For Paperwork Reduction Act Notice, see the separate instructions.

DLN: 93493265014030

OMB No. 1545-0047

2019

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

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

| A F | or the | e 2019 c | alendar vear, or tax vear begin | ning 01-01-2019 , and ending 12- | -31-2019 | | | | | | |
|--------------------------------|--------------------|--------------|--|--|---------------|---------------------------------------|--------------------|-------------|----------------------|--|--|
| | | pplicable: | C Name of organization | | | | loyer ide | ntifi | cation number | | |
| | | change | MIDWEST HOUSING EQUITY GROUP | INC | | 47-0 | 767984 | | | | |
| | me cha tial ret | - | Doing business as | | | | | | | | |
| | | n/terminated | | | | | | | | | |
| | | l return | Number and street (or P.O. box if m 515 N 162ND AVE NO 202 | ail is not delivered to street address) Room/ | /suite | E Telep | E Telephone number | | | | |
| □Ар | plicatio | on pending | | | | (402 |) 334-88 | 399 | | | |
| | | | City or town, state or province, cour OMAHA, NE 68118 | itry, and ZIP or foreign postal code | | | | | | | |
| | | | F Name and address of principal | I - 66: | 1 > | | receipts | | ,935,206 | | |
| | | | F Name and address of principa JASON MAIN | i officer: | H(a) | Is this a group | return f | or | | | |
| | | | 515 N 162ND AVE NO 202 OMAHA, NE 68118 | | н(ь) | subordinates? Are all subordi | nates | | □Yes ☑No | | |
| T Ta: | x-exen | npt status: | | | اري, | included? | | | ☐ Yes ☐No | | |
| | | | ☑ 501(c)(3) □ 501(c)() ◄ (| insert no.) 4947(a)(1) or 527 | ⊢ н(с) | If "No," attach Group exempt | • | | • | | |
| J VV | ebsit | e: ► ww | /W.MHEGINC.COM | | (5) | Group exempt | on num | ושפו | | | |
| K Forr | n of or | rganization: | ☑ Corporation ☐ Trust ☐ Asso | ciation Other | L Year | of formation: 199 | 3 M St | ate o | f legal domicile: NE | | |
| | 11 01 01 | gamzadon | E corporation E mast E Asso | Cidator — Carier P | | | | | | | |
| Pa | art I | Sum | mary | | | | | | | | |
| | | | scribe the organization's mission o | r most significant activities: MISSION IS TO CHANGE LIVES FOR A | BETTER T | OMORROW BY | PROMOT | TNG | THE DEVELOPMENT | | |
| e | | | AINABILITY OF QUALITY AFFORD | | DETTER | OMORROW BI | KONO | 1110 | THE DEVELOT MENT | | |
| E | - | | | | | | | | | | |
| Governance | | | | | | | | | | | |
| Ž O | 2 | Check thi | s box $\blacktriangleright \Box$ if the organization dis | continued its operations or disposed of | f more tha | in 25% of its ne | t assets | | | | |
| | 3 | Number o | of voting members of the governin | g body (Part VI, line 1a) | | | | 3 | 8 | | |
| Activities & | 4 | Number o | of independent voting members of | the governing body (Part VI, line 1b) | | | | 4 | 7 | | |
| <u> </u> | | Total nun | _ | 5 | 44 | | | | | | |
| Act | | Total nun | | 6 | 0 | | | | | | |
| | | | | VIII, column (C), line 12 | | | <u> </u> | 7a | 0 | | |
| | b | Net unrel | ated business taxable income fron | n Form 990-T, line 39 | <u> </u> | · · | | 7b | 0 | | |
| | _ | | | | | Prior Year | 2.660 | | Current Year | | |
| ₫. | | | ions and grants (Part VIII, line 1h) | | | | 3,660 | | 2,950 | | |
| Ravenue | | _ | service revenue (Part VIII, line 2g) | | | · · · · · · · · · · · · · · · · · · · | 34,543 | | 12,527,288 | | |
| œ. | | | nt income (Part VIII, column (A), l renue (Part VIII, column (A), lines ! | • | | 33 | 0 | | 372,622 | | |
| | | | | st equal Part VIII, column (A), line 12) | | 12.76 | 5,416 | | 12,902,860 | | |
| | | | nd similar amounts paid (Part IX, c | | <u> </u> | 1,700 | | 132,061 | | | |
| | l | | | olumn (A), line 4) | | | 0 | | 0 | | |
| S | | | , | nefits (Part IX, column (A), lines 5-10) | , | 6,42 | 6,662 | | | | |
| ıse | | - | | nn (A), line 11e) | | · | 0 | | | | |
| Expenses | ь | Total fundr | raising expenses (Part IX, column (D), I | ine 25) ▶0 | | | | | | | |
| Щ | 17 | Other exp | penses (Part IX, column (A), lines | 2,62 | 2,620,210 2, | | | | | | |
| | 18 | Total exp | enses. Add lines 13–17 (must equ | al Part IX, column (A), line 25) | | 9,16 | 8,572 | | 9,934,609 | | |
| | 19 | Revenue | less expenses. Subtract line 18 fro | om line 12 | | 3,59 | 6,844 | | 2,968,251 | | |
| Ces Ces | | | | | Beg | inning of Currer | t Year | | End of Year | | |
| an a | | | L (B 17 1 16) | | | 46.50 | 1 500 | | F0 47F 200 | | |
| ASS Bass | l | | ets (Part X, line 16) | | | <u> </u> | 1,589 | | 50,175,290 | | |
| Net Assets or Fund Balances | | | ilities (Part X, line 26) | | | · · · · · · · · · · · · · · · · · · · | 32,771 | | 3,557,269 | | |
| | rt II | | s or fund balances. Subtract line 2 ature Block | i from line 20 | | 43,21 | .8,818 | | 46,618,021 | | |
| | | | | ined this return, including accompanyir | ng schedu | les and stateme | ents, and | l to 1 | the best of my | | |
| | edge nowle | | f, it is true, correct, and complete | . Declaration of preparer (other than of | fficer) is b | ased on all info | rmation | of w | hich preparer has | | |
| ally K | HOWIE | uge. | | | | | | | | | |
| | | ***** | k | | | 2020-09-21 | | | | | |
| Sign | | Signati | ure of officer | | | Date | | | | | |
| Here | : | | MAIN CFO | | | | | | | | |
| | | 17 | r print name and title | Droppyor's sign=t | I Data | | DTIN | | | | |
| Da:- | 1 | | rint/Type preparer's name | Preparer's signature | Date | Check if | | 4265 | | | |
| Paid | | \ <u></u> | irm's name DAUBY O'CONNOR & Z | ALESKI LLC | 1 | self-employed Firm's EIN ► | | 664 | | | |
| - | oare On | ;ı ., | | | | | | | | | |
| USE | UII | עי - | irm's address ► 501 CONGRESSIONAL I | 3LVD 300 | | Phone no. (31 | 7) 848-57 | 700 | | | |
| | | | CARMEL, IN 46032 | | | | | | | | |
| Mav t | he IR: | S discuss | this return with the preparer show | vn above? (see instructions) | | | . | 7 v. | es 🗆 No | | |

Cat. No. 11282Y

Form 990 (2019)

| Form | 990 (2019) | | | | | Page |
|------|---------------------------------------|--|----------------------------------|-----------------------------|---|-----------------|
| Pa | rt III Stateme | ent of Program Service | e Accomplis | hments | | |
| | Check if S | Schedule O contains a respo | nse or note to | any line in this Part III . | | 🗹 |
| 1 | Briefly describe t | the organization's mission: | | | | |
| | | QUITY GROUP, INC'S MISSIC UALITY AFFORDABLE HOUSI | | GE LIVES FOR A BETTER | TOMORROW BY PROMOTING THE | DEVELOPMENT AND |
| 2 | Did the organiza | tion undertake any significai | 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 organizat | tion cease conducting, or ma | ake significant | changes in how it conduc | ts, any program | |
| | | | | | | ☐ Yes ☑ No |
| 4 | Describe the org. Section 501(c)(3 | anization's program service | accomplishmer ns are required | to report the amount of | rgest program services, as measu grants and allocations to others, t | |
| 4a | (Code: |) (Expenses \$ | 8,190,017 | including grants of \$ | 132,061) (Revenue \$ | 12,524,592) |
| | See Additional Data | | , , | | , , , , | , , , |
| | | | | | | |
| 4b | (Code: |) (Expenses \$ | | including grants of \$ |) (Revenue \$ |) |
| | | | | | | |
| 4c | (Code: |) (Expenses \$ | | including grants of \$ |) (Revenue \$ |) |
| | | | | | | |
| 4d | Other program s | services (Describe in Schedu | le O.) | | | |
| | (Expenses \$ | inclu | iding grants of | \$ |) (Revenue \$ |) |
| 4e | Total program | service expenses ▶ | 8,190,0 | 17 | | |

16

17

18

19

| | W. Charlist of Dequired Schodules | | | rage . |
|-----|---|-----|-----|--------|
| Par | tiv Checklist of Required Schedules | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2 | 1 | Yes | No |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | No |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 2 | 3 | | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | Yes | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | 5 | | No |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part 2 | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III | 8 | | No |
| 9 | Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | No |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V | 10 | | No |
| .1 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. | | | |
| | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. | 11a | Yes | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | No |
| | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | No |
| 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 in Part X, line 16? If "Yes," complete Schedule D, Part IX 📆 | 11d | | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 | 11e | Yes | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Yes | |
| L2a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | Yes | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Yes | |
| - | To the conservation and add described in a series 470/10/40/2010 16/10/40 // and described 570/10/40/2010 16/10/40/40/40/40/40/40/40/40/40/40/40/40/40 | I | | |

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

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

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

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

Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

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

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

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

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

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

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

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

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

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

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

13

14a

14b

15

16

17

18

19

20a

20b

21

Nο Nο Nο Nο

No

Nο

Nο

Yes

| rm 9 | 990 (2019) | | | Page 4 |
|------|--|-----|-----|--------|
| Part | Checklist of Required Schedules (continued) | | | |
| | | | Yes | No |
| | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | No |
| | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | No |
| | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | No |
| | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III | 27 | | No |
| | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | | No |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | No |
| С | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes,"</i> complete Schedule L, Part IV | 28c | | No |
| 9 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M $ \cdot $ | 29 | | No |
| | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | No |
| 1 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | No |
| | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | Yes | |
| 4 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | Yes | |
| 5a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Yes | |
| | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | Yes | |
| | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | No |
| | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 8 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |
| Pari | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 12 | | | i |

1b

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

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

1c

Yes

| Par | Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | | | |
|--------|--|------------|-----|----|--|--|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | Yes | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | No | | |
| 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 | | | | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? • • • | 4a | | No | | |
| Ь | 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 | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No | | |
| Ь | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | No | | |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | | | |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | No | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | No | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7 c | | No | | |
| | 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 | | No | | |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | No | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | No | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | No | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | | | |
| | 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 b | Gross income from members or shareholders | | | | | |
| b | against amounts due or received from them.) | | | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | | | |
| | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | | | |
| | Enter the amount of reserves on hand | | | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No | | |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | | | |
| | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. | 15 | | No | | |
| 16 | 6 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | | | | | |

| Par | t VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. | " resp | onse to | lines |
|-----------------|---------------|--|------------|---------|-------|
| Se | ction | Check if Schedule O contains a response or note to any line in this Part VI | • • | | • |
| | CCIOII | A. Governing Body and Flanagement | | Yes | No |
| 1a | Enter | the number of voting members of the governing body at the end of the tax year 1a 8 | | | |
| | body, | re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or in committee, explain in Schedule O. | | | |
| b | | the number of voting members included in line 1a, above, who are independent 1b | | | |
| 2 | | ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee, or key employee? | 2 | | No |
| 3 | Did th | ne organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person? | 3 | | No |
| 4 | Did th | ne organization make any significant changes to its governing documents since the prior Form 990 was filed? . | 4 | | No |
| 5 | Did th | ne organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | No |
| 6 | Did th | ne organization have members or stockholders? | 6 | | No |
| 7a | | ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more bers of the governing body? | 7a | | No |
| b | | ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ns other than the governing body? | 7 b | | No |
| 8 | | ne organization contemporaneously document the meetings held or written actions undertaken during the year by ollowing: | | | |
| а | The g | overning body? | 8a | Yes | |
| b | Each | committee with authority to act on behalf of the governing body? | 8 b | Yes | |
| 9 | | ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the dization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | Code | | | | |
| | | · | | Yes | No |
| | | ne organization have local chapters, branches, or affiliates? | 10a | Yes | |
| | and b | s," did the organization have written policies and procedures governing the activities of such chapters, affiliates, ranches to ensure their operations are consistent with the organization's exempt purposes? | 10b | Yes | |
| | form? | | 11a | Yes | |
| | | ibe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| | | ne organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | confli | | 12b | Yes | |
| С | Sched | ne organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done | 12c | Yes | |
| 13 | | ne organization have a written whistleblower policy? | 13 | Yes | |
| 14 | | ne organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | perso | ne process for determining compensation of the following persons include a review and approval by independent ns, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| | | rganization's CEO, Executive Director, or top management official | 15a | Yes | |
| Ь | | officers or key employees of the organization | 15b | Yes | |
| | | s" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | |
| | taxab | ne organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a le entity during the year? | 16a | Yes | ı |
| Ь | in joir | s," did the organization follow a written policy or procedure requiring the organization to evaluate its participation of venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt swith respect to such arrangements? | | | |
| | | · · · · · · · · · · · · · · · · · · · | 16b | Yes | |
| <u>Se</u> 17 | | C. Disclosure ne states with which a copy of this Form 990 is required to be filed▶ | | | |
| -/ | LISCE | OK | | | |
| 18 | only) | on 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | | Own website 🗹 Another's website 🔲 Upon request 🔲 Other (explain in Schedule O) | | | |
| 19 | policy | ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest , and financial statements available to the public during the tax year. | | | |
| 20 | State ▶JAS | the name, address, and telephone number of the person who possesses the organization's books and records: ON MAIN 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 (402) 334-8899 | | | |

KS EXECUTIVE VICE PRESIDEN

VP OF ASSET MANAGEMENT

(17) JORDAN ABBOUD

Part VII

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

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part $\mbox{VII}\,\,$.

