828 N 23RD STREET EAST OMAHA, NE 68110 20-5584346												
	RENTAL REAL ESTATE	KS	N/A									
400 S BROADWAY STREET WICHITA, KS 67202 45-4153069												
HERITAGE GARDENS LP	RENTAL REAL ESTATE	NE	N/A									
1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-5617390												

(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	(h Dispropr allocat	tionate ions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gendon O Mana Partr	eral r iging ner?	(k) Percentage ownership
HERITAGE HAWTHORNE PARTNERS	RENTAL REAL ESTATE	KS	N/A			162	140		165	140	
534 S KANSAS AVE SUITE 900 TOPEKA, KS 66603 27-4896333											
HERITAGE HAWTHORNE PARTNERS II LLC	RENTAL REAL ESTATE	KS	N/A								
5345 W 151ST TERRACE LEAWOOD, KS 66224 30-0874627											
	RENTAL REAL ESTATE	KS	N/A								
219 S MAIN ST SMITH CENTER, KS 66967 45-5218865											
HFS COUNCIL BLUFFS LLC	RENTAL REAL	IA	N/A								
2101 S 42ND STREET OMAHA, NE 68105 20-3781186	ESTATE										
HICKORY HEIGHTS LLC	RENTAL REAL ESTATE	KS	N/A								
2107 INDUSTRIAL DRIVE MCPHERSON, KS 67460 46-3696319	ICSTATE										
HICKORY RIDGE MCALESTER LLC	RENTAL REAL ESTATE	ОК	N/A								
111 EAST BROADWAY SUITE 1250 SALT LAKE CITY, OK 84111 26-1547913	LSTATE										
HIGHLAND WEST LLLP	RENTAL REAL ESTATE	со	N/A								
6340 WEST 38TH AVENUE WHEAT RIDGE, CO 80033 37-1750461											
HILLSIDE CROWN LLC	RENTAL REAL ESTATE	NE	N/A								
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-0868640											
HILLTOP I LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A								
319 SEVENTH STREET DES MOINES, IA 50309 35-2461044	LSTATE										
HILLTOP SENIOR LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A								_
319 SEVENTH STREET DES MOINES, IA 50309 30-0756714											
HOLDENVILLE OAKRIDGE COMMUNITY II LP	RENTAL REAL ESTATE	ОК	N/A								
20 EAST 9TH STREET SHAWNEE, OK 74801 27-1331253											
HOLIDAY COURT LLLP	RENTAL REAL ESTATE	IA	N/A								
211 E 37TH STREET DAVENPORT, IA 52806 26-3035382	LOINIE										
HOME TO STAY LP	RENTAL REAL ESTATE	IA	N/A								
PO BOX 473 SPENCER, IA 51301 20-3746904											
HOPE HARBOR PARTNERS OKC LP	RENTAL REAL ESTATE	ОК	N/A								
630 N CHURCH STREET SUITE 101 ROCKFORD, IL 61103 81-0726094											
HOUSE TO HOME RIVERVIEWESCALADE LLC	RENTAL REAL ESTATE	KS	N/A								
2 SOUTH 14TH ST KANSAS CITY, KS 66102 46-3364608											

Form 990, Schedule R, Part	t III - Identificatio	1	lated Organia	zations Taxabl	e as a Partne	rship	ı		 		, ,	
(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 Dispropi allocat	tionate ions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gene on Mana Partr	eral r ging ner?	(k) Percentage ownership
HRM III LP	RENTAL REAL	ОК	N/A				res	NO		res	NO	
20 EAST 9TH STREET SHAWNEE, OK 74801 45-3865300	ESTATE											
HUGO AFFORDABLE HOUSING II LLC	RENTAL REAL ESTATE	ОК	N/A									
600 S WASHINGTON ARDMORE, OK 73401 47-2421530												
HUGO AFFORDABLE HOUSING III LLC	RENTAL REAL ESTATE	ок	N/A									
600 S WASHINGTON ARDMORE, OK 73401 47-4108852												
HUGO AFFORDABLE HOUSING IV LLC	RENTAL REAL ESTATE	ОК	N/A									
600 S WASHINGTON ARDMORE, OK 73401 47-5662416												
HUGO AFFORDABLE HOUSING LLC	RENTAL REAL ESTATE	ОК	N/A									
600 S WASHINGTON ARDMORE, OK 73401 45-5385551												
HUMBOLDT SENIOR	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-4527775	ESTATE											
	RENTAL REAL	AR	N/A									
1501 N UNIVERSITY AVE SUITE	ESTATE											
740 LITTLE ROCK, AR 72207 46-1867288												
IDABEL PIONEER VILLAGE LP	RENTAL REAL ESTATE	ОК	N/A									
2537 N HIGHWAY 81 DUNCAN, OK 73533 27-0099471												
INTERFAITH SFKH LP	RENTAL REAL ESTATE	МО	N/A									
250 NE MULBERRY STE 201 LEES SUMMIT, MO 64086 46-5230094												
	RENTAL REAL ESTATE	IA	N/A	RELATED	-23	13,540		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0046359												
IOWA EQUITY FUND II LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-112	1,863,030		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-0072076												
IOWA EQUITY FUND III LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-115	10,796		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5739095												
IOWA FUND IV LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-93	12,293		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2587462												
IOWA FUND V LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-128	10,613		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-4018140												
IOWA FUND VI LP	RENTAL REAL ESTATE	IA	N/A	RELATED	-144	794,170		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2174856	131711											

Form 990, Schedule R, Part	III - Identification	on of Re	lated Organia	zations Taxabl	e as a Partne	rship			1			
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropri allocati	tionate ions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Mana	eral er aging ner?	(k) Percentage ownership
IOWA FUND VII LP	RENTAL REAL	IA	N/A	RELATED	-138	1,980,309	163	No		Yes	NO	0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5100545	ESTATE											
	RENTAL REAL	IA	N/A									_
5345 W 151ST TERRACE LEAWOOD, KS 66224 46-4199338	ESTATE											
IVORY STREET APARTMENTS LLC		KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1492768	ESTATE											
	RENTAL REAL ESTATE	MN	N/A									
702 SOUTH 3RD AVENUE VIRGINIA, MN 55792 38-4011115												
JACKSON HEIGHTS APARTMENTS LIMITED PARTNERSHIP	RENTAL REAL ESTATE	SD	N/A									
310 S ROOSEVELT ABERDEEN, SD 57401 45-4293901												
	RENTAL REAL	NE	N/A									
908 1ST AVENUE AURORA, NE 68818 37-1666774	ESTATE											
	RENTAL REAL	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5290310	ESTATE											
	RENTAL REAL ESTATE	NE	N/A									
PO BOX 1808 TURLOCK, CA 95381 47-3754153	LOTATE											
	RENTAL REAL ESTATE	KS	N/A	RELATED	-1	33,699		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 39-2008696	LSTATE											
KANSAS EQUITY FUND II LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-95	27,566		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0046363	LSTATE											
	RENTAL REAL ESTATE	KS	N/A	RELATED	-119	2,349,582		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 76-0742787												
KANSAS EQUITY FUND IV LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-166	309,690		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0105906												
	RENTAL REAL ESTATE	KS	N/A	RELATED	-69	9,956		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5608271												
	RENTAL REAL ESTATE	KS	N/A	RELATED	-147	1,408,553		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5100715	LOTATE											
KANSAS FUND VI LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-67	8,255		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1951376	LOTATE											