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 • 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.

| of reportable compensation from the organization | n and any relate | ed orgai | nizati | ons. | | | | | | |
|--|---|-----------------------------------|--------------------------|-------------------------------|-----------------------|------------------------------|-----------|---|--|---|
| • List all of the organization's former directo organization, more than \$10,000 of reportable co | ompensation fro | m the | | | | | | | | |
| See instructions for the order in which to list the | | | | | | | | | | |
| Check this box if neither the organization no (A) Name and title | (B) Average hours per week (list any hours | Position that pers | on (do an on on is | (C) o not e bot both | t cho x, u h an | | ore er | (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 | Officer | Key employee | Highest compensated employee | Former | (W-2/1099- MISC) | (Ŵ-2/1099- MISC) | organization and related organizations |
| (1) BARRY G SANDSTROM CHAIRMAN | 1.00 | Х | | х | | | | 0 | 0 | 0 |
| (2) DENNIS BRAND VICE CHAIRMAN | 1.00 | Х | | х | | | | 0 | 0 | 0 |
| (3) KIRK KELLNER SECRETARY | 1.00 | X | | х | | | | 0 | 0 | 0 |
| (4) CHRIS HENSLEY DIRECTOR | 1.00 | X | | x | | | | 0 | 0 | 0 |
| (5) FRANK HAYES DIRECTOR | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (6) CHRISTOPHER HITE DIRECTOR | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (7) NICOLE THEOPHILUS DIRECTOR | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (8) DAN LONERGAN DIRECTOR | 1.00 | Х | | | | | | 0 | 0 | 0 |
| (9) JOHN WIECHMANN PRESIDENT AND CEO | 40.00 | Х | | х | | | | 736,366 | 0 | 44,545 |
| (10) JASON MAIN CFO | 40.00 | | | x | | | | 434,513 | 0 | 46,336 |
| (11) ANN BURGE COO | 40.00 | | | x | | | | 426,175 | 0 | 35,043 |
| (12) BECKY CHRISTOFFERSEN | 40.00 | | | х | | | | 464,723 | 0 | 41,175 |
| CIO | 5.00 | | | | | | | | | |
| (13) TOM STRATMAN VP OF ACQUISITIONS | 40.00 | | | х | | | | 283,008 | 0 | 33,033 |
| (14) ANDREA FRYMIRE OK EXECUTIVE VICE PRESIDEN | 40.00 | | | x | | | | 184,070 | 0 | 30,813 |
| (15) SCOTT FITZPATRICK NE EXECUTIVE VICE PRESIDEN | 40.00 | | | х | | | | 138,567 | 0 | 21,116 |
| (16) PATRICK MICHAELIS | 40.00 | | | х | | | | 230,483 | 0 | 32,460 |

40.00

17,726

161,799

| Form 990 (2019) | | | | | | | | | | | | Page 8 | | | | | | |
|--|--|---|--|----------------|--|------------------------------|-------------|------------------|---|---------------|---|-----------------------------------|--|---|--|---|--|--------|
| Part VII Section A. Officers, Directors, | | ey Em | ploy | | | d Hig | hes | 1 | 1 | (con | | | | | | | | |
| (A) Name and title | (B) Average hours per week (list any hours for related | is both an officer and a from to director/trustee) organiza | | | | | | | n compensation from relate n organization | on d ns | Estima amount o compens from organizati | ated If other sation the | | | | | | |
| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | MISC) | MISC | | relat organiza | ed | | | | | | |
| (18) SHANNON FOSTER | . 40.00 | | | [' | [] | Х | | 138,8 | .841 | 0 | | 23,432 | | | | | | |
| ACCOUNTING MANAGER (19) CINDY KOSTER | | | <u></u> | ' | ₩ | | \vdash | | | | | | | | | | | |
| SENIOR ACQUISITIONS MANAGE (20) JAKE JACOBSEN | 40.00 | | <u> </u> | <u> </u> | <u> </u> | Х | \bigsqcup | 125,4 | .492 | 0 | | 22,045 | | | | | | |
| CONSTRUCTION MANAGER (21) ANWER SAMMY EHTISHAM | 40.00 | | <u> </u> | Ĺ′ | <u> </u> | Х | \bigsqcup | 120,5 | .556 | 0 | | 15,416 | | | | | | |
| ` ' | . 40.00 | | ' | ' | | x | | 140,3 | ,389 | 0 | | 27,211 | | | | | | |
| (22) LAURIE STEPHENSON | 40.00 | | | H | | х | | 105,4 | ,485 | 0 | | 23,631 | | | | | | |
| (23) MICHAEL POWLEY | 40.00 | | | | | х | | 100,8 | ,859 | 0 | | 0 | | 0 | | 0 | | 21,317 |
| (24) BRADLEY REIFF | 40.00 | | | | | × | | 107,6 | 671 | 0 | | 17,777 | | | | | | |
| ACQUISITIONS MANAGER | | | <u> </u> | —' | <u></u> —' | <u> </u> | \sqcup | , | | | | | | | | | | |
| (25) JOSHUA YUREK | 40.00 | <u> </u> | ' | ' | | x | | 132,3 | ,359 | 0 | | 16,193 | | | | | | |
| DIRECTOR OF GOVERNMENT AFFAIRS | | | + | ⊢' | \vdash | \square | \square | | | | | | | | | | | |
| 1b Sub-Total | | | <u>ب</u> ــا | <u>—</u> | <u> </u> | ' ' | ш | | | op | | | | | | | | |
| c Total from continuation sheets to Part VI | II, Section A | | | , | • | • | _ | | | | | | | | | | | |
| d Total (add lines 1b and 1c) | | | | | | <u>•</u> | | 4,031,356 | | 0 | | 469,269 | | | | | | |
| Total number of individuals (including but of reportable compensation from the organ | | those lis | sted a | abov | /e) w | /ho red | ceive | ed more than \$1 | 100,000 | | | | | | | | | |
| | | | | — | | | — | | | | Yes | No | | | | | | |
| 3 Did the organization list any former office line 1a? <i>If "Yes," complete Schedule J for s</i> | | | key e | emp! | loye [,] | e, or h | nighe | est compensated | d employee on | 3 | 100 | No No | | | | | | |
| 4 For any individual listed on line 1a, is the sorganization and related organizations gre | sum of reporta | ble com | | | | | | | m the | | | INO | | | | | | |
| individual | | · . | | • | • | • | • | | | 4 | Yes | | | | | | | |
| 5 Did any person listed on line 1a receive or services rendered to the organization? <i>If</i> "Y | • | | | • | • | | _ | - | dividual for | 5 | | No | | | | | | |
| Section B. Independent Contractors | | | | _ | _ | | | | | | | | | | | | | |
| 1 Complete this table for your five highest or from the organization. Report compensation | | | | | | | | | | mpen | sation | | | | | | | |
| | (A) | iddi , c. | ai c | 41115 | ***** | 101 | | T | (B) | | (C) | | | | | | | |
| DAUBY O'CONNOR & ZALESKI | usiness address | | | — | — | | | | and TAX SERVICES | | Compen: | 233,435 | | | | | | |
| 501 CONGRESSIONAL BLVD SUITE 300 CARMEL, IN 46032 | | | | _ | | | | | | | | | | | | | | |
| MRI SOFTWARE LLC | | _ | _ | _ | _ | _ | _ | DATA MANA | AGEMENT | _ | | 452,071 | | | | | | |
| 28925 FOUNTAIN PARKWAY SOLON, OH 44139 KUTAK ROCK LLP | | | | | | | | LEGAL SER' | RVICES | | | 146,851 | | | | | | |
| 1650 FARNAM STREET OMAHA, NE 68102 | | | | | | | | | | | | | | | | | | |
| SPECTRUM ENTERPRISES INC | | | | | | | | FILE REVIE | €W | | | 124,022 | | | | | | |
| 545 SHORE RD CAPE ELIZABETH, ME 04107 LUTZ TECHNOLOGY | | | | | | | | INFORMAT | TION TECHNOLOGY | | | 120,176 | | | | | | |
| 13616 CALIFORNIA STREET STE 300 OMAHA, NE 68154 | | | | | | | | | | | | | | | | | | |
| 2 Total number of independent contractors (incompensation from the organization ▶ 5 | cluding but not | : limited | 1 to tr | nose | : liste | ed abo | ive) | who received m | nore than \$100,00 | 00 ot | | | | | | | | |

| | | (2019) | | | | | | | | Page 9 |
|---|------------|---|----------|----------------|--------------|-------------------------|--------------------------|--|---|--|
| Part | VIII | - | | | recno | onse or note to an | y line in this Part VIII | | | П |
| | | Check if Sched | uule (| o contains a | respo | onse of note to an | (A) Total revenue | (B) Related or exempt function | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| | 1 a | Federated campa | aigns | | 1 a | | | revenue | | 312 - 314 |
| nts | ı | b Membership dues | s. | . [| 1 b | | | | | |
| Gra mo | (| c Fundraising even | nts . | . [| 1c | | | | | |
| Ę (Ł | | d Related organiza | tions | ĺ | 1d | | | | | |
| ila Sila | | e Government grants | (cont | ributions) | 1e | | | | | |
| ns, Sin | 1 | F All other contributio | | | | | | | | |
| utic Te | | and similar amounts above | | L | 1f | 2,950 | | | | |
| 를 | 9 | Noncash contributio lines 1a - 1f:\$ | ons inc | cluded in | 1 g | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | ١, | h Total. Add lines : | 1a-1f | · | | • | | | | |
| | | | | | | Business Code | 2,950 | | | |
| | 2a | ACQUISITION/ADVIS | ORY | | | 531110 | 9,621,830 | 9,621,830 | | |
| e E | | | | | | 331110 | 1,460,564 | 1,460,564 | | |
| leve | b | MONITORING FEES | | | | 531110 | 1,400,504 | 1,400,304 | | |
| 02 02 | c | ASSET MGMT FEES | | | | 531110 | 685,275 | 685,275 | | |
| rvic | | ORGANIZATION/OFFE | EDING | | | | 559,038 | 559,038 | | + |
| Program Service Revenue | a | ORGANIZATION/OFFE | EKING | 1 | | 531110 | , | , | | |
| grar | е | MISCELLANEOUS INC | COME | | | 531110 | 182,507 | 182,507 | | |
| ě. | | | | | | | 18,074 | 18,074 | | + |
| | f | All other program | servi | ce revenue. | | | 10,071 | 10,0, | | |
| | | Total. Add lines 2 | | | | 12,527,288 | | | T | |
| | | Investment income imilar amounts) | | | ends, i • | nterest, and other f | 375,31 | 8 | | 375,318 |
| | 4 | Income from invest | tment | t of tax-exer | mpt bo | ond proceeds 1 | > | | | |
| | 5 | Royalties | <u>.</u> | | | | <u> </u> | | | |
| | | | | (i) Rea | ıl | (ii) Personal | \dashv | | | |
| | | Gross rents | 6a | | | | | | | |
| | b | Less: rental expenses | 6b | | | | | | | |
| | c | Rental income | | | | | | | | |
| | d | or (loss) Net rental income | 6c | loss) | | | _ | | | |
| | | Tree remaining | | (i) Securi | | (ii) Other | | | | |
| | 7a | Gross amount | _ | | | 20.61 | | | | |
| | | from sales of assets other than inventory | 7a | | | 29,65 | 50 | | | |
| | h | Less: cost or | | | | | | | | |
| | _ | other basis and sales expenses | 7b | | | 32,34 | 6 | | | |
| | _ | Gain or (loss) | 7c | | | -2,69 | 26 | | | |
| | | I Net gain or (loss) | | | | <u> </u> | -2,69 | -2,696 | 5 | |
| ۸. | | Gross income from fu | | | | | | | | |
| Ju H | | (not including \$ contributions reported | d on li | of ine 1c). | | | | | | |
| eve | | See Part IV, line 18 | • | | 8a | | | | | |
| Other Revenue | | Less: direct expen | | | 8b | | | | | |
| the | C | Net income or (los | ss) fro | om fundraisi | ng ev | ents 🕨 | | | | |
| | 9a | Gross income from | | | 1 | | | | | |
| | 1 | See Part IV, line 19 | | | 9a 9b | | | | | |
| | | Less: direct expen Net income or (los | | | | ies 🕨 | | | | |
| | | | , | ···· 9-····· 9 | | | | | | |
| | 10a | Gross sales of inve returns and allowa | | | 10- | | | | | |
| | b | Less: cost of good | | | 10a 10b | | | | | |
| | | Net income or (los | | | | | _ | | | |
| | | Miscellaneo | us Re | evenue | | Business Code | | | | |
| | 11 | a | | | | | | | | |
| | | | | | | | | - | | |
| | b | • | | | | | | | | |
| | _ | | | | | | | 1 | | |
| | c | i | | | | | | | | |
| | ام | All other revenue | | | | | | + | | |
| | | Total. Add lines 1 | | | | • | | | | |
| | | Total revenue. S | | | | | | 1 | | + |
| | | | | | | | 12,902,86 | 12,524,592 | 2 | 0 375,318 Form 990 (2019) |

| Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX | | | | | | | | |
|---|--------------------|------------------------------|-------------------------------------|--------------------------|--|--|--|--|
| o not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses | | | | |
| Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 132,061 | 132,061 | 3 . | | | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | | | | | | | | |
| 4 Benefits paid to or for members | | | | | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 3,161,115 | 3,161,115 | | | | | | |
| 6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | | | | | | | | |
| 7 Other salaries and wages | 2,756,506 | 2,756,506 | | | | | | |
| 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 503,209 | 503,209 | | | | | | |
| 9 Other employee benefits | 439,802 | 439,802 | | | | | | |
| 0 Payroll taxes | 314,183 | 314,183 | | | | | | |
| 1 Fees for services (non-employees): | | • | | | | | | |
| a Management | | | | | | | | |
| b Legal | 34,524 | 34,524 | | | | | | |
| c Accounting | 22,085 | · | 22,085 | | | | | |
| d Lobbying | 37,200 | 37,200 | • | | | | | |
| e Professional fundraising services. See Part IV, line 17 | , | , | | | | | | |
| f Investment management fees | | | _ | | | | | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 862,681 | | 862,681 | | | | | |
| 2 Advertising and promotion | 35,073 | 35,073 | | | | | | |
| 3 Office expenses | 366,760 | 16,059 | 350,701 | | | | | |
| | 300,700 | 10,033 | 330,761 | | | | | |
| | | | | | | | | |
| 5 Royalties | 337,332 | | 337,332 | | | | | |
| 6 Occupancy | 58,765 | 58,765 | 337,332 | | | | | |
| 7 Travel | 36,763 | 38,703 | | | | | | |
| 8 Payments of travel or entertainment expenses for any federal, state, or local public officials . | | | | | | | | |
| 9 Conferences, conventions, and meetings | 567,371 | 567,371 | | | | | | |
| 0 Interest | 3,990 | 3,990 | | | | | | |
| 1 Payments to affiliates | | | | | | | | |
| 2 Depreciation, depletion, and amortization | 146,146 | | 146,146 | | | | | |
| 3 Insurance | 25,647 | | 25,647 | | | | | |
| 4 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 | 130,159 | 130,159 | | | | | | |
| b | | | | | | | | |
| С | | | | | | | | |
| d | | | | | | | | |
| e All other expenses | | | | | | | | |
| 5 Total functional expenses. Add lines 1 through 24e | 9,934,609 | 8,190,017 | 1,744,592 | | | | | |
| 6 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). | | | | | | | | |

Form 990 (2019)

Liabilities

Fund Balances

ō 29

Assets 30

27

28

31

32

33

Beginning of year

6

7

8

9

10c

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12

13

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15

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17

18

19

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21

22

23

24

25

26

27

28

29

30

31

32

33

9.186.424

516,330

583,685

1,700,000

52,584

46,501,589

2,574,941

658.268

49,562

3.282.771

43,218,818

43,218,818

46,501,589

Page **11**

12.270.568

536,412

567,393

2,472,500

15,573

50,175,290

2,795,262

704.891

57,116

3.557.269

46,618,021

46,618,021

50,175,290

Form 990 (2019)

End of year

| 1 | Cash-non-interest-bearing | 797,781 | 1 | 776,488 |
|---|---|------------|---|------------|
| 2 | Savings and temporary cash investments | 7,408,233 | 2 | 6,650,729 |
| 3 | Pledges and grants receivable, net | | 3 | |
| 4 | Accounts receivable, net | 26,256,552 | 4 | 26,885,627 |
| 5 | Loans and other payables to any current or former officer, director, trustee, | | | |

1,273,025

705,632

key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . . Assets

Inventories for sale or use . Prepaid expenses and deferred charges .

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Investments—publicly traded securities .

10a Land, buildings, and equipment: cost or other 10a

11 12 Investments—other securities. See Part IV, line 11 . 13 Investments—program-related. See Part IV, line 11

10b Intangible assets .

14 15 Other assets. See Part IV, line 11 . . . 16 **Total assets.** Add lines 1 through 15 (must equal line 34)

17 Accounts payable and accrued expenses

Grants payable .

18 19 Deferred revenue . . . 20

Tax-exempt bond liabilities . 21

Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

or family member of any of these persons

22 23

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties

24

and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D

Total liabilities. Add lines 17 through 25 . .

25 26

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

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

Organizations that follow FASB ASC 958, check here ▶

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

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

Retained earnings, endowment, accumulated income, or other funds

| Form | 990 (2019) | | | | Page 12 | |
|------|---|----------|-----|-----|----------------|--|
| Pa | Reconcilliation of Net Assets | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 12 | ,902,860 | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | ,934,609 | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 2,968,251 | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | ,218,818 | |
| 5 | Net unrealized gains (losses) on investments | 5 | | | 430,952 | |
| 6 | Donated services and use of facilities | 6 | | | | |
| 7 | Investment expenses | 7 | | | | |
| 8 | Prior period adjustments | 8 | | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule 0) | 9 | | | 0 | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | | 46 | 618,021 | |
| Pa | TXII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | ✓ | |
| | cheater schedule s contains a response of flore to any line in this rate at it. | | | Yes | No | |
| 1 | Accounting method used to prepare the Form 990: | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | No | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: | on a | | | | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Yes | | |
| | If `Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: | basis, | | | | |
| | ☐ Separate basis ☐ Both consolidated and separate basis | | | | | |
| С | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Yes | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Scho | edule O | . [| | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si | ngle | | | | |

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b Form **990** (2019)

Additional Data

Software ID:

Software Version:

PROJECTS RANGED FROM AN 8 UNIT RURAL DEAL TO A 159-UNIT URBAN DEAL IN COLORADO, REPRESENTING 35 MIDWEST COMMUNITIES.

EIN: 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

Form 990 (2019)

Form 990, Part III, Line 4a:

MIDWEST HOUSING EQUITY GROUP, INC. (MHEG) PROVIDES ACQUISITION, ADVISORY AND ASSET MANAGEMENT SERVICES PRIMARILY BY ACTING AS THE GENERAL PARTNER OF APPROXIMATELY 47 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 2019, MHEG PARTNERED WITH 34 DEVELOPERS TO CLOSE OVER \$175 MILLION IN EQUITY FOR 44 DEVELOPMENTS, CREATING 1,924 AFFORDABLE HOUSING UNITS. THIS INCLUDED 15 AGE RESTRICTED DEVELOPMENTS, 23 MULTIFAMILY DEVELOPMENTS, FOUR SINGLE FAMILY HOME PROPERTIES, AND TWO SPECIAL NEEDS HOUSING DEVELOPMENTS.

| efile GRAPHIC print - DO NOT | | | <u> 1t - DO NOT PRO</u> | CESS | As Filed Data - | | | DLN: 9 | 3493265014030 |
|------------------------------|---------|--|--|-------------------------------|--|--|------------------------------------|--|---|
| SCI | HED | ULE A | Du | hlic (| harity Statu | e and Dul | olic Supp | ort | OMB No. 1545-0047 |
| (F 000 | | | Complete | if the or | ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form 9 | ion 501(c)(3) c empt charitable 990 or Form 99 | organization or trust. 0-EZ. | · a section | 2019 |
| | | f the Treasury | ► Go to <u>u</u> | <u>vww.irs.</u> | <i>gov/Form</i> 990 for i | nstructions and | I the latest info | ormation. | Open to Public Inspection |
| Nam | e of th | he organiza DUSING EQUIT | | | | | | Employer identific | ation number |
| MIDW | L31 110 | JOSING EQUIT | GROOF INC | | | | | 47-0767984 | |
| | rt I | | | | s (All organization it is: (For lines 1 thro | | | See instructions. | |
| 1 1 | organiz | | • | | • | - | | (A)(i) | |
| 2 | | A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) | | | | | | | |
| _ | | | | | | , | , , | :::> | |
| 3 | | · | · | | ice organization desc | | | - | anton the color of the He |
| 4 | Ш | name, city, | | n operate | d in conjunction with | a nospital descri | bed in section : | 170(b)(1)(A)(iii). E | nter the hospital's |
| 5 | | | ation operated for th (iv). (Complete Part | | of a college or unive | rsity owned or op | perated by a gov | ernmental unit descri | bed in section 170 |
| 6 | | A federal, s | tate, or local govern | ment or | governmental unit de | scribed in sectio | on 170(b)(1)(A | ı)(v). | |
| 7 | | | ation that normally r (0(b)(1)(A)(vi). (0 | | | s support from a | governmental u | nit or from the gener | al public described in |
| 8 | | | | • | 170(b)(1)(A)(vi). | (Complete Part I | I.) | | |
| 9 | | | | | scribed in 170(b)(1) e instructions. Enter | | | | ege or university or a |
| 10 | ✓ | from activit | ies related to its exe | empt fund ed busine | ctions—subject to cer ess taxable income (le | tain exceptions, | and (2) no more | is, membership fees, than 331/3% of its su ses acquired by the c | |
| 11 | | An organiza | ation organized and | operated | exclusively to test fo | r public safety. S | ee section 509 | (a)(4). | |
| 12 | | more public | ly supported organi | zations de | | 09(a)(1) or sec | ction 509(a)(2 | s of, or to carry out th). See section 509(a s 12e, 12f, and 12g. | |
| a | | Type I. A so | supporting organizat | ion opera gularly ap | ted, supervised, or c | ontrolled by its s | upported organiz | zation(s), typically by of the supporting orga | |
| b | | Type II. A manageme | supporting organiza | ition supe organiza | tion vested in the sar | | | organization(s), by havinge the supported orga | |
| С | | Type III f | unctionally integra | ated. A su | | | | nd functionally integra | ted with, its |
| d | | Type III n | on-functionally in integrated. The org | tegrated Janization | . A supporting organi | zation operated fy a distribution | in connection wi | th its supported orgar an attentiveness req | |
| е | | Check this | box if the organizati | on receiv | | ation from the I | | pe I, Type II, Type II | I functionally |
| f | Enter | r the number | of supported organ | izations | | | | <u> </u> | |
| g | | | | | oported organization(| | | | I |
| | (i) N | Name of supported of the second of the secon | | EIN | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | (iv) Is the org in your govern | anization listed ing document? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | | | | Yes | No | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Tota | | | tion Act Notice, se | | | Cat. No. 11285 | | Schedule A (Form 9 | |

| Sch | edule A (Form 990 or 990-EZ) 2019 | | | | | | Page 2 |
|-------------|---|----------------------------|---|--|--|--|-----------------|
| P | art II Support Schedule for | Organizations | Described in S | Sections 170(b |)(1)(A)(iv) ar | nd 170(b)(1)(A | (vi) |
| | (Complete only if you ch | | | | | | under Part III. |
| | If the organization failed | to qualify unde | r the tests listed | below, please | complete Part I | II.) | |
| | ection A. Public Support Calendar year | | I | | | | |
| | (or fiscal year beginning in) ▶ | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not include any "unusual grant.") | | | | | | |
| 2 | Tax revenues levied for the | | | | | | |
| _ | organization's benefit and either paid | | | | | | |
| _ | to or expended on its behalf The value of services or facilities | | | | | | |
| 3 | 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. | | | | | | |
| <u>s</u> | ection B. Total Support | | T | | 1 | 1 | |
| | Calendar year (or fiscal year beginning in) ▶ | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (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 | | | | | | |
| 10 | business is regularly carried on Other income. Do not include gain or | | | | | | - |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.). | | | | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | |
| 13 | First five years. If the Form 990 is for | or the organization | 's first, second, th | ird, fourth, or fifth | n tax year as a sec | tion 501(c)(3) org | anization, |
| | check this box and stop here | | | | | ▶ [| |
| S | ection C. Computation of Publi | | | | | | |
| 14 | Public support percentage for 2019 (li | ne 6, column (f) di | vided by line 11, | column (f)) | | 14 | - |
| 15 | Public support percentage for 2018 Sc | hedule A, Part II, | line 14 | | | 15 | |
| 16a | 33 1/3% support test—2019. If the | | | | | | |
| | and stop here. The organization qual | ifies as a publicly s | supported organiza | ation | | | ▶□ |
| b | 33 1/3% support test—2018. If th | e organization did | not check a box o | on line 13 or 16a, | and line 15 is 33 i | 1/3% or more, chec | k this |
| | box and stop here. The organization | qualifies as a pub | licly supported or | ganization | | | ▶ 🗆 |
| 17 a | 10%-facts-and-circumstances tes | t— 2019. If the org | ganization did not | check a box on lin | ne 13, 16a, or 16b | , and line 14 | |
| | is 10% or more, and if the organization in Part VI how the organization meets | n meets the facts | i-and-circumstanci cumstances" test. | es test, check thi The organization | s box and stop n e qualifies as a publ | e re. Explain icly supported | |
| | organization | | | - | | | ►□ |
| h | 10%-facts-and-circumstances tes | st— 2018. If the o | rganization did no | t check a box on I | ine 13, 16a, 16b, | or 17a, and line | |
| _ | 15 is 10% or more, and if the organiz | zation meets the "i | facts-and-circums | tances" test, chec | k this box and sto | p here. | |
| | Explain in Part VI how the organization | | | - | | • • | . \Box |
| _ | supported organization | | haven 15 40-4 | C- 10b 47 4 | 76 | | ▶⊔ |
| 18 | _ | | | | | | . □ |
| | instructions | | <u> </u> | | - Cabadu | lo A (Form 000 o | ▶ ⊔ |