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KANSAS FUND VII LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-82	9,197	168	No		Yes	140	0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-4018301												
KANSAS FUND VIII LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-139	106,634		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2174407												
KANSAS FUND X LP	RENTAL REAL ESTATE	KS	N/A	RELATED	-146	3,071,205		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-4818941												
KCV RENAISSANCE LLLP	RENTAL REAL ESTATE	со	N/A									
4901 E KENTUCKY CIRCLE DENVER, CO 80246 81-3303359												
KELLOM VILLA LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
2221 NORTH 24TH STREET OMAHA, NE 68110 47-0839869												
KENSINGTON COURT APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 31-1814890												
KEYSTONE CROWN I LP	RENTAL REAL ESTATE	NE	N/A									
540 S 27TH ST OMAHA, NE 68105 16-1635419												
KEYSTONE PLACE LLC	RENTAL REAL	KS	N/A									
4500 W MAPLE WICHITA, KS 67209 81-3494869	ESTATE											
KING'S HERITAGE ESTATES I LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 48-1260879												
KING'S HERITAGE ESTATES II LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 03-0458253												
KOURI PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-0099657												
KRACL MEADOWS LLC	RENTAL REAL ESTATE	NE	N/A									
1119 B STREET SCHUYLER, NE 68661 37-1825973												
LA ESTANCIA PARTNERS II LLC	RENTAL REAL ESTATE	KS	N/A									
534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603	231616											
90-0846697 LA ESTANCIA PARTNERS LLC	RENTAL REAL	KS	N/A									
534 SOUTH KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 27-3522454	ESTATE											
LAMONI ASSISTED LIVING LLC	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738239												

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LANDMARK SECOND LP	RENTAL REAL ESTATE	KS	N/A					-110				
22602 STATE LINE RD BUCYRUS, KS 66013 61-1730614												
LANE SENIOR RESIDENCES LLC	RENTAL REAL ESTATE	МО	N/A									
7701 E KELLOGG DR STE 820 WICHITA, KS 67207 47-4767285												
LAP HOUSING WAHOO LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0817516												
LARNED DREAM HOMES LLC	RENTAL REAL ESTATE	KS	N/A									_
417 BROADWAY STREET LARNED, KS 67550 27-0278961												
LCHT ACCESSIBLE HOUSING LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-3399238	RENTAL REAL ESTATE	KS	N/A									
LEGEND OAKS II LLC	RENTAL REAL ESTATE	NE	N/A									
2604 26TH AVENUE CENTRAL CITY, NE 68826 46-3363896												
LEGEND OAKS LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3937725												
LEGENDS AT HICKORY RIDGE II LP	RENTAL REAL ESTATE	ок	N/A									
20 EAST 9TH STREET SHAWNEE, OK 74801 27-0250606												
LEO VAUGHAN MANOR LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 11-3722438												
LEXINGTON ESTATES LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2207004												
LIBERTY ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-0763367												
LINCOLN TERRACE LP	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 20-1845755												
LINDEN WOODS II LP	RENTAL REAL ESTATE	ок	N/A									
20 EAST 9TH STREET SHAWNEE, OK 74801 45-3865159												
LITTLE PRIEST APARTMENTS LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1777133												
LIVESTOCK EXCHANGE BUILDING LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 43-2005184												

Form 990, Schedule R, Part	 	ı	aceu Organiza 		as a Partner	  -	I	_	1	(j	i) l	
(a) Name, address, and EIN of related organization	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 Dispropr allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o	eral er aging ner?	(k) Percentage ownership
LMAAL LLLP	RENTAL REAL ESTATE	IA	N/A				res	NO		res	NO	
PO BOX 66 LE MARS, IA 51031 05-0539068												
LUKE ESTATES LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-2346135												
MADILL AFFORDABLE HOUSING II LLC	RENTAL REAL ESTATE	ок	N/A									
600 S WASHINGTON ARDMORE, OK 73401 47-5655407												
MADILL AFFORDABLE HOUSING LLC	RENTAL REAL ESTATE	ок	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-1785091												
MANNFORD SENIOR LIMITED PARTNERSHIP	RENTAL REAL ESTATE	ОК	N/A									
301 FARROW DRIVE MANNFORD, OK 74044 27-5318217												
	RENTAL REAL ESTATE	MN	N/A									
2401 BROADWAY AVE SUITE 4 SLAYTON, MN 56172 32-0458844												
MAPLEWOOD TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-0497417												
MARKET STREET LOFTS LP	RENTAL REAL ESTATE	KS	N/A									
8109 NW HILLSIDE DRIVE WEATHERBY LAKE, KS 64152 27-3629179												
MARYSVILLE SENIOR HOUSING LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1885130												
MCKINLEY CREST LLLP	RENTAL REAL ESTATE	IA	N/A									
2024 FOREST AVENUE SUITE 101 DES MOINES, IA 50311 45-4411713												
	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3881063												
MDI LIMITED PARTNERSHIP #104	RENTAL REAL ESTATE	KS	N/A									
1600 UNIVERSITY AVENUE STE 212 ST PAUL, MN 55104												
20-3290291 MDI LIMITED PARTNERSHIP #62	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 41-2005649												
	RENTAL REAL ESTATE	KS	N/A									
1313 STONE GREAT BEND, KS 67530 47-1512417												
	RENTAL REAL ESTATE	NE	N/A									
1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-5607043												

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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) Dispropri	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Mana	eral er aging ner?	(k) Percentage ownership
MEADOWS ASSOCIATES LLC	RENTAL REAL	NE	N/A							1.55		
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0797779	ESTATE											
MEADOWS AT FORREST CITY LP 109 E MADISON AVE BASTROP, LA 71220	RENTAL REAL ESTATE	AR	N/A									
46-4628132 MEADOWVIEW PLACE LLC	RENTAL REAL	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-0233266	ESTATE											
MERIDEN HEIGHTS LLC 1000 SE HANCOCK STREET TOPEKA, KS 66607	RENTAL REAL ESTATE	KS	N/A									
20-8254192 MHEG COMMUNITY FUND 41 LP	RENTAL REAL	NE	N/A	RELATED	-180	506,233		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1706605	ESTATE					-33,233						5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
MHEG COMMUNITY FUND 43 LP	RENTAL REAL	NE	N/A	RELATED	-147	275,640		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 32-0434441	ESTATE											
MHEG COMMUNITY FUND 45 LP 515 N 162ND AVE SUITE 202	RENTAL REAL ESTATE	NE	N/A	RELATED	-139	3,557,332		No		Yes		0 010 %
OMAHA, NE 68118 38-3954206												
MHEG COMMUNITY FUND 47 LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118	RENTAL REAL ESTATE	NE	N/A	RELATED	-94	15,454,453		No		Yes		0 010 %
38-3993907 MHEG COMMUNITY FUND 49 LP	DENITAL DEAL	NE	N/A	RELATED				No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1846549	ESTATE	NE	IV/A	KLLATED				NO		163		0 010 /0
MHEG FUND 40 LP	RENTAL REAL	NE	N/A	RELATED	-620	797,915		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0766625	ESTATE											
MHEG FUND 42 LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-1,130	8,107,403		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-3922426												
MHEG FUND 44 LP 515 N 162ND AVE SUITE 202	RENTAL REAL ESTATE	NE	N/A	RELATED	-1,488	89,908,184		No		Yes		0 010 %
OMAHA, NE 68118 30-0855739												
MHEG FUND 46 LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-757	135,104,625		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1808582												
MHEG FUND 48 LP	RENTAL REAL	NE	N/A	RELATED				No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1859812	ESTATE											
MILL FARM PARTNERS LLC	RENTAL REAL ESTATE	IA	N/A									
534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603	ESTATE											
61-1674660												

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

| (c) | (a) | (b) | (j) |

(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)	(g) Share of end-of- year assets	(h Dispropri allocat	tionate ions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Parti	eral r iging ner?	<b>(k)</b> Percentage ownership
MILLARD SENIOR HOUSING LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2787815	ESTATE											
MLK BRICKSTONE DEVELOPMENT LP	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3542783												
MLK BRICKSTONE II LP	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1814624												
MODEL CITIES BROWNSTONE LP	RENTAL REAL ESTATE	MN	N/A									_
1821 UNIVERSITY AVE N-461 ST PAUL, MN 55107 32-0466342												
MONUMENT VIEW VILLA LLC	RENTAL REAL ESTATE	NE	N/A									
89-A WOODLEY PARK RD GERING, NE 69341 45-4490800												
MORNINGSTAR SENIOR LP	RENTAL REAL ESTATE	МО	N/A									_
2411 E 27TH STREET KANSAS CITY, MO 64127 35-2549445												
MOSIAC RESIDENTIAL SERVICES OF NEBRASKA LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1695051												
MOUNT OLIVE LIMITED PARTNERSHIP	RENTAL REAL ESTATE	ОК	N/A									
3900 N MARTIN LUTHER KING JR AVE OKLAHOMA CITY, OK 73111 26-1400008												
MURRAY HILL SENIOR APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									
8201 NW 97TH TERRACE KANSAS CITY, KS 64153 27-3629283												
NO CROWN VI LIMITED PARTNERSHIP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0831147												
NEBRASKA FUND XIII LP	RENTAL REAL	NE	N/A	RELATED	-76	38,120		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2444496	ESTATE											
NEBRASKA FUND XIV LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-105	33,137		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-4018401												
NEBRASKA FUND XV LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-181	411,356		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2174738												
NEBRASKA FUND XVI LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-144	2,216,086		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5100196												
NEBRASKA FUND XVII LP	RENTAL REAL ESTATE	NE	N/A	RELATED	-100	3,422,844		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-4757784												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General Legal (g) Predominant Disproprtionate (k) (b) (a) Direct Domicile Share of total Share of endor Name, address, and EIN of allocations? Code V-UBI amount in Percentage Primary activity income(related, (State Controlling ıncome of-year assets Managing ownership Box 20 of Schedule K-1 related organization unrelated. Entity Partner? excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes Yes No No NFW LLC RENTAL REAL ESTATE NE N/A 2101 S 42ND ST OMAHA, NE 68105 45-3991190 NORTH OMAHA AFFORDABLE RENTAL REAL ESTATE NE N/A HOMES LP 540 S 27TH ST **OMAHA, NE 68105** 20-3415915 NORTH OMAHA CROWN V LP RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 83-0436367 NORTH OMAHA SENIOR RENTAL REAL ESTATE NE N/A **COTTAGES LIMITED** PARTNERSHIP PHASE II 3014 NORTH 45TH STREET OMAHA, NE 68104 32-0363688 NORTH OMAHA SENIOR RENTAL REAL ESTATE NE N/A COTTAGES LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-4464309 NORTH WEBSTER VILLAGE LP RENTAL REAL ESTATE МО N/A 250 NE MULBERRY STE 201 LEES SUMMIT, MO 64086 81-0891524 RENTAL REAL ESTATE NORTHFIELD AT STAPLETON CO N/A APARTMENTS LLLP 1735 GAYLORD STREET DENVER, CO 80206 37-1789100 NORTHFIELD VILLAGE LP RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 68-0571598 NORTHGLENN APARTMENTS LLC RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 87-0700265 NORTHPARK APARTMENTS LLLP RENTAL REAL ESTATE IΑ N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1784441 NORTHSIDE APARTMENTS LLC RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 68-0555810 NORTHWOODS LIMITED RENTAL REAL ESTATE IΑ N/A PARTNERSHIP 1 1600 UNIVERSITY AVENUE STE ST PAUL, MN 55104 20-1743309 OAK RIDGE APARTMENTS LP RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 75-3044323 ODEBOLT ASSISTED LIVING LLC RENTAL REAL ESTATE IΑ N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738090 -194 695 OKLAHOMA EQUITY FUND I LP RENTAL REAL ESTATE RELATED 0 010 % OK N/A Nο Yes 515 N 162ND AVE SUITE 202 OMAHA, NE 68118