| the organization fails t tion A. Public Support Calendar year r fiscal year beginning in) ▶ | | he tests listed b | elow, please co | mplete Part II.) | | |
|---|---|--|---|---|---|---|
| Calendar year r fiscal year beginning in) ▶ | | | | | | |
| r fiscal year beginning in) 🕨 | | | | | T | |
| | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| Gifts, grants, contributions, and nembership fees received. (Do not not not not not not not not not no | 66,063 | 34,116 | | 43,660 | 2,950 | 146,789 |
| Gross receipts from admissions, nerchandise sold or services performed, or facilities furnished in any activity that is related to the | 9,434,678 | 10,227,846 | 11,117,275 | 12,384,542 | 12,527,286 | 55,691,627 |
| oross receipts from activities that are not an unrelated trade or ausiness under section 513 | | | | | | |
| ax revenues levied for the rganization's benefit and either laid to or expended on its behalf | | | | | | |
| The value of services or facilities urnished by a governmental unit to the organization without charge | | | | | | |
| otal. Add lines 1 through 5 | 9,500,741 | 10,261,962 | 11,117,275 | 12,428,202 | 12,530,236 | 55,838,416 |
| mounts included on lines 1, 2, and | | | | | | 0 |
| mounts included on lines 2 and 3 eceived from other than | | | | | | 0 |
| reater of \$5,000 or 1% of the mount on line 13 for the year. | | | | | | |
| Public support. (Subtract line 7c rom line 6.) | | | | | | 55,838,416 |
| • | T- | | | | | |
| | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| | 9,500,741 | 10,261,962 | 11,117,275 | 12,428,202 | 12,530,236 | 55,838,416 |
| Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 225,431 | 155,666 | 178,875 | 337,361 | 375,318 | 1,272,651 |
| Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. | | | | | | |
| Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the | 225,431 | 155,666 | 178,875 | 337,361 | 375,318 | 1,272,651 |
| Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| Total support. (Add lines 9, 10c, | 9,726,172 | 10,417,628 | 11,296,150 | 12,765,563 | 12,905,554 | 57,111,067 |
| First five years. If the Form 990 is f | - | | | , | () () | anization, ▶ □ |
| tion C. Computation of Public | | | | | | |
| Public support percentage for 2019 (I | | | olumn (f)) | | 15 | 97.770 % |
| | Schodulo A Part II | I, line 15 | | | 16 | 97.930 % |
| Public support percentage from 2018 | Scriedule A, Fait II | | | | | |
| | | Percentage | | | | |
| Public support percentage from 2018 | tment Income I | | ne 13, column (f) |) | 17 | 2.230 % |
| Public support percentage from 2018 | tment Income I 19 (line 10c, colun 2018 Schedule A, F | nn (f) divided by li Part III, line 17 . | | | 18 | 2.070 % |
| | erformed, or facilities furnished in ny activity that is related to the reganization's tax-exempt purpose iross receipts from activities that re not an unrelated trade or usiness under section 513 ax revenues levied for the reganization's benefit and either aid to or expended on its behalf | erformed, or facilities furnished in ny activity that is related to the rganization's tax-exempt purpose irross receipts from activities that re not an unrelated trade or usiness under section 513 | erformed, or facilities furnished in ny activity that is related to the rganization's tax-exempt purpose iross receipts from activities that re not an unrelated trade or usiness under section 513 | erformed, or facilities furnished in ny activity that is related to the rganization's tax-exempt purpose cross receipts from activities that re not an unrelated trade or usiness under section 513 | erformed, or facilities furnished in yactivity that is related to the reganization's tax-exempt purpose ross receipts from activities that re not an unrelated trade or usiness under section 513 | erformed, or facilities furnished in y,434,678 10,227,846 11,117,275 12,384,542 12,527,286 prigarization's tax-exempt purpose ross receipts from activities that re not an unrelated trade or usiness under section 513 ax revenues levied for the granization's benefit and either aid to or expended on its behalf and either aid to or expended on its behalf aid to or expended on secretary or expended on the state of spot or the order than squalified persons mounts included on lines 2 and 3 secretary or expended on the state of spot or the word of the mount on line 13 for the year. Add lines 7 and 7b. **Lublic support** (Subtract line 7c order line 6 **Calendar year** or fiscal year beginning in part of the word of the mounts from line 6 **Stores income from interest, dividends, payments received on securities loans, rents, royalies and income from similar sources **Unrelated business taxable income less section 511 taxes) from businesses acquired after June 30, 1975. **Add lines 10 and 10b.** **Vet income from unrelated on the sale of capital assets (Explain in Part VI.). **Description** or the business is explairly carried on . **Other income. Do not included in line 10b, whether or not the business is regularly carried on . **Description** or the sale of capital assets (Explain in Part VI.). **Total support** (Add lines 9, 10c, 9 26, 172 10, 147, 628 11, 296, 150 12, 276, 553 12, 295, 553 12, 295, 553 12, 295, 553 12, 295, 553 12, 295, 553 12, 295, 553 12, 295, 553 12, 295, 553 12, |

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

provide detail in Part VI. 9a

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

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

```
Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
```

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

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

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

| | edule A (101111 330 01 330 E2) 2013 | | | age 3 |
|----|--|--------|---------|-------|
| Pa | rt IV Supporting Organizations (continued) | | | |
| _ | | | Yes | No |
| | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | | | |
| | | 11a | | |
| | A family member of a person described in (a) above? | 11b | | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI . | 11c | | |
| S | ection B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that | - | | |
| 2 | operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting | 2 | | |
| | organization. | | | |
| S | ection C. Type II Supporting Organizations | | | |
| _ | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of | | | |
| | each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the | 1 | | |
| | supporting organization was vested in the same persons that controlled or managed the supported organization(s). | | | |
| S | ection D. All Type III Supporting Organizations | | v | |
| _ | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing | | | |
| | documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | | | |
| 2 | | | | |
| _ | | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax | | | |
| | year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| S | ection E. Type III Functionally-Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction) | ions): | | |
| | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| | b | | | |
| • | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see | instru | ctions) | |
| 2 | Activities Test. Answer (a) and (b) below. | ſ | Yes | No |
| • | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| ı | 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 Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard. | 3h | | |

3b

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

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

| 5 | Qualified set-aside amounts (prior IRS approval require | ed) | | |
|----|---|-----------------------------|----------------------------|------------------------|
| 6 | Other distributions (describe in Part VI). See instruction | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | |
| 8 | Distributions to attentive supported organizations to whe details in Part VI). See instructions | sive (provide | | |
| 9 | Distributable amount for 2019 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by Line 9 amount | | | |
| | Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions | (iii) Distributable |

| 115 | | | | |
|---|--|---|--|--|
| 7 Total annual distributions. Add lines 1 through 6. | | | | |
| Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions | | | | |
| Distributable amount for 2019 from Section C, line 6 | | | | |
| 10 Line 8 amount divided by Line 9 amount | | | | |
| | | | | |
| (i) Excess Distributions | (ii) Underdistributions Pre-2019 | (iii) Distributable Amount for 2019 | | |
| | Underdistributions | Distributable | | |
| | | | | |

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

3 Excess distributions carryover, if any, to 2019:

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

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

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

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

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

a From 2014. **b** From 2015. c From 2016. **d** From 2017. e From 2018. f Total of lines 3a through e

instructions)

See instructions.

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

\$

| Schedule A (| Form 990 or 990-EZ) 2 | 2019 Page 8 | | | | | | | | |
|------------------------------|---|---|--|--|--|--|--|--|--|--|
| Part VI | Section A, lines 1, 2, Part IV, Section D, lin | mation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 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; es 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 and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See | | | | | | | | |
| Facts And Circumstances Test | | | | | | | | | | |
| | | | | | | | | | | |
| 990 Sched | dule A, Supplemen | tal Information | | | | | | | | |
| Ret | urn 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 \$2,696. THE LOSS IS NOT BEING INCLUDED ON SCHEDULE A, PART III, L INE 12 BECAUSE IT DOES NOT MEET THE DEFINITION OF SUPPORT AS DEFINED IN SECTION 509(D) OF THE INTERNAL REVENUE CODE. | | | | | | | | |

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493265014030

Inspection

Department of the Treasury Internal Revenue Service

If "Yes," describe in Part IV.

SCHEDULE C (Form 990 or 990-

EZ)

2

3

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** MIDWEST HOUSING EQUITY GROUP INC 47-0767984 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No Was a correction made? ☐ Yes □ No

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the names, addresses and employer identification number (FIN) of all section 527 political organizations to which the filing

Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b......... Did the filing organization file Form 1120-POL for this year?

| | of political contributions received | each organization listed, enter the amo that were promptly and directly delivere ee (PAC). If additional space is needed, p | d to a separate p | olitical organization, such a | |
|---|-------------------------------------|---|-------------------|---|--|
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| | | | i | | |

20,200

135,167

20,200

25,200

141,369

25,200

121,973

153,167

37,200

168,834

161,683

37,200 Schedule C (Form 990 or 990-EZ) 2019

3,548,310

336,207

591,386

887,079

Lobbying ceiling 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

| or e | Form 5768 (election u | 1i below, provide in Part IV a detailed description of the lobbying | (| a) | | (b) | |
|------|--|--|-----------------|-------------------|---------------|---------------|-----|
| ctiv | | In below, provide in variety a detailed description of the lobbying | Yes | No | Δ | mour | nt |
| 1 | | tion attempt to influence foreign, national, state or local legislation, lic opinion on a legislative matter or referendum, through the use of: | | | | | |
| а | Volunteers? | | | | | | |
| b | Paid staff or management (include com | npensation in expenses reported on lines 1c through 1i)? | | | 1 | | |
| c | Media advertisements? | | | | 1 | | |
| d | Mailings to members, legislators, or the | e public? | | | | | |
| e | Publications, or published or broadcast | statements? | | | | | |
| f | Grants to other organizations for lobby | ing purposes? | | | | | |
| g | Direct contact with legislators, their sta | affs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, con | ventions, speeches, lectures, or any similar means? | | | | | |
| i | Other activities? | | | | | | |
| j | Total. Add lines 1c through 1i | | | | | | |
| 2a | Did the activities in line 1 cause the or | ganization to be not described in section 501(c)(3)? | | | | | |
| b | If "Yes," enter the amount of any tax is | ncurred under section 4912 | | | 1 | | |
| C | If "Yes," enter the amount of any tax is | ncurred by organization managers under section 4912 | | | | | |
| d | If the filing organization incurred a sec | tion 4912 tax, did it file Form 4720 for this year? | | | | | |
| Par | | zation is exempt under section 501(c)(4), section 501(c) | (5), o | r sect | ion | | |
| | 501(c)(6). | | | | | | |
| _ | W | | | _ | | Yes | No |
| 1 | , , , | lues received nondeductible by members? | | - | 1 | | |
| 2 | | se lobbying expenditures of \$2,000 or less? | | L | 2 | | |
| 3 | | er lobbying and political expenditures from the prior year? | | | 3 | | |
| 'ar | | zation is exempt under section 501(c)(4), section 501(c)(Part III-A, lines 1 and 2, are answered "No" OR (b) Part | | | | 01(C |)(6 |
| 1 | | s from members | 1 | | | | |
| 2 | • | and political expenditures (do not include amounts of political | _ | | | | |
| а | | | 2a | | | | |
| b | , | | 2b | | | | |
| С | | | 2c | | | | |
| 3 | | 6033(e)(1)(A) notices of nondeductible section 162(e) dues . | 3 | | | | |
| 4 | the organization agree to carryover to | n line 2c exceeds the amount on line 3, what portion of the excess does the reasonable estimate of nondeductible lobbying and political | 4 | | | | |
| 5 | ' | al expenditures (see instructions) | 5 | | | | |
| Pä | art IV Supplemental Informa | tion | | | | | |
| | | A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); Inplete this part for any additional information. | Part II- | ·A, lines | 1 and | d 2 (se | e |
| | Return Reference | Explanation | | | | | |
| ART | AFFA ISSU EXPE | BYING EXPENDITURES INCLUDE THE SALARY AND BENEFITS OF MHEG'S INC. IRS. THE DIRECTOR EDUCATES FEDERAL LEGISLATORS, STAFF AND ADMIES AND RESOURCES RELATED TO AFFORDABLE HOUSING PRODUCTION, INDITURES ALSO INCLUDE MONEY SPENT TO ADVOCATE FOR AND MAINTOURCES IN NEBRASKA. | MINIST INCLU | RATION JDING T | OFFI HE LI | CIALS HTC. | ON |

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

As Filed Data -

DLN: 93493265014030

OMB No. 1545-0047

(Form 990)

Department of the Treasury

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.