33-1115755

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d)	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f)		(h Dispropri allocat	tionate ions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Parti	eral r iging ner?	<b>(k)</b> Percentage ownership
OKLAHOMA EQUITY FUND II LP	RENTAL REAL	ок	N/A	RELATED	-173	8,901	1.00	No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5738947	ESTATE											
OKLAHOMA FUND III LP	RENTAL REAL ESTATE	ОК	N/A	RELATED	-139	226,084		No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2381043												
OKLAHOMA FUND IV LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5346263	RENTAL REAL ESTATE	ОК	N/A	RELATED	-163	944,530		No		Yes		0 010 %
OLD SPENCER SCHOOL LLLP	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 26-1232442	LSTATE											
OPG BROOKSIDE PARTNERS LLC	RENTAL REAL ESTATE	TX	N/A									
5345 W 151ST TERRACE LEAWOOD, KS 66224 32-0449851												
OPG MAPLEWOOD PARTNERS LLC	RENTAL REAL ESTATE	TX	N/A									
534 S KANSAS AVENUE SUITE 900												
TOPEKA, KS 66603 38-3914570												
OPG PERRYTON PARTNERS LLC	RENTAL REAL ESTATE	TX	N/A									
5345 W 151ST TERRACE LEAWOOD, KS 66224 81-0868381	LSTATE											
OPG SUMMIT WEST PARNERS LLC	RENTAL REAL ESTATE	TX	N/A									
5345 W 151ST TERRACE LEAWOOD, KS 66224 32-0476107												
PANORA ASSISTED LIVING LLC	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738136												
PAOLA SENIORS LP	RENTAL REAL ESTATE	KS	N/A									
5000 W 95TH STREET SUITE 120 PRAIRIE VILLAGE, KS 66207 45-4329369												
PARADISE PLAZA I LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1677639												
PARADISE PLAZA II LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3473277												
PARK VILLAGE RESIDENCES LLC	RENTAL REAL ESTATE	МО	N/A									
7701 E KELLOGG DR STE 820 WICHITA, KS 67207 47-1746406												
PARKLAND ESTATES II LP	RENTAL REAL ESTATE	NE	N/A									
PO BOX 1808 TURLOCK, CA 95381 81-2576255												
PARKLAND TOWN HOMES AFFORDABLE LLC	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1557203												

Form 990, Schedule R, Part 1	III - Identification	ı	ted Organiza	tions Taxable	as a Partners	ship	ı		1	1		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Partr	eral r Iging ner?	(k) Percentage ownership
PARKWILD HEIGHTS LLC	RENTAL REAL ESTATE	IA	N/A				163	NO		163	140	
13057 WEST CENTER ROAD OMAHA, NE 68144 20-4909457			·									
PARSONS HOUSING PARTNERS LP	RENTAL REAL ESTATE	KS	N/A									
2315 W 65TH ST MISSION HILLS, KS 66208 47-2372102												
PATHWAYS WARRENSBURG APARTMENTS LP	RENTAL REAL ESTATE	МО	N/A									
1800 COMMUNITY DRIVE CLINTON, MO 64735 47-2938294												
PEACEFUL VILLAGE LP	RENTAL REAL ESTATE	KS	N/A									
2525 NORTH HIGH POINT WICHITA, KS 67205 81-3535307												
PINEWOOD 2 LLLP	RENTAL REAL ESTATE	со	N/A									_
150 SKI HILL ROAD BRECKENRIDGE, CO 80424 47-3076466												
PIONEER ADAMS II LP	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3086688												
PIONEER WOODS LLC	RENTAL REAL ESTATE	IA	N/A									_
921 SIXTH AVE STE B DES MOINES, IA 50309 20-3786543												
PORTER HOUSE APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									_
2909 SW PLASS COURT TOPEKA, KS 66611 20-0059806												
PPR LP	RENTAL REAL ESTATE	KS	N/A									
1712 E 123RD ST OLATHE, KS 66061 47-1128233												
PRAIRIE HEIGHTS LLC	RENTAL REAL ESTATE	IA	N/A									
8551 LEXINGTON AVE LINCOLN, NE 68505 35-2459841												
PRAIRIE POINTE TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									_
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0480825												
PRAIRIE TRAILS PARTNERS II LLC	RENTAL REAL ESTATE	KS	N/A									
534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 46-2958592												
PRAIRIE TRAILS PARTNERS III LLC	RENTAL REAL ESTATE	KS	N/A									_
469 SOUTH FIFTH SALINA, KS 67401 61-1763981												
PRAIRIE WOODS CROWN LTD	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0842332												
-	RENTAL REAL ESTATE	NE	N/A									
4324 FORT ST OMAHA, NE 68111 47-2505472												

(a)  Name, address, and EIN of related organization	<b>(b)</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)	(h Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gen o Mana Parti	eral r iging ner?	(k) Percentage ownership
QUAIL RIDGE HOMES LLC	RENTAL REAL ESTATE	ок	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 59-3797991 QUILLAN COURTS LLC	RENTAL REAL ESTATE	NE	N/A									
402 NORRIS AVE SUITE 301 MCCOOK, NE 69001 30-0881282	NEW ESTATE	,,,,	.,,,									
RALSTON HOUSE ASSOCIATES LLC	RENTAL REAL ESTATE	NE	N/A									
13057 WEST CENTER ROAD OMAHA, NE 68144 37-1477744												
REBUILDING LIVES LLC	RENTAL REAL ESTATE	NE	N/A									_
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2997332												
RED BUD CROWN LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118	RENTAL REAL ESTATE	NE	N/A									_
20-5946536 REESE ESTATES LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1061457												
RICHMOND PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0240681												
RIDGEWAY VILLAS AT THE LEGENDS LP	RENTAL REAL ESTATE	МО	N/A									
31711 E PINK HILL RD GRAIN VALLEY, MO 64029 46-4867295												
RIDGEWOOD CROWN LLC 515 N 162ND AVE SUITE 202	RENTAL REAL ESTATE	NE	N/A									
OMAHA, NE 68118 27-0371887												
	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 14 WEST 21ST ST SPENCER, IA 51301 42-1527377											_	
RIVER ROAD TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A									
5404 N 107TH PLZ OMAHA, NE 68134 46-3364313												
RIVERVIEW SENIOR DEVELOPERS LP	RENTAL REAL ESTATE	KS	N/A									
22 E ROCKWOOD DRIVE OTTAWA, KS 660673722 46-1213352												
ROBIN ESTATES LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3913625												
ROCKVILLE PLACE LP	RENTAL REAL ESTATE	KS	N/A									
5000 WEST 95TH STREET PRAIRIE VILLAGE, KS 66207 46-2987499												
ROLLING HILLS ESTATE AN ARKANSAS LIMITED PARTNERSHIP	RENTAL REAL ESTATE	AR	N/A									
612 EAST CANAL STREET PARAGOULD, AR 72450 46-1645381												

Form 990, Schedule R, Part	III - Identification		ited Organiza 	tions Taxable   	as a Partner	ship 	l		I	/:	:\	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Disprop alloca	rtionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)		eral or aging ner?	(k) Percentage ownership
ROSEWOOD ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1803399												
ROYAL OAKS ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									_
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0762832												
RURAL HOUSING AND DEVELOPMENT LP	RENTAL REAL ESTATE	KS	N/A									
PO BOX 5900 FORT SMITH, KS 72913 65-1205822												
RUSHPOINTE APTS LLC	RENTAL REAL ESTATE	KS	N/A		· ·							
1006 EAST WATERMAN WICHITA, KS 67211 47-1741430												
RUSSELL HOUSING LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 51-0540575												
SABATA ESTATES LP	RENTAL REAL ESTATE	NE	N/A									
PO BOX 1808 TURLOCK, CA 95381 81-2590819												
SAIL ASSOCIATES LLC	RENTAL REAL ESTATE	ОК	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-0680515												
SAINT STREET APARTMENTS LP	RENTAL REAL ESTATE	МО	N/A									
1533 E ST HWY 76 STE 1 BRANSON, MO 65616 47-2620200												
SANCTUARY TRANSITIONAL HOUSING I LLLP	RENTAL REAL ESTATE	IA	N/A									
800 5TH ST SIOUX CITY, IA 51101 20-3796692												
SANDSTONE HOMES ILLC	RENTAL REAL ESTATE	KS	N/A									<del></del>
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-8287866												
SARATOGA CROWN IV LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-0239468												
SCENIC POINTE LP	RENTAL REAL ESTATE	KS	N/A									
103 SOUTH 4TH STREET MANHATTAN, KS 66505 46-1142239												
SCHOOLHOUSE APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									,
832 PENNSYLVANIA STREET LAWRENCE, KS 66044 81-2304664												
SHADY BEND VILLAS LLC	RENTAL REAL ESTATE	NE	N/A									
1834 WEST 7TH ST GRAND ISLAND, NE 68803 46-3664623												
SHANNON HEIGHTS LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2337175												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General Legal (g) (b) Predominant Disproprtionate (i) (k) (a) Direct Share of total Share of endor Domicile Name, address, and EIN of income(related, allocations? Code V-UBI amount in Percentage Primary activity Managing (State Controlling income of-year assets Box 20 of Schedule K-1 ownership related organization unrelated, Partner? or Entity excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes No Yes No SIMMONS SENIOR HOUSING LP RENTAL REAL ESTATE KS N/A 2500 STRONG AVE KANSAS CITY, KS 66106 35-2466219 SIX UNITS II LP RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 73-1717296 RENTAL REAL ESTATE SIX UNITS LP KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0934801 SIXTEENTH STREET LIMITED RENTAL REAL ESTATE ΝE N/A **PARTNERSHIP** 2221 N 24TH STREET OMAHA, NE 68110 20-5421205 SKIATOOK RETIREMENT RENTAL REAL ESTATE OK N/A COMMUNITY LIMITED PARTNERSHIP 115 N BROADWAY INOLA, OK 74036 20-5607765 SMITH FARM ESTATE LLC RENTAL REAL ESTATE ОК N/A 515 N 162ND AVE SUITE 202 **OMAHA, NE 68118** 27-1234324 SOMERS POINT APARTMENTS II RENTAL REAL ESTATE ΝE N/A HC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0892836 SOUTH ROCK CREEK ESTATES RENTAL REAL ESTATE OK N/A LLC 8551 LEXINGTON AVENUE LINCOLN, OK 68505 45-3838751 RENTAL REAL ESTATE SOUTHEAST VILLA LLC ΝE N/A 515 N 162ND AVE SUITE 202 **OMAHA, NE 68118** 20-8622939 SOUTHERN MEADOWS HOMES LP RENTAL REAL ESTATE N/A 1312 LOCUST STREET SUITE 300A DES MOINES, IA 50309 45-4350525 SOUTHERN POINTE LLLP RENTAL REAL ESTATE N/A IΑ 14 WEST 21ST ST SPENCER, IA 51301 47-2315878 RENTAL REAL ESTATE SOUTHGATE APARTMENTS NE N/A BELLEVUE LP 16910 FRANCES STREET STE 200 OMAHA, NE 68130 35-2432369 SOUTHWOOD CROWN LP RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 68-0496443 SOUTHWOOD ESTATES LLC RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-2231206 SPRING VILLAGE APARTMENTS RENTAL REAL ESTATE IΑ N/A OF IOWA LLC 2 E MIFFLIN STREET SUITE 401 MADISON, IA 53703 20-4593874

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gene or Mana Partr	eral ging ner?	(k) Percentage ownership
SPRUCE HILLS VILLAGE LLC	RENTAL REAL ESTATE	IA	N/A				103	1,10				
2 E MIFFLIN STREET SUITE 401 MADISON, IA 53703 20-4261825												
ST MARGARET'S LIHTC LP	RENTAL REAL ESTATE	KS	N/A									
8201 NW 97TH TERRACE KANSAS CITY, KS 64153 90-0435859												
ST MARY'S APARTMENTS OF DUBUQUE LLC	RENTAL REAL ESTATE	IA	N/A									
2 EAST MIFFLIN STREET SUITE 401 MADISON, IA 53703												
26-0472283 ST PAUL COTTAGES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-1437758												
STATE STREET HOUSING LLC	RENTAL REAL ESTATE	KS	N/A									
8109 NW HILLSIDE DRIVE WEATHERBY LAKE, KS 64152 27-3160956												
STILWELL HOUSING PARTNERS II LIMITED PARTNERSHIP	RENTAL REAL ESTATE	ок	N/A									
1031 FAYETTEVILLE ROAD SUITE												
205 VAN BUREN, AR 72956 45-5561459												
STOCKBRIDGE LP	RENTAL REAL ESTATE	IA	N/A									
1620 PLEASANT STREET DES MOINES, IA 50314 20-5829617												
STONE RIDGE LLLP	RENTAL REAL ESTATE	IA	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3671527												
STONEBROOK ESTATES LLC	RENTAL REAL ESTATE	ок	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1324774												
STONEBROOK VILLAS LLC	RENTAL REAL ESTATE	ок	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1324435												
STONEPOST PARTNERS II LLC	RENTAL REAL ESTATE	KS	N/A									
2850 MISSION WOODS DR TOPEKA, KS 66614 26-3380572												
STONEPOST PARTNERS III LLC	RENTAL REAL ESTATE	KS	N/A									<del></del>
534 SOUTH KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 27-3489267												
STONEPOST PARTNERS LLC	RENTAL REAL ESTATE	KS	N/A									
7500 COLLEGE BLVD STE 500 OVERLAND PARK, KS 66210 20-5868538												
STONEWOOD TOWNHOMES II LLC	RENTAL REAL ESTATE	NE	N/A									_
2604 26TH AVENUE CENTRAL CITY, NE 68826 45-5606892												
STONEWOOD TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-1205288												