2019 Open to Public

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information

| Na | me of the organization | | | Em | oloyer iden | tification | number |
|--------|--|----------------------|-----------------------|----------|----------------|------------|-------------|
| טנוייו | WEST HOUSING EQUITY GROUP INC | | | 47-0 | 767984 | | |
| Pa | rt I Organizations Maintaining Donor Advised For Complete if the organization answered "Yes" on | | | or Acc | ounts. | | |
| | Complete if the organization answered fes on | (a) Donor adv | | | (b) Funds a | and other | accounts |
| 1 | Total number at end of year | | | | | | |
| 2 | Aggregate value of contributions to (during year) | | | | | | |
| 3 | Aggregate value of grants from (during year) | | | | | | |
| 4 | Aggregate value at end of year | | | | | | |
| 5 | Did the organization inform all donors and donor advisors in w organization's property, subject to the organization's exclusive | | | | funds are th | | Yes 🗆 No |
| 6 | Did the organization inform all grantees, donors, and donor ad charitable purposes and not for the benefit of the donor or don private benefit? | or advisor, or for | any other purpose | | | _ | Yes 🗆 No |
| Pai | t II Conservation Easements. | | | | | | 100 - 110 |
| _ | Complete if the organization answered "Yes" on | | | | | | |
| 1 | Purpose(s) of conservation easements held by the organization | ` — | , , | | : II : | | |
| | Preservation of land for public use (e.g., recreation or ed | ucation) \square | Preservation of a | | | | ırea |
| | ☐ Protection of natural habitat | Ц | Preservation of a | certifie | d historic sti | ructure | |
| | ☐ Preservation of open space | | | | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualifie easement on the last day of the tax year. | ed conservation c | ontribution in the fo | orm of a | | | of the Year |
| а | Total number of conservation easements | | | 2a | | | |
| b | Total acreage restricted by conservation easements | | | 2b | | | |
| c | Number of conservation easements on a certified historic struct | ture included in (| a) | 2c | | | |
| d | Number of conservation easements included in (c) acquired aft structure listed in the National Register | er 7/25/06, and | not on a historic | 2d | | | |
| 3 | Number of conservation easements modified, transferred, reletax year ▶ | ased, extinguishe | d, or terminated by | the or | ganization d | uring the | |
| 4 | Number of states where property subject to conservation ease | ment is located 🕨 | | | | | |
| 5 | Does the organization have a written policy regarding the period and enforcement of the conservation easements it holds? | | | of viol | | Yes | □ No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, h | andling of violation | ons, and enforcing o | conserv | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, handlin | ng of violations, a | and enforcing conse | rvation | easements | during the | : year |
| 8 | Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)? | | | 170(h)(| | ☐ Yes | □ No |
| 9 | In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnot the organization's accounting for conservation easements. | | | | atement, and | d | □ NO |
| Par | Organizations Maintaining Collections of Art Complete if the organization answered "Yes" on | | | her Si | milar Asse | ets. | |
| 1a | If the organization elected, as permitted under SFAS 116 (ASC art, historical treasures, or other similar assets held for public provide, in Part XIII, the text of the footnote to its financial state. | exhibition, educa | tion, or research in | further | | | |
| b | If the organization elected, as permitted under SFAS 116 (ASC historical treasures, or other similar assets held for public exhi following amounts relating to these items: | 958), to report i | n its revenue stater | ment ar | | | |
| (| i) Revenue included on Form 990, Part VIII, line 1 | | | | > \$ | | |
| (i | i)Assets included in Form 990, Part X | | | | . > \$ | | |
| 2 | If the organization received or held works of art, historical trea following amounts required to be reported under SFAS 116 (AS | | | ancial g | ain, provide | the | |
| а | Revenue included on Form 990, Part VIII, line 1 | | | | . •\$ | | |
| b | Assets included in Form 990, Part X | | | | | | |
| | | | | | <u> </u> | | |

| Par | t III | Organizations M | aintaining Col | lections o | of Art, Hi | stori | cal T | reasu | ıres, or | Other | Similar A | ssets (cont | inued) | |
|-----|---------------|--|------------------------------|---------------|---------------|-----------------|---------------|----------|-------------------|------------|--------------|----------------|----------|---------|
| 3 | | g the organization's acq s (check all that apply): | | n, and other | records, c | heck a | any of | the fo | llowing tl | hat are a | significant | use of its col | lection | |
| а | | Public exhibition | | | | d | | Loan | or excha | nge prog | grams | | | |
| b | | Scholarly research | | | | e | | Othe | r | | | | | |
| C | | Preservation for future | e generations | | | | | | | | | | | |
| 4 | Provi Part | ide a description of the XIII. | organization's co | llections and | explain ho | ow the | y furtl | ner the | e organiz | ation's e | xempt purpo | ose in | | |
| 5 | | ng the year, did the org ts to be sold to raise fur | | | | | | | | | | ☐ Yes | | lo |
| Pa | rt IV | Escrow and Cust Complete if the or X, line 21. | | | " on Form | า 990, | , Part | IV, li | ne 9, or | reporte | ed an amo | | n 990, | Part |
| 1a | | e organization an agent ded on Form 990, Part : | | | | | | | | | | ☐ Yes | | lo |
| b | If "Y | es," explain the arrange | ement in Part XIII | and comple | ete the follo | owing | table: | | Γ | | - | Amount | | _ |
| c | Begir | nning balance | | | | | | | Ī | 1c | | | | _ |
| d | Addit | tions during the year . | | | | | | | | 1d | | | | |
| е | | ibutions during the year | | | | | | | | 1e | | | | _ |
| f | | ng balance | | | | | | | | 1f | | | | _ |
| 2a | | the organization include | | | | | | | | ccount lia | ability? | ☐ Yes | | – lo |
| b | If "Ye | es," explain the arrange | ement in Part XIII | . Check here | e if the exp | lanati | on has | been | provided | in Part | XIII | . 🗆 | | |
| Pa | rt V | | | | | | | | | | | | | |
| | | Complete if the or | ganization ansv | | | | | | | | I | | | |
| 1. | Rogins | ning of year balance . | | (a) Currer | nt year | (D) PI | rior yea | ır | (c) Two ye | ears back | (a) Three ye | ears back (e) | rour yea | тѕ раск |
| | _ | butions | | | | | | - | | | | | | |
| | | | as and losses | | | | | - | | | | | | |
| | | vestment earnings, gair | · | | | | | + | | | | | | |
| | | s or scholarships | | | | | | | | | | | | |
| е | | expenditures for facilition | es | | | | | | | | | | | |
| f | Admin | nistrative expenses . | | | | | | | | | | | | |
| | | f year balance | | | | | | | | | | | | |
| 2 | | ide the estimated perce | ntage of the curr | ont year ond | l balanco (l | lino 1c | r colu | mn (a |)) hold a | | 1 | | | |
| a | | d designated or quasi-e | indowment > | ent year end | ` | iiile Iç | , colu | iiiii (a |)) Held as | ٠. | | | | |
| b | Perm | nanent endowment ► | | | | | | | | | | | | |
| c | Tem | porarily restricted endo | wment 🟲 | | | | | | | | | | | |
| | , | percentages on lines 2a | | • | | | | | | | | | | |
| 3а | | there endowment funds nization by: | not in the posses | ssion of the | organizatio | n that | are h | eld an | d admini | stered fo | r the | | V | NI. |
| | - | inrelated organizations | | | | | | | | | | 3a(i) | Yes | No |
| | . , | related organizations . | | · · · | | | • | | • | | | 3a(ii) | 1 | |
| b | | es" on 3a(ii), are the re | | | equired on | · Sche | • • dule R | ? . | | | | . 3b | + | _ |
| 4 | | cribe in Part XIII the inte | | | | | | | | | | | | |
| Pa | rt VI | Land, Buildings, | and Equipme | nt. | | | | | | | | | | |
| | | Complete if the or | ganization ansv | vered "Yes | | | | | | | | art X, line 1 | 0. | |
| | Descr | ription of property | (a) Cost or otl (investme | | (b) Cost or | r other | basis (| other) | (c) Accı | umulated o | depreciation | (d) B | ook valu | ie |
| 1a | Land | | | | | | | | | | | | | |
| | | ngs | | | | | | | | | | | | |
| | | hold improvements | | | | | 19 | 90,769 | | | 94,224 | | | 96,545 |
| | | ment | | | | | | 51,232 | - | | 363,020 | | | 188,212 |
| | | | | | | | | 31,024 | | | 248,388 | | | 282,636 |
| _ | | | | | | | J. | -, | | | _ 10,000 | | | ,, |

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

567,393

| Part VII | Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, | Part IV lin | e 11h See Form 990 1 | Part X line 12 |
|--------------------------|---|----------------|-----------------------------|--------------------------------------|
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Metho | d of valuation: year market value |
| | Il derivatives | | | |
| (2) Closely- (3)Other | held equity interests | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | + + | | |
| (H) | | | | |
| Total. (Colum | n (b) must equal Form 990, Part X, col. (B) line 12.) | • | | |
| Part VIII | Investments—Program Related. | <u> </u> | o 11c Coo Form 000 | Dart V line 12 |
| | Complete if the organization answered 'Yes' on Form 990, (a) Description of investment | Part IV, III | (b) Book value | (c) Method of valuation: |
| | | | | Cost or end-of-year market value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Colum | n (b) must equal Form 990, Part X, col.(B) line 13.) | | • | |
| Part IX | Other Assets. Complete if the organization answered 'Yes' on Form 990, | Part IV line | a 11d See Form 990 Par | t X line 15 |
| | (a) Description | | | (b) Book value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| | | | | > |
| Part X | Other Liabilities. Complete if the organization answered 'Yes' on Form 990, | Part IV, line | e 11e or 11f.See Form | 990, Part X, line 25. |
| 1. | (a) Description of liability income taxes | | | (b) Book value |
| (2) | income taxes | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| | n (b) must equal Form 990, Part X, col.(B) line 25.) | | | F7 44 |
| | or uncertain tax positions. In Part XIII, provide the text of the footno | ote to the org | anization's financial state | |
| organization | 's liability for uncertain tax positions under FIN 48 (ASC 740). Check | here if the t | ext of the footnote has be | en provided in Part XIII 🗹 |

b

1

2

Schedule D (Form 990) 2019

Page 4

430,952

-11,050

12,902,860

9,949,761

15,152

9,934,609

9.934.609

Schedule D (Form 990) 2019

12,913,910

| e | Add lines 2a through 2d | |
|---|--|--|
| 3 | Subtract line 2e from line 1 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | |

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

Total expenses and losses per audited financial statements

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 . . .

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

Net unrealized gains (losses) on investments . . .

Donated services and use of facilities

Recoveries of prior year grants

Other (Describe in Part XIII.)

2d 430,952 2e 3

4c

5

1

2e

3

4c

b Add lines 4a and 4b . 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

4a 4b -11,050

2a

2b

2c

| d | Donated Services and use of facilities | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| b | Prior year adjustments | | | | | | | |
| c | Other losses | | | | | | | |
| d | Other (Describe in Part XIII.) | | | | | | | |
| е | Add lines 2a through 2d | | | | | | | |
| 3 | Subtract line 2e from line 1 | | | | | | | |

Denated convices and use of facilities

2a 2b 2c 2d 15,152 4a 4b

b Add lines **4a** and **4b** 5 Part XIII

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Supplemental Information XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

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 Return Reference Explanation See Additional Data Table

| chedule D (Form 990) 2019 | Page 5 |
|--|---------------|
| Part XIII Supplemental Information (continued) | |
| Return Reference Explanation | |
| | |
| | |
| | |
| | |
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| | |
| | |
| | |

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

Supplemental Information

IES.

Return Reference Explanation

THE CORPORATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND STATE INCOME TAX. ACCORDINGLY, NO PROVISION FOR FEDERAL AND STATE TAXES ON 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 LATER OF THE ORIGINAL OR EXTENDED DUE DATE OR THE DATE FILED WITH THE APPLICABLE TAX AUTHORIT

| Supplemental Information | | |
|--|---|--|
| Return Reference | Explanation | |
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | UNREALIZED LOSS ON INVESTMENTS 430,952. | |

| Supplemental Information | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | | | |
| PART XI, LINE 4B - OTHER ADJUSTMENTS: | TAX LOSS IN PARTNERSHIP INVESTMENTS -8,354. LOSS ON SALE OF ASSETS -2,696. | | | | | | | |

| Supplemental Information | |
|---|---|
| Return Reference | Explanation |
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | GAAP/TAX DIFFERENCE IN DEPRECIATION EXPENSE 14,655. GAAP LOSS IN PARTNERSHIP INVESTMENTS 497. |

_ _ _

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

DLN: 93493265014030

Open to Public Inspection

| ame of the organization | NID TNG | | | | | Employer identific | cation number | |
|---|---|---|--|--|---|---------------------------------------|------------------------------------|------|
| IIDWEST HOUSING EQUITY GRO | DUP INC | | | | | 47-0767984 | | |
| Part I General Inform | ation on Grants | and Assistance | | | | | | |
| Does the organization mair the selection criteria used t | | | | | | e, and | ☑ Yes | □ No |
| Describe in Part IV the organic | | _ | - | | | | | |
| Part II Grants and Other A that received more t | Assistance to Dom than \$5,000. Part II | estic Organizations a can be duplicated if add | and Domestic Governme ditional space is needed. | ents. Complete if the o | rganization answered "Yes" | on Form 990, Part IV, line | 21, for any recipien | ıt |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of gr or assistance | rant |
| 1) See Additional Data | | | | | | | | |
| 2) | | | | | | | | |
| 3) | | | | | | | | |
| 4) | | | | | | | | |
| 5) | | | | | | | | |
| 6) | | | | | | | | |
| 7) | | | | | | | | |
| 8) | | | | | | | | |
| 9) | | | | | | | | |
| 10) | | | | | | | | |
| 11) | | | | | | | | |
| 12) | | | | | | | | |
| Enter total number of sectiEnter total number of other | | | | | | | | |
| | | | | | | | | |

(Form 990)

Department of the

Treasury

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2019

Part III

| | recipients | cash gra | int noncash | assistance | FMV, appraisal, other | r) |
|-----|------------|----------|-------------|------------|-----------------------|----|
| (1) | | | | | | |
| (2) | | | | | | |

Page **2**

Schedule I (Form 990) 2019

(3) (4)

(5) (6) (7)

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

Part IV

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 AND BOARD OF DIRECTORS ARE RESPONSIBLE FOR SELECTING THE TAX EXEMPT ORGANIZATIONS THAT WILL RECEIVE GRANTS.