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

(c) (e) (f) (h) (General Control Co

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	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 Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gendon Mana Partr	eral r Iging ner?	(k) Percentage ownership
STORM LAKE AFFORDABLE PARTNERS LLC	RENTAL REAL ESTATE	IA	N/A	·			res	NO		res	140	
534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 30-0717498												
STREET OF DREAMS LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-4840240												
STREHLOW HOUSING PARTNERS LP	RENTAL REAL ESTATE	NE	N/A									
540 S 27TH ST OMAHA, NE 68105 84-1651669												
STROUD COMMUNITY HOUSING LP	RENTAL REAL ESTATE	ОК	N/A									
1401 S MAIN ST SUITE A STILLWATER, OK 740745836 26-1078824												
SUGAR CREEK BEND LLLP	RENTAL REAL ESTATE	IA	N/A									
PO BOX 473 SPENCER, IA 51301 27-0529358												
SUITES APARTMENTS LLLP	RENTAL REAL ESTATE	СО	N/A									
1228 MAIN STREET LONGMONT, CO 80501 35-2566919												
SUNNYDALE POINTE APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									
9340 SW GLICK ROAD AUBURN, KS 66402 81-2705187												_
SUNRISE EAST LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2086462												
SUNRISE LANE LLC	RENTAL REAL ESTATE	NE	N/A									<del></del>
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2274391												
SUNRISE RIDGE TOWNHOMES LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0532956												
SUTTON HORSESHOE BEND VILLAS LLC	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3537402												
SYCAMORE RENAISSANCE LP	RENTAL REAL ESTATE	МО	N/A									
1021 N 7TH STREET STE 106 KANSAS CITY, KS 66101 61-1709251												
T TOWN HOMES LP	RENTAL REAL ESTATE	KS	N/A									<del></del>
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 48-1251259												
TABOR GRAND LLLP	RENTAL REAL ESTATE	со	N/A									
5345 W 151ST TERRACE LEAWOOD, KS 66224 46-4350963												
TALIA APARTMENTS LP	RENTAL REAL ESTATE	МО	N/A									
305 W COMMERCIAL STREET SPRINGFIELD, MO 65803 81-0962501												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General Legal (g) (b) Predominant Disproprtionate (i) (k) (a) or Direct Share of total Share of end-Domicile Name, address, and EIN of Primary activity income(related, allocations? Code V-UBI amount in Percentage Managing (State Controlling income of-year assets Box 20 of Schedule K-1 ownership related organization unrelated, Partner? or Entity excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes No Yes No TECHNOLOGY HEIGHTS RENTAL REAL ESTATE SD N/A APARTMENTS LP 225 E 11TH ST SIOUX FALLS, SD 67104 81-1827126 TENNESSEE TOWN II LLC RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1185202 TERRACE HEIGHTS VILLAGE II RENTAL REAL ESTATE ΝE N/A LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 84-1688521 RENTAL REAL ESTATE THE ANTLERS LP IΑ N/A PO BOX 473 SPENCER, IA 51301 20-1888027 THE NATHAN LP RENTAL REAL ESTATE ΝE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-2536126 THE VILLAGE AT HEARTLAND RENTAL REAL ESTATE N/A PARK LLC 515 N 162ND AVE SUITE 202 **OMAHA, NE 68118** 47-0843816 THE VILLAS AT CRYSTAL COURT RENTAL REAL ESTATE NE N/A TLLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 75-3044320 THE VILLAS AT CRYSTAL COURT RENTAL REAL ESTATE NE N/A LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0834890 RENTAL REAL ESTATE THORNBURY WAY LP IΑ N/A PO BOX 473 14 WEST 21ST STREET SPENCER, IA 51301 42-1527248 THUNDER WAY LP RENTAL REAL ESTATE ΝE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1760070 TIERRA VERDE APARTMENTS LLC RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-4798645 TRAIL RIDGE PARTNERS II LLC RENTAL REAL ESTATE KS N/A 5345 W 151ST TERRACE LEAWOOD, KS 66224 81-2950634 TRAIL RIDGE PARTNERS LLC RENTAL REAL ESTATE KS N/A 5345 W 151ST TERRACE LEAWOOD, KS 66224 35-2508011 TROY HOUSING INVESTORS LP RENTAL REAL ESTATE KS N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 81-0550593 URBAN LEAGUE CAPITOL SQUARE RENTAL REAL ESTATE N/A 3900 N MARTIN LUTHER KING OKLAHOMA CITY, OK 73111 26-1776170

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (e) Legal (d) General (g) Disproprtionate (k) (b) Predominant Direct Share of total | Share of end-Domicile allocations? Name, address, and EIN of Code V-UBI amount in Percentage Primary activity income(related, Controlling (State Managing of-year assets income ownership related organization unrelated, Box 20 of Schedule K-1 Partner? or Entity excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes Yes No No VALACIA NORTH VILLA LLC RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-0092010 **VALLEY CROWN LLC** RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5170773 VALLEY VIEW PLACE LLLP RENTAL REAL ESTATE CO N/A 710 WEST MIDLAND AVE WOODLAND PARK, CO 80863 36-4824530 VALLIANT VILLAGE APARTMENTS | RENTAL REAL ESTATE OK N/A 2537 N HIGHWAY 81 DUNCAN, OK 73533 20-2557716 VAN ALLEN LP RENTAL REAL ESTATE IΑ N/A 14 WEST 21ST STREET-PO BOX SPENCER, IA 51301 42-1507169 VICTORY PLACE LLC RENTAL REAL ESTATE NE N/A 404 SW 9TH STREET TOPEKA, KS 66612 30-0886222 VILLA DE SANTE I LIMITED RENTAL REAL ESTATE NE N/A **PARTNERSHIP** 2221 NORTH 24TH STREET **OMAHA, NE 68110** 90-0001641 VILLAGE AT HEARTLAND PARK II RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2232245 VILLAGE CROWN II LIMITED RENTAL REAL ESTATE N/A ΝE PARTNERSHIP 3014 NORTH 45TH STREET OMAHA, NE 68104 46-1789241 VILLAGE CROWN LIMITED RENTAL REAL ESTATE NE **PARTNERSHIPS** 515 N 162ND AVE SUITE 202 **OMAHA, NE 68118** 27-1263029 VILLAGE PLACE 1 LIMITED RENTAL REAL ESTATE NE N/A PARTNERSHIP 1701 NORTH 24TH ST SUITE 102 OMAHA, NE 68110 20-5197001 VILLE DE SANTE II LIMITED RENTAL REAL ESTATE NE N/A PARTNERSHIP 2221 NORTH 24TH STREET SUITE 200 **OMAHA, NE 68110** 20-3533854 VILLE DE SANTE III LIMITED RENTAL REAL ESTATE N/A NE PARTNERSHIP 2221 NORTH 24TH STREET OMAHA, NE 68110 26-2766741 VINTAGE APARTMENTS AT RENTAL REAL ESTATE KS N/A HILLSBORO LLC 730 CLIFF DRIVE AUGUSTA, KS 67010 47-5547820 WALKER CORNERS LLC RENTAL REAL ESTATE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118

27-1260184

(a)  Name, address, and EIN of related organization	<b>(b)</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)	(h Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j Gen o Mana Parti	eral r aging ner?	(k) Percentage ownership
WALNUT COURT APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A				163	140		163	140	
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 86-1070207												
WALNUT CREEK APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1492271												
WALNUT GLENN APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3466770												
WEBSTER GROVES LP	RENTAL REAL ESTATE	МО	N/A									
1525 E REPUBLIC ROAD SUITE B100 SPRINGFIELD, MO 65804 46-1847238												
WEDGEWOOD APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A									
1730 E REPUBLIC RD STE F SPRINGFIELD, MO 65804 47-1346732												
WEST CREST LLC	RENTAL REAL ESTATE	KS	N/A									
2501 NORTH TEE TIME CIRCLE WICHITA, KS 67205 20-1286400												
WEST HEIGHTS TOWNHOMES LLLP	RENTAL REAL ESTATE	IA	N/A									
14 WEST 21ST STREET-PO BOX 473												
SPENCER, IA 51301 27-4945254								_				
WEST PARK TOWNHOMES LLC 515 N 162ND AVE SUITE 202	RENTAL REAL ESTATE	NE	N/A									
OMAHA, NE 68118 74-3123188												
WEST WING APARTMENTS LP	RENTAL REAL ESTATE	NE	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-4901469												
WESTERN HOUSING PARTNERS LP	RENTAL REAL ESTATE	KS	N/A									
832 PENNSYLVANIA STREET LAWRENCE, KS 66044 47-4428970												
WESTLAWN GARDENS LP1	RENTAL REAL ESTATE	ок	N/A									
2400 GENERAL PERSHING BLVD OKLAHOMA CITY, OK 73107 26-0420981												_
WESTRIDGE CROWN LLC	RENTAL REAL ESTATE	NE	N/A									<del></del>
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2123886												
WHEATRIDGE APARTMENTS LLC	RENTAL REAL ESTATE	KS	N/A									
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-0233169												
WILBURTON VILLAGE LP	RENTAL REAL ESTATE	ок	N/A									
2537 N HIGHWAY 81 DUNCAN, OK 73533 27-0099468												
WILDERNESS FALLS II LLC	RENTAL REAL ESTATE	NE	N/A									
8551 LEXINGTON AVENUE LINCOLN, NE 68505 47-2860969												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership **(j)** General (c) (e) Predominant (h) (d) Direct Legal (g) (a) Name, address, and EIN of (b) Disproprtionate (i) (k) Share of total | Share of endor Domicile Primary activity income(related, allocations? Code V-UBI amount in Percentage Managing Partner? (State Controlling ıncome of-year assets unrelated, related organization Box 20 of Schedule K-1 ownership Entity (Form 1065) excluded from Foreign tax under Country) sections 512-514) Yes No Yes No WILDERNESS FALLS LLC RENTAL REAL ESTATE NE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-4849619 WILLOW BEND I LIMITED RENTAL REAL ESTATE N/A PARTNERSHIP 319 7TH STREET SUITE 500

DES MOINES, IA 50309 20-5817680								
WILLOW BEND II LIMITED PARTNERSHIP	RENTAL REAL ESTATE	IA	N/A					
319 7TH STREET SUITE 500 DES MOINES, IA 50309 38-3766415								
WILLOW RIDGE APARTMENTS LP	RENTAL REAL ESTATE	KS	N/A					
5527 STONE CREST COURT MANHATTAN, KS 66505 47-4429104								
WILLOW STREET RESIDENCES LLLP	RENTAL REAL ESTATE	со	N/A					
155 INVERNESS DRIVE WEST SUITE 200 ENGLEWOOD, CO 80112 36-4839619								
WINDHAVEN ESTATES LLC	RENTAL REAL ESTATE	NE	N/A					_
1422 12TH AVE HOLDREGE, NE 68949 32-0472182								
WINDRIDGE TOWNHOMES II LLC	RENTAL REAL ESTATE	NE	N/A					_
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3937677								
WINDRIDGE TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A					
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0541952								
WOODLAND PARK TOWNHOMES II LLC	RENTAL REAL ESTATE	NE	N/A					
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3913113								
WOODLAND PARK TOWNHOMES LLC	RENTAL REAL ESTATE	NE	N/A					
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-8197688								
WOODSON PARK APARTMENTS LTD	RENTAL REAL ESTATE	ОК	N/A					
2813 NW 122ND OKLAHOMA CITY, OK 73120 20-3932744								
WYANDOTTE ASSOCIATES LP	RENTAL REAL ESTATE	KS	N/A					
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 57-1138881								
YORK PLACE CROWN LTD	RENTAL REAL ESTATE	NE	N/A					
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1672559								
YORKTOWNE ESTATES II LLC	RENTAL REAL ESTATE	NE	N/A					
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3913156								
YORKTOWNE ESTATES LLC	RENTAL REAL ESTATE	NE	N/A					