Additional Data

1015 N 98TH ST STE 200

REGIONAL FOOD BANK OF

OKLAHOMA CITY, OK 73179

OMAHA, NE 68114

OKLAHOMA INC

3355 S PURDUE

Software ID: Software Version: EIN:

73-1100380

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)3

EIN: 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

FURTHER THE MISSION

OF THE ORGANIZATION

FURTHER THE MISSION

OF THE ORGANIZATION

DONATION USED TO

Manuel Hiswasi Hoosing Equity Shoot me

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|--------------------------------------|-----------------------------|--|---|---|---------------------------------------|
| HAYES CARES | 47-3401098 | 501(C)3 | 5,000 | | | | DONATION USED TO |

15,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 47-0520749 501(C)3 15.000l ST LUKE TEEN CENTER IDONATION USED TO

11810 BURKE STREET FURTHER THE MISSION OMAHA, NE 68154 OF THE ORGANIZATION BROWNELL-TALBOT SCHOOL 47-0376595 501(C)3 5.0001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

DONATION USED TO IFURTHER THE MISSION 400 NORTH HAPPY HOLLOW OF THE ORGANIZATION

BOULEVARD

OMAHA, NE 68132

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) CROSSROADS MINISTRY OF 74-2465229 501(C)3 5,000 DONATION USED TO

| ESTES PARK PO BOX 3616 ESTES PARK, CO 80517 | | | | | FURTHER THE MISSION OF THE ORGANIZATION |
|---|------------|---------|-------|--|--|
| SHEPHERD OF THE MOUNTAINS LUTHERAN | 41-1568278 | 501(C)3 | 5,000 | | DONATION USED TO FURTHER THE MISSION |

CHURCH OF THE ORGANIZATION 2000 PTARMIGAN TRAIL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ESTES PARK, CO 80517

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) SAINT FRANCIS MEDICAL 47-0630267 501(C)3 5 0001 IDONATION USED TO R THE MISSION

FURTHER THE MISSION

OF THE ORGANIZATION

| CENTER FOUNDATION 2620 W FAIDLEY AVENUE GRAND ISLAND, NE 68803 | 1,7 0000207 | 302(0)3 | 3,000 | | FURTHER THE MISSION OF THE ORGANIZATION |
|--|-------------|---------|-------|--|--|
| INCOMMON COMMUNITY | 47-0842143 | 501(C)3 | 5,000 | | DONATION USED TO |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1340 PARK AVENUE

OMAHA, NE 68105

DEVELOPMENT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 100 BLACK MEN OF OMAHA 47-0785487 501(C)3 5 0001 DONATION USED TO R THE MISSION

DONATION USED TO

FURTHER THE MISSION

OF THE ORGANIZATION

| INC | · | · | | FURTHER THE MISSION |
|-----------------|---|---|--|---------------------|
| 2221 N 24TH ST | | | | OF THE ORGANIZATION |
| OMAHA, NE 68110 | | | | |
| | | | | |

501(C)3 6.250 GREATER DES MOINES 42-1275330

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HABITAT FOR HUMANITY INC

2200 F FUCLID AVE

DES MOINES, IA 50317

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

FURTHER THE MISSION

OF THE ORGANIZATION

| YFC INC DBA MAHA FESTIVAL | 06-1839109 | 501(C)3 | 5,000 | | DONATION USED TO |
|---------------------------|------------|---------|-------|--|---------------------|
| 725 N 14TH STREET | | | · | | FURTHER THE MISSION |
| OMAHA.NE 68102 | | | | | OF THE ORGANIZATION |

HEART MINISTRY CENTER INC. 81-0614816 501(C)3 6.000 IDONATION USED TO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2222 BINNEY STREET OMAHA, NE 68110

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 74-2979359 501(C)3 10.000 HORIZON HOUSING IDONATION USED TO

FURTHER THE MISSION

OF THE ORGANIZATION

FOUNDATION FURTHER THE MISSION 23 N GORE AVE STE 202 ST LOUIS, MO 63119

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OF THE ORGANIZATION 47-0376605 501(C)3 6.250 IDONATION USED TO

UNITED WAY OF THE

OMAHA, NE 68102

2201 FARNAM STREET STE 200

MIDLANDS

(a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

THE LEARNING COMMUNITY 83-4588765 501(C)3 5,250 DONATION USED TO FURTHER THE MISSION SARPY COUNTIES OF THE ORGANIZATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1612 N 24TH STREET OMAHA, NE 68110

| efil | e GRAPHIC pr | int - DO NOT PROCESS | As Filed Dat | a - | DLN: 93 | 49326 | 5014 | 030 |
|-------|--|--|-----------------------------|---|-------------------------|------------|----------------|----------|
| Sch | nedule J | С | ompensat | ion Information | 0 | MB No. | 1545-0 | 0047 |
| (Fori | m 990) | | Compensa ganization answ | Trustees, Key Employees, and Hig ated Employees vered "Yes" on Form 990, Part IV 1 to Form 990. | | 20 | 19 |) |
| • | tment of the Treasury | ► Go to <u>www.irs.g</u> | | instructions and the latest inform | mation. | Open | | |
| | al Revenue Service ne of the organiza | lation | | | Employer identifica | | ectio ımber | |
| MID | WEST HOUSING EQ | UITY GROUP INC | | | 47-0767984 | | | |
| Pa | rt I Questi | ons Regarding Compens | ation | | 17 0707501 | | | |
| | | | | | | | Yes | No |
| 1a | | | | f the following to or for a person liste y relevant information regarding the | | | | |
| | | s or charter travel | | Housing allowance or residence for | • | | | |
| | _ | companions | | Payments for business use of perso | | | | |
| | | nification and gross-up paymen | its 📙 | Health or social club dues or initiati | | | | |
| | LI Discretion | ary spending account | | Personal services (e.g., maid, chau | rreur, cner) | | | |
| b | | | | follow a written policy regarding pay ve? If "No," complete Part III to expl | | 1b | | |
| 2 | | | | or allowing expenses incurred by all r, regarding the items checked on Lii | ne 1 a 2 | 2 | | |
| | directors, truste | es, officers, including the CLO/ | Executive Directo | r, regarding the items checked on th | ie ia: | | | |
| 3 | organization's C | EO/Executive Director. Check a | all that apply. Do | ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain | | | | |
| | ✓ Compensa | ation committee | П | Written employment contract | | | | |
| | | ent compensation consultant | _ | Compensation survey or study | | | | |
| | ✓ Form 990 | of other organizations | \checkmark | Approval by the board or compensa | ation committee | | | |
| 4 | During the year related organiza | | 990, Part VII, Se | ction A, line 1a, with respect to the f | iling organization or a | | | |
| а | Receive a sever | ance payment or change-of-co | ntrol payment? . | | | 4a | | No |
| b | | • • • | | ified retirement plan? | | 4b | | No |
| c | Participate in, o | r receive payment from, an equ | uity-based comper | nsation arrangement? | | 4c | | No |
| | If "Yes" to any o | of lines 4a-c, list the persons ar | nd provide the app | olicable amounts for each item in Par | t III. | | | |
| | Only E01(a)(2 |), 501(c)(4), and 501(c)(29 | l) organizations | must complete lines E-0 | | | | |
| 5 | | | - | the organization pay or accrue any | | | | |
| | • | ontingent on the revenues of: | | , | | | | |
| а | The organization | n? | | | | 5a | | No |
| b | | | | | | 5b | | No |
| | • | 5a or 5b, describe in Part III. | | | | | | |
| 6 | | ed on Form 990, Part VII, Secti ontingent on the net earnings o | | the organization pay or accrue any | | | | |
| а | The organization | 1? | | | | 6a | Yes | |
| b | | | | | | 6 b | | No |
| _ | • | 6a or 6b, describe in Part III. | A 10 - 4 - 10 - 1 | | | | | |
| 7 | payments not d | escribed in lines 5 and 6? If "Ye | es," describe in Pa | the organization provide any nonfixe rt III | a | 7 | | No |
| 8 | subject to the ir | nitial contract exception describ | ed in Regulations | red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," d | | 8 | | No |
| 9 | | | | presumption procedure described in | | 9 | | |
| For F | Paperwork Redu | iction Act Notice, see the In | structions for Fo | orm 990. Cat. No. ! | 50053T Schedule | (Forn | 1 990) | 2019 |

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

| For each individual whose compensation must be reported on Schedule J, reporting instructions, on row (ii). Do not list any individuals that are not listed on Form State. The sum of columns (B)(i)-(iii) for each listed individual must equal the t | 990 | , Part VII. | | | | | | vidual |
|--|-----|--|---|---|--------------------------|-------------------------|----------------------|--|
| (A) Name and Title | Jua | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other | (D) Nontaxable benefits | (E) Total of columns | (F) Compensation in |
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | deferred compensation | | (B)(i)-(D) | column (B) reported as deferred on prior Form 990 |
| See Additional Data Table | | | | I | • | | | |
| | | | | | | | | |
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| Schedule J (Form 990) 2019 Page 3 | | | | | | |
|--|--|--|--|--|--|--|
| Part III Supplemental Information | | | | | | |
| Provide the information, explanation, or | 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 | | | | | |
| · | THE BONUS POOL IS IN PLACE AND CALCULATED BASED ON THE NET INCOME OF THE COMPANY. THE BONUS POOL IS ALSO DEPENDENT ON THE COMPANY'S EXECUTION OF ITS MISSION (THE FINANCING OF QUALITY AFFORDABLE HOUSING) AND ENSURING THERE IS NO RECAPTURE OF THE FEDERAL TAX CREDITS. THESE METRICS ARE MEASURED INDEPENDENTLY BY THE COMPANY'S AUDITORS, WHO PROVIDE A COMPANY METRICS LETTERS TO THE BOARD FOR ITS REVIEW AND ANALYSIS. THE CALCULATION AND FINAL AMOUNT OF THE BONUS POOL 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 THE COMPARABILITY DATA FOR SIMILARLY SITUATED ORGANIZATIONS. | | | | | |

Schedule 1 (Form 990) 2019

Additional Data

Form (A)

1JOHN WIECHMANN

1JASON MAIN

2ANN BURGE

4TOM STRATMAN

VP OF ACQUISITIONS

5ANDREA FRYMIRE

OK EXECUTIVE VICE PRESIDEN

6SCOTT FITZPATRICK

7PATRICK MICHAELIS

VP OF ASSET MANAGEMENT

KS EXECUTIVE VICE PRESIDEN 8JORDAN ABBOUD

9SHANNON FOSTER

10

ACCOUNTING MANAGER

ANWER SAMMY EHTISHAM ASSISTANT VP OF ACQUISITIO

NE EXECUTIVE VICE PRESIDEN

CFO

COO

CIO

PRESIDENT AND CEO

3BECKY CHRISTOFFERSEN

(i) Base Compensation

(i)

(ii)

(i)

(i)

(i)

(ii)

(i)

(i)

(i)

(i)

(i)

(ii)

(i)

(ii)

380,355

225,927

227,970

247,968

183,803

132,389

123,350

148,403

137,771

114,948

115,726

Software Version: EIN: 47-0767984

(ii)

Bonus & incentive

compensation

Software ID:

(iii)

Other reportable

compensation

other deferred

compensation

30,800

30,800

30,800

30,800

30,800

20,809

15,363

25,875

17,726

16,031

16,554

benefits

13,745

15,536

4,243

10,375

2,233

10,004

5,753

6,585

7,401

10,657

(E) Total of columns

(B)(i)-(D)

780,911

480,849

461,218

505,898

316,041

214,883

159,683

262,943

179,525

162,273

167,600

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

| | Name: MIDWEST HOUSING | EQUITY GROUP INC | | |
|------------------|---|--------------------|----------------|--|
| 990, Schedule J, | Part II - Officers, Directors, Trustees, Key Employees, and | Highest Compensate | d Employees | |
| Name and Title | (B) Broakdown of W-2 and/or 1000-MISC componentian | (C) Potiroment and | (D) Nontavable | |

| , | | | | D 11 ccco15/ | | | , ccc, and | 19550 00. | | a zmpioyee | |
|--------|-------------|-----------|-----------|---------------------|-----------|-----------|------------|-------------|----------|------------|---|
| 1 990. | Schedule J, | Part II - | Officers. | Directors. | Trustees. | Key Emplo | vees, and | Highest Co. | mnensate | d Employee | S |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

356,011

208,586

198,205

216,755

99,205

51,681

15,217

82,080

24,028

23,893

24,663

| n 990, Schedule J, | Part II - Officers, Directors, Trustees, Key Employees, and | Highest Compensate | d Employees | |
|--------------------|---|--------------------|----------------|---|
|) Name and Title | (B) Breakdown of W-2 and/or 1099-MISC compensation | (C) Retirement and | (D) Nontaxable | ſ |

| efile GRAPH | IC print - DO NOT PROCESS | | DLN: 93493265014030 |
|---|--|--|---|
| SCHEDUL (Form 990 or EZ) | 990- Complete to provide information for responses to specific Form 990 or 990-EZ or to provide any additional info Attach to Form 990 or 990-EZ. | questions on ormation. | OMB No. 1545-0047 2019 Open to Public Inspection |
| | e O, Supplemental Information | 47-076798 | identification number 4 |
| Return Reference | Explanation | | |
| FORM 990, PART VI, SECTION B, LINE 11B | A COPY OF THE FORM 990 IS PROVIDED TO THE GOVERNING BODY FOR TO REVIEW PROCESS USED BY THE ORGANIZATION TO REGISTALL OF THE FORM 990 IS PROVIDED TO THE CHIEST OF THE FORM 990 IS PROVIDED TO THE CHIEST OF THE CHIE | EVIEW THE 990 PR F FINANCIAL OFFIC AND HIS STAFF. T ION ATTACHED TO | IOR TO FILIN ER AND IS HE RETUR) THE RETURN |

Return Explanation
Reference

990 Schedule O, Supplemental Information

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

Return Explanation

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION B, LINE 15

I THE COMPANY'S EXECUTION OF ITS MISSION (THE FINANCING OF QUALITY AFFORDABLE HOUSING) AND ENSURING THERE IS NO RECAPTURE OF THE FEDERAL TAX CREDITS. THESE METRICS ARE MEASURED INDE PENDENTLY BY THE COMPANY'S AUDITORS, WHO PROVIDE A COMPANY METRICS LETTERS TO THE BOARD FO R ITS REVIEW AND ANALYSIS. THE CALCULATION AND FINAL AMOUNT OF COMPENSATION IS APPROVED BY THE INDEPENDENT BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Explanation

LINE 19

| Reference | |
|-----------|--|
| 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 | |

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. |

SCHEDULE R

(Form 990)

Related

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

OMB No. 1545-0047

DLN: 93493265014030

Open to Public Inspection

| Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (d) Name, address, and EIN of related organization (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (1) MIDWEST HOUSING DEVELOPMENT FUND INC ILOW AND MODERATE INCOME HOUSING NE SO1(C)(3) NAMA, NE 68118 84-1686593 | | | | | | | | l <mark>oyer identif</mark> 767984 | ication | number | | |
|---|--------------|--------------------------------|-------------|----------------------------------|------------------------------|-------------------|--|---------------------------------------|------------------|--|---------------------------|-----------------|
| Part I Identification of Disregarded Entities. Complete | if the organ | ization answe | ered "Yes | " on Form | 990, Part | IV, line 3 | | | | | | |
| | | | ivity | (c) Legal domic or foreign |) cile (state country) | (d) Total inco | me | (e) End-of-year as | ssets | (f Direct co ent | ntrolling | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Part II Identification of Related Tay-Evempt Organization | ns Comple | ete if the orga | anization | answered | "Yes" on F | form 990 | Part I | / line 34 he | eralise | it had one or | more | |
| | ilis. Comple | ite ii tile orge | iiiizatioii | answered | 163 0111 | orini 990, | raiti | v, iiile 5 4 be | ccause | it had one of | more | |
| (a) | Prima | (b) Primary activity | | nicile (state | (d) Exempt Code section | | (e) Public charity status (if section 501(c)(3)) | | Dii | (f) rect controlling entity | Section (13) co ent | ntrolle ity? |
| 515 N 162ND AVE SUITE 202 | | | | NE | 501(C)(3) | L | LINE 10 | | MIDWE: EQUITY | ST HOUSING GROUP | Yes | No |
| OMAHA, NE 68118 84-1686593 | | | | | | | | | | | | |
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| For Donounce Deduction Act Maties and the Turkwesting for Form | 000 | | - | N- F012F | | | | | | dula B (Farm | 900) 2 | |

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 (b) (c) (d) (f) (g) (h) (j) (a) Name, address, and EIN of (e) Direct Predominant Share of Share of Disproprtionate Code V-UBI Primary Legal General or Percentage related organization domicile controllina income(related, end-of-year allocations? amount in box managing activity total income ownership unrelated, 20 of (state entity assets partner? Schedule K-1 excluded from foreign (Form 1065) tax under sections 512country) 514) Yes No Yes No Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of (b) (c) Legal (d) (f) Share of total (g) Share of end-of-(h) (i) Section 512(b) (e) Type of entity Primary activity Direct controlling Percentage related organization domicile C corp, S corp, income ownership (13) controlled entity year (state or foreign or trust) assets entity? country) Yes No (1)MIDWEST HOUSING ASSISTANCE CORP RENTAL REAL ESTATE ΝE 100.000 % No 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0773664

Page **3**

| Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. | | | |
|--|--------------|-----|----|
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | Yes | No |
| 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? | | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | 1a ' | Yes | |
| b Gift, grant, or capital contribution to related organization(s) | 1 b ' | Yes | |
| c Gift, grant, or capital contribution from related organization(s) | 1c | | No |
| d Loans or loan guarantees to or for related organization(s) | 1d \ | Yes | |
| | 1e | | No |
| f Dividends from related organization(s) | 1 f | | No |
| | 1g | | No |
| | 1h | | No |
| | 1i | | No |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1j | | No |
| k Lease of facilities, equipment, or other assets from related organization(s) | 1k | | No |
| l Performance of services or membership or fundraising solicitations for related organization(s) | 11 ' | Yes | |
| | 1m | | No |
| | 1n | | No |
| | 10 | | No |
| | | | |

| n | 1 Performance of services or membership or fundraising solicitations by related organization(s) | 1m | | No |
|-----|--|------------|-----|----|
| n | Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | 1n | | No |
| 0 | Sharing of paid employees with related organization(s) | 10 | | No |
| p | Reimbursement paid to related organization(s) for expenses | 1 p | | No |
| q | Reimbursement paid by related organization(s) for expenses | 1 q | Yes | |
| 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 relationships and transaction thresholds. | | | |
| See | Additional Data Table | | | |
| | (a) (b) (c) (d) | | | |

Name of related organization Transaction type (a-s) Amount involved Method of determining amount involved Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512- 514) | or | (e) e all partners section 501(c)(3) ·ganizations? | (f) Share of total income | (g) Share of end-of-year assets | | (h) Disproprtionate allocations? | | (j) General d managin partner? | g ? | (k) Percentage ownership |
|---|--------------------------------|---|--|-----|--|------------------------------------|--|-----|----------------------------------|---------|---|--------|--------------------------------|
| | | | 317) | Yes | No | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | Schedul | e R (Form | 199 | 0) 2019 |

| Schedule R (Fo | chedule R (Form 990) 2019 | | | | | | | |
|----------------|---------------------------|--|--|--|--|--|--|--|
| Part VII | Supplemental Info | ormation | | | | | | |
| | Provide additional infor | mation for responses to questions on Schedule R. (see instructions). | | | | | | |
| Retu | ırn Reference | Explanation | | | | | | |
| | | | | | | | | |

Additional Data

Software ID: Software Version:

Software version.

EIN: 47-0767984

Name: MIDWEST HOUSING EQUITY GROUP INC

| Form 990, Schedule R, Part I - Identification of Disregarded Entities | | | | | | | | | | | | |
|---|--------------------------------|--|---------------------|----------------------------------|--|--|--|--|--|--|--|--|
| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary Activity | (c) Legal Domicile (State or Foreign Country) | (d) Total income | (e) End-of-year assets | (f) Direct Controlling Entity | | | | | | | |
| MHEG 2011 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1641223 | RENTAL REAL ESTATE | NE | -503 | 1,377,375 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2012 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 35-2439507 | RENTAL REAL ESTATE | NE | -183 | 2,056,023 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2013 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1714217 | RENTAL REAL ESTATE | NE | -665 | 33,190 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2014 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 46-4553222 | RENTAL REAL ESTATE | NE | -752 | 351,354 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2015 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-2822086 | RENTAL REAL ESTATE | NE | -658 | 2,485,036 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2016 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-3993214 | RENTAL REAL ESTATE | NE | -942 | 10,148,764 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2017 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0966078 | RENTAL REAL ESTATE | NE | -2,544 | 81,417,201 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2018 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 36-4893533 | RENTAL REAL ESTATE | NE | -763 | 162,759,597 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2019 FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-4103129 | RENTAL REAL ESTATE | NE | -27 | 68,024,550 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2019 OZ FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1950813 | RENTAL REAL ESTATE | NE | 3 | 1,205,721 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |
| MHEG 2018 SC FUND MANAGER LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1912392 | RENTAL REAL ESTATE | NE | -2 | 2,806,508 | MIDWEST HOUSING EQUITY GROUP | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | ı | ated Organiza | tions Taxable | as a Partner | ship | İ | 1 | I | | . I | |
|---|--------------------------------|---|-----------------------|--|---------------------------------|--|---------------------------|--------------------|--|---------------------------------|----------------------------|--------------------------------|
| (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 allocal | rtionate tions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gen o Mana Parti | eral r iging ner? | (k) Percentage ownership |
| 10TH STREET APARTMENTS LLC | RENTAL REAL ESTATE | KS | N/A | , | | | Yes | No | | Yes | No | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-3369758 | | | | | | | | | | | | |
| | 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 515 N 162ND AVE SUITE 202 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| OMAHA, NE 68118 39-2011010 | | | 21.6 | | | | | | | | | |
| 4318 FORT STREET HTC LLC 2101 SOUTH 42ND STREET OMAHA, NE 68105 47-2446790 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 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) Domicile Share of total Share of endor Code V-UBI amount in Box 20 of Schedule K-1 income(related, allocations? Percentage Primary activity Managing (State Controlling income of-year assets related organization unrelated, ownership Partner? or Entity (Form 1065) excluded from Foreign tax under Country) sections 512-514) Yes Yes No No RENTAL REAL ESTATE ANISTON VILLAGE LP IΑ N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 42-1508090 APPLE RIDGE SENIORS II LLC RENTAL REAL ESTATE ОК N/A 3390 CRESTBROOK LANE SALT LAKE CITY, UT 84109 30-0830615 APPLE RIDGE SENIORS LP RENTAL REAL ESTATE OK N/A 3785 ASH CIRCLE SALT LAKE CITY, UT 84109 35-2479635

| 33-24/9633 | | | | | | | 1 1 | |
|--|--------------------|----|-----|--|--|--|-----|--|
| APPLE RIVER CROWN LLC | RENTAL REAL ESTATE | NE | N/A | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 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 LP | 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 | | | | | | | | |
| BLUE TERRACE CROWN LTD | RENTAL REAL ESTATE | NE | N/A | | | | | |
| 515 N 162ND AVE SUITE 202 | | | | | | | | |

OMAHA, NE 68118 75-3045097

| (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) Disproprtionate allocations? Yes No | | Disproprtionat allocations? | | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gen o Mana Parti | eral r iging ner? | (k) Percentage ownership |
|--|----------------------|---|--|--|---------------------------|--|--|--|-----------------------------|--|--|---------------------------------|----------------------------|---------------------------------------|
| BLUFFVIEW PLACE LLC | 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 | | | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | | | |
| 1712 E 123RD ST OLATHE, KS 66061 | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0762767 | | | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | _ | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 39-2034832 | | | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | of Rela | ted Organiza | tions Taxable | as a Partners | ship | | | | | | |
|--|--------------------------------|---|-------------------------------|--|---------------|------|---------------------------|------------------|--|-----------------------------------|---------------------------|--------------------------------|
| (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) | (=) | (h Dispropr allocat | tionate ions? | (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 |
| CEDAR PARK PRESERVATION ALP | RENTAL REAL ESTATE | IA | N/A | | | | Yes | No | | Yes | 140 | |
| 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 | ОК | 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 | | | | | | | | | | | | |
| CHARMED-PERKINS AFFORDABLE HOUSING PARTNERS LLC | 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 | | | | | | | | | | | | |
| CHICKASHA SENIOR LIMITED PARTNERSHIP | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-2370359 | | | | | | | | | | | | |

| (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) | | | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | Gen o Mana Parti | eral r aging ner? | (k) Percentage ownership |
|--|--------------------------------|---|-------------------------------|--|---------------------------|-----|--|--|--|---------------------------|----------------------------|--|
| 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 | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | |
| COTTAGE PARK LP 2 | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 23-1339001 | | | | | | | | | | | | |

| (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 Yes | tionate | (i) 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 |
|--|--------------------------------|---|--|--|---------------------------|-----|----------------------------------|---------|--|---------------------------------|---------------------------|---------------------------------------|
| 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 LLC | 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 | | | | | | | | | | | | |
| | 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 | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1619531 | | | | | | | | | | | | |
| CROWN VII LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 | | | | | | | | | |
| 3801 VERMASS PLACE LINCOLN, NE 68502 45-4794848 | | | | | | | | | | | | |
| DAWSON ESTATES LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3560185 | | | | | | | | | | | | |

| Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership | | | | | | | | | | | | |
|---|--------------------------------|---|-----------------------|--|---------------------------------|--|---------------------------|--------------------|--|--------|----------------------------|--------------------------------|
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | 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 | rtionate cions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | T di C | eral r iging ner? | (k) Percentage ownership |
| DEER RIDGE VI LP | RENTAL REAL ESTATE | IA | N/A | J12 J1+) | | | Yes | No | | Yes | No | |
| | RENTAL REAL ESTATE | 14 | IN/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 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738210 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 2604 26TH AVE CENTRAL CITY, NE 68826 32-0493800 | | | | | | | | | | | | |
| 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 EMPORIA SENIOR RESIDENCES LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 7701 E KELLOGG SUITE 820 WICHITA, KS 67207 | | | | | | | | | | | | |
| 27-1165456 EQUITY FUND OF NEBRASKA IX LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -2 | -11,389 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0844673 | | | | | | | | | | | | |

| Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership | | | | | | | | | | | | |
|---|--------------------------------|---|--|--|--|---|---------------------------|---------|--|--------------------------|----------------------------|---------------------------------------|
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of- year assets | (h Dispropr allocat | tionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | Gen o Mana Part | eral r aging ner? | (k) Percentage ownership |
| | RENTAL REAL ESTATE | NE | N/A | RELATED | -37 | | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0845255 | | | | | | | | | | | | |
| EQUITY FUND OF NEBRASKA VIII | RENTAL REAL ESTATE | NE | N/A | RELATED | | | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0828532 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | RELATED | -177 | 34,648 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 11-3645080 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | RELATED | -157 | 11,224 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 71-0969038 | | | | | | | | | | | | |
| EQUITY FUND OF NEBRASKA XII LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -225 | 12,612 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 03-0607491 | | | | | | | | | | | | |
| EUFAULA AFFORDABLE HOUSING PARTNERS LP | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 14-1983401 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 2221 N 24TH STREET OMAHA, NE 68110 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 | | | | | | | | | |
| 20-8501575 | RENTAL REAL | KS | N/A | | | | | | | | | |
| | ESTATE | | · | | | | | | | | | |
| FLOR DE SOL PARTNERS II LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 26-3942869 | | | | | | | | | | | | |
| FLOR DE SOL PARTNERS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | _ |
| OVERLAND PARK, KS 66210 26-0633223 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | RELATED | -58 | 7,998 | | 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 | | | | | | | | | | | | _ |