515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-8197598

Form 990, Schedule R, Part	111 - Identification		ated Organiza 	tions Taxable	as a Partner 	snip 	ı				. 1	
(a) Name, address, and EIN of related organization	<b>(b)</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	E		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		<b>(k)</b> Percentage ownership
BANCFIRST COMMUNITY FUND	RENTAL REAL ESTATE	NE	N/A	RELATED			Yes	No No		Yes	140	0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-4027218												
MHEG FUND 2017 LP	RENTAL REAL ESTATE	NE	N/A	RELATED				No		Yes		0 010 %
515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1828583												
ADAMS PARK SENIOR COTTAGES I LP	RENTAL REAL ESTATE	NE	N/A									
4324 FORT ST OMAHA, NE 68111 32-0478761												
OPG AUTUM SAGE PARTNERS LLC	RENTAL REAL ESTATE	KS	N/A									
5345 W 151ST TERRACE LEAWOOD, KS 66224 38-4013021												
THE BREWERY LOFTS LLC	RENTAL REAL ESTATE	KS	N/A									
6800 W 64TH STREET SUITE 101 OVERLAND PARK, KS 66202 47-3700134												
	RENTAL REAL ESTATE	МО	N/A									
7920 WARD PARKWAY KANSAS CITY, MO 64114 81-5105858												
	RENTAL REAL ESTATE	ОК	N/A									-
115 N BROADWAY INOLA, OK 74036 47-5406950												
-	RENTAL REAL ESTATE	ОК	N/A									
600 S WASHINGTON ARDMORE, OK 73401 81-4553801												
	RENTAL REAL ESTATE	IA	N/A									
14 WEST 21ST ST SPENCER, IA 51303 42-1416426												
DELAWARE PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
2 SOUTH 14TH ST KANSAS CITY, KS 66102 81-3465626												
GREEN LP	RENTAL REAL ESTATE	МО	N/A									
PO BOX 350 REPUBLIC, MO 65738 81-4841018												
HORIZON PLACE APARTMENTS LP	RENTAL REAL ESTATE	SD	N/A									
111 N VAN EPS MADISON, SD 57042 38-4026716												
JACK ESTATES LP	RENTAL REAL ESTATE	CA	N/A									
PO BOX 1808 TURLOCK, CA 95381 47-0975505												
KENSINGTON SQUARE LLC	RENTAL REAL ESTATE	KS	N/A									
1313 STONE ST GREAT BEND, KS 67530 82-1913915												
LARKSPUR GARDENS LP	RENTAL REAL ESTATE	AR	N/A									
109 W WALNUT WALNUT RIDGE, AR 72476 81-0999128												

(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)	(h Dispropr allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	0	eral or aging ner?	<b>(k)</b> Percentage ownership
PAOLA SENIORS II LP	RENTAL REAL ESTATE	KS	N/A							<u> </u>		
5000 W 95TH STREET SUITE 120 PRAIRIE VILLAGE, KS 66207 46-4744337												
PITTSBURG HIGHLANDS LP	RENTAL REAL ESTATE	МО	N/A									
205 W WALNUT SUITE 200 SPRINGFIELD, MO 65806 82-2182076												
PORTER ESTATES LLC	RENTAL REAL ESTATE	NE	N/A									
8551 LEXINGTON AVE LINCOLN, NE 68505 82-1464685												
PRAIRIE FLATS LLC	RENTAL REAL ESTATE	NE	N/A									
8551 LEXINGTON AVE LINCOLN, NE 68505 82-1608331												
115 N BROADWAY INOLA, OK 74036	RENTAL REAL ESTATE	OK	N/A									
47-5420454 THE ROW LEXINGTON LP	RENTAL REAL ESTATE	NE	N/A									
5631 S 48TH ST SUITE 220 LINCOLN, NE 68516 81-5035055												
	RENTAL REAL ESTATE	KS	N/A									
1006 EAST WATERMAN WICHITA, KS 67211 82-2586571												
ODD FELLOW HOUSING ASSOCIATES LP	RENTAL REAL ESTATE	MT	N/A									<del></del>
131 S HIGGINS ST MISSOULA, MT 59802 47-2509259												
108 W 3RD STREET WAYNE, NE 68787	RENTAL REAL ESTATE	NE	N/A									
30-1005553 TAMMEN HALL APARTMENTS	RENTAL REAL ESTATE	СО	N/A									
1936 W 33RD AVENUE DENVER, CO 80211 81-1174790												
THE ABERDEEN APARTMENTS LLC	RENTAL REAL ESTATE	IA	N/A									
2024 FOREST AVENUE DES MOINES, IA 50311 38-3937709												
TRINITY POINT APARTMENTS LP	RENTAL REAL ESTATE	SD	N/A									<del></del>
101 SOUTH REID STREET SIOUX FALLS, SD 57103 47-4712709												
VICTORY PARK VETERANS RESIDENCE LLC	RENTAL REAL ESTATE	NE	N/A									
1004 FARNAM STREET SUITE 400 OMAHA, NE 68102 81-3887598												
WASHITA PLAINS LLC	RENTAL REAL ESTATE	ОК	N/A									
600 S WASHINGTON ARDMORE, OK 73401 81-4557517												
WELLNESS PLACE LLC	RENTAL REAL ESTATE	KS	N/A									
914 E HARRY SUITE 701 WICHITA, KS 67207 46-0868388												

(c) (e) General (d) (f) (g)
Share of total Share of end-Legal Disproprtionate (k) (a) (b) Predominant Domicile Direct Code V-UBI amount in Managing allocations? Percentage Name, address, and EIN of income(related, Primary activity

related organization	or Foreign Country)	Entity	unrelated, excluded from tax under sections 512-514)	income	or-year assets		Box 20 of Schedule K-1 (Form 1065)	Parti	ner?	ownership
			1 314-3141 1		I	 				

No Yes No Yes WHITTIER PLACE LP RENTAL REAL ESTATE MO N/A

PO BOX 350 REPUBLIC, MO 65738 82-1753715

Form 990, Schedule R, Part V - Transactions With Related Organizations (b) (c) Name of related organization Transaction Amount Involved (d) Method of determining amount involved type(a-s) BANCFIRST COMMUNITY FUND I LP D 40,000 BANCFIRST COMMUNITY FUND I LP L 255,000 575,976 IOWA FUND VII LP D MHEG COMMUNITY FUND 45 LP D 86,384 MHEG COMMUNITY FUND 47 LP 739,663 MHEG COMMUNITY FUND 49 LP L 40,000 MHEG FUND 2017 LP D 40,000 MHEC FIND 2017 LD 994 470

MHEG FUND 2017 LP	L	884,470	
MHEG FUND 40 LP	L	67,850	
MHEG FUND 40 LP	D	651,643	
MHEG FUND 42 LP	D	8,168,718	
MHEG FUND 42 LP	L	77,000	

D

L

D

D

L

12,864,379

72,250

4,936,567

13,534,430

712,788

2,143,441

MHEG FUND 44 LP

MHEG FUND 44 LP

MHEG FUND 46 LP

MHEG FUND 46 LP

MHEG FUND 48 LP

MHEG FUND 48 LP