| | | /-> | | | | ' | | | | /: | , 1 | | |
|---|--------------------|---|-----------------------|--|--|--|--|-----|---|-----|----------------------------------|---|--------------------------------|
| (a) Name, address, and EIN of related organization | 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) Disproprtionate allocations? Yes No | | Disproprtionate allocations? Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | | (j) General or Managing Partner? | | (k) Percentage ownership |
| FRIENDSHIP PLACE I LLC | RENTAL REAL ESTATE | KS | N/A | | | | 163 | 140 | | 163 | 110 | | |
| 600 WEST BLANCHARD AVENUE SOUTH HUTCHINSON, KS 67505 20-4694152 | | | | | | | | | | | | | |
| | 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 I | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | _ | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3006604 | | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3278935 | | | | | | | | | | | | | |
| GOLDFINCH GROVE LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | | |
| 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 | | | | | | | | | | | | | |
| GRAND PRAIRIE APARTMENTS LP | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | | |
| 2537 N HIGHWAY 81 DUNCAN, OK 73533 20-1681071 | | | | | | | | | | | | | |
| GRANT PRAIRIE TOWNHOMES II | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | | |
| 600 E 103RD ST SUITE 200 KANSAS CITY, MO 64131 47-5179070 | | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | of Rela | ited Organiza | tions Taxable | as a Partner | ship | | | | | | |
|--|-----------------------------|---|-------------------------------|--|--------------|------|---------------------------|----------|--|---------------------------|----------------------------|--------------------------------|
| (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) | (-) | (h Dispropi allocat | rtionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | Gen o Mana Parti | eral r aging ner? | (k) Percentage ownership |
| GRANT TERRACE LLLP | RENTAL REAL ESTATE | IA | N/A | | | | | | | 1.00 | | |
| PO BOX 473 SPENCER, IA 51301 20-3773650 | | | | | | | | | | | | |
| GREAT WEST TOWNHOMES LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3991280 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| GREENVIEW ESTATES LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0576269 | | | | | | | | | | | | |
| GRETNA CROWN LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1901751 | | | | | | | | | | | | |
| GTMC LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2404983 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| HERITAGE ESTATES LLC | 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 | | | | | | | | | | | | |
| HERITAGE HAWTHORNE PARTNERS | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| HERITAGE TOWNHOMES OF SMITH CENTER LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 219 S MAIN ST SMITH CENTER, KS 66967 45-5218865 | | | | | | | | | | | | |
| HFS COUNCIL BLUFFS LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 2101 S 42ND STREET OMAHA, NE 68105 20-3781186 | | | | | | | | | | | | |

| Form 990, Schedule R, Part II | II - Identification | of Relat | ed Organizati | ons Taxable a | s a Partners | hip | | | | | | |
|--|--------------------------------|---|-------------------------------|--|------------------------------|-----|---------------------------|-------------------|--|-------------------------------|----------------------------|---------------------------------------|
| (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 | (g) | (h Dispropi allocat | tionate :ions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gendon Mana Partr | eral r nging ner? | (k) Percentage ownership |
| HICKORY HEIGHTS LLC | RENTAL REAL | KS | N/A | | | | | | | | | |
| 2107 INDUSTRIAL DRIVE MCPHERSON, KS 67460 46-3696319 | ESTATE | | | | | | | | | | | |
| HICKORY RIDGE MCALESTER LLC | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 111 EAST BROADWAY SUITE 1250 SALT LAKE CITY, OK 84111 26-1547913 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| HRM III LP | RENTAL REAL ESTATE | ок | N/A | | | | | | | | | |
| 20 EAST 9TH STREET SHAWNEE, OK 74801 45-3865300 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | t III - Identificati | 1 | lated Organiz | zations Taxabl | e as a Partne | rsnip | I | | I | | . 1 | |
|--|--------------------------------|---|--|--|--|--|---------------------------|----------|--|---------------------------|----------------------------|--------------------------------|
| (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 allocai | rtionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | Gen o Mana Parti | eral r aging ner? | (k) Percentage ownership |
| HUGO AFFORDABLE HOUSING LLC | RENTAL REAL ESTATE | ОК | N/A | | | | 103 | NO. | | 163 | 110 | |
| 600 S WASHINGTON ARDMORE, OK 73401 45-5385551 | | | | | | | | | | | | |
| HUMBOLDT SENIOR | RENTAL REAL | KS | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-4527775 | ESTATE | | | | | | | | | | | |
| HUNTSVILLE TOWN BRANCH LP | RENTAL REAL | AR | N/A | | | | | | | | | |
| 1501 N UNIVERSITY AVE SUITE 740 | ESTATE | | | | | | | | | | | |
| 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 | МО | N/A | | | | | | | | | _ |
| 250 NE MULBERRY STE 201 LEES SUMMIT, MO 64086 46-5230094 | ESTATE | | | | | | | | | | | |
| IOWA EQUITY FUND I LP | RENTAL REAL | IA | N/A | RELATED | 728 | | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0046359 | ESTATE | | | | | | | | | | | |
| IOWA EQUITY FUND II LP | RENTAL REAL ESTATE | IA | N/A | RELATED | -69 | 1,124,208 | | 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 | 11,108 | | 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 | -88 | 18,558 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2587462 | ESTATE | | | | | | | | | | | |
| IOWA FUND V LP | RENTAL REAL | IA | N/A | RELATED | -117 | 14,074 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-4018140 | ESTATE | | | | | | | | | | | |
| IOWA FUND VI LP | RENTAL REAL ESTATE | IA | N/A | RELATED | -146 | 104,674 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2174856 | | | | | | | | | | | | |
| IOWA FUND VII LP | RENTAL REAL ESTATE | IA | N/A | RELATED | -125 | 809,820 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5100545 | LOTATE | | | | | | | | | | | |
| IRONWOOD PARTNERS LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 5345 W 151ST TERRACE LEAWOOD, KS 66224 46-4199338 | LSTATE | | | | | | | | | | | |
| IVORY STREET APARTMENTS LLC | | KS | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1492768 | ESTATE | | | | | | | | | | | |
| IVY MANOR APARTMENTS LP | RENTAL REAL ESTATE | MN | N/A | | | | | | | | | |
| 702 SOUTH 3RD AVENUE VIRGINIA, MN 55792 38-4011115 | LUTATE | | | | | | | | | | | |

| Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership | | | | | | | | | | | | |
|---|--------------------------------|---|--|--|--|--|--------------------------|-------------------|--|----------|-----------------------------|---------------------------------------|
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal Domicile (State or Foreign Country) | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of- year assets | (h Disprop allocat | tionate :ions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | Gen 0 | eral er aging ner? | (k) Percentage ownership |
| JACKSON HEIGHTS APARTMENTS LIMITED PARTNERSHIP | RENTAL REAL ESTATE | SD | N/A | | | | 103 | -110 | | 1.03 | | |
| 310 S ROOSEVELT ABERDEEN, SD 57401 45-4293901 | | | | | | | | | | | | |
| JACKSON MEADOWS LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 908 1ST AVENUE AURORA, NE 68818 37-1666774 | | | | | | | | | | | | |
| JAMES TINSLEY VILLAS LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5290310 | | | | | | | | | | | | |
| JUDY MEADOWS LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| PO BOX 1808 TURLOCK, CA 95381 47-3754153 | | | | | | | | | | | | |
| KANSAS EQUITY FUND I LP | RENTAL REAL ESTATE | KS | N/A | RELATED | | | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 39-2008696 | | | | | | | | | | | | |
| KANSAS EQUITY FUND II LP | RENTAL REAL ESTATE | KS | N/A | RELATED | 554 | 12,160 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0046363 | | | | | | | | | | | | |
| KANSAS EQUITY FUND III LP | RENTAL REAL ESTATE | KS | N/A | RELATED | -250 | 1,366,836 | | 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 | -114 | 309,505 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-0105906 | | | | | | | | | | | | |
| KANSAS EQUITY FUND V LP | RENTAL REAL ESTATE | KS | N/A | RELATED | -98 | 9,354 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5608271 | | | | | | | | | | | | |
| KANSAS FUND IX LP | RENTAL REAL ESTATE | KS | N/A | RELATED | -134 | 114,736 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5100715 | | | | | | | | | | | | |
| KANSAS FUND VI LP | RENTAL REAL ESTATE | KS | N/A | RELATED | -59 | 8,592 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1951376 | | | | | | | | | | | | |
| KANSAS FUND VII LP | RENTAL REAL ESTATE | KS | N/A | RELATED | -73 | 9,178 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-4018301 | | | | | | | | | | | | |
| KANSAS FUND VIII LP | RENTAL REAL ESTATE | KS | N/A | RELATED | -128 | 10,985 | | 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 | -108 | 1,143,820 | | 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 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | of Rela | ated Organiza | tions Taxable | as a Partner | ship | 1 | | | | | |
|--|--------------------------------|---|-----------------------|--|---------------------------------|--|---------------------------|--------------------|--|-------|----------------------------|---------------------------------------|
| (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 | rtionate tions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | rarti | eral r iging ner? | (k) Percentage ownership |
| KELLOM VILLA LIMITED PARTNERSHIP | RENTAL REAL ESTATE | NE | N/A | · | | | Yes | No | | Yes | No | |
| 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 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 540 S 27TH ST OMAHA, NE 68105 16-1635419 | | | | | | | | | | | | |
| 4500 W MAPLE WICHITA, KS 67209 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 81-3494869 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 | | | | | | | | | | | | |
| | 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 90-0846697 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 534 SOUTH KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 27-3522454 | | | | | | | | | | | | |
| LAMONI ASSISTED LIVING LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738239 | | | | | | | | | | | | |
| LANDMARK SECOND LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 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 | | | | | | | | | | | | |

| (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 | (i) 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 |
|---|--------------------------------|---|-------------------------------|--|---------------------------|--|---------------------------|---------|--|---------------------------------|---------------------------|--------------------------------|
| LCHT ACCESSIBLE HOUSING LLC | RENTAL REAL ESTATE | KS | N/A | | | | | 1.0 | | . 03 | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-3399238 | | | | | | | | | | | | |
| LEGEND OAKS II LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | _ |
| 2604 26TH AVENUE CENTRAL CITY, NE 68826 46-3363896 | | | | | | | | | | | | |
| LEGEND OAKS LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3937725 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| LEGENDS AT HICKORY RIDGE II LP | RENTAL REAL ESTATE | OK | N/A | | | | | | | | | |
| 20 EAST 9TH STREET SHAWNEE, OK 74801 27-0250606 | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | |
| LMAAL LLLP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 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 | OK | N/A | | | | | | | | | |
| 600 S WASHINGTON ARDMORE, OK 73401 47-5655407 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | OK | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-1785091 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 301 FARROW DRIVE MANNFORD, OK 74044 27-5318217 | | | | | | | | | | | | |

| Form 990, Schedule R, Pari | t III - Identification | 1 | lated Organiz | ations Taxabl | e as a Partne | rship | | | | | , 1 | |
|--|--------------------------------|---|--|--|--|--|---------------------------|------------------|--|-----|----------------------------|--------------------------------|
| (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) | | eral r nging ner? | (k) Percentage ownership |
| MAPLEWOOD OF STPETER LP | RENTAL REAL | MN | N/A | | | | Yes | No | | Yes | No | |
| 2401 BROADWAY AVE SUITE 4 SLAYTON, MN 56172 32-0458844 | ESTATE | | .,,,, | | | | | | | | | |
| MAPLEWOOD TOWNHOMES LLC | RENTAL REAL | KS | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-0497417 | ESTATE | | | | | | | | | | | |
| MARKET STREET LOFTS LP | RENTAL REAL | KS | N/A | | | | | | | | | |
| 8109 NW HILLSIDE DRIVE WEATHERBY LAKE, KS 64152 27-3629179 | ESTATE | | | | | | | | | | | |
| 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 | ESTATE | | | | | | | | | | | |
| 45-4411713 | | | | | | | | | | | | |
| MCKINLEY HOUSING LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 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 | | IA | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 41-2005649 | ESTATE | | | | | | | | | | | |
| MEADOW BROOKS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | _ |
| 1313 STONE GREAT BEND, KS 67530 47-1512417 | | | | | | | | | | | | |
| MEADOW VISTA LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 1555 CALIFORNIA AVENUE TURLOCK, CA 95380 46-5607043 | | | | | | | | | | | | |
| MEADOWS AT FORREST CITY LP | RENTAL REAL ESTATE | AR | N/A | | | | | | | | | |
| 109 E MADISON AVE BASTROP, LA 71220 46-4628132 | LSTATE | | | | | | | | | | | |
| MERIDEN HEIGHTS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 1000 SE HANCOCK STREET TOPEKA, KS 66607 20-8254192 | | | | | | | | | | | | |
| MHEG COMMUNITY FUND 41 LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -135 | 269 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1706605 | | | | | | | | | | | | |
| MHEG COMMUNITY FUND 43 LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -71 | 133,785 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 32-0434441 | LOTATE | | | | | | | | | | | |
| MHEG COMMUNITY FUND 45 LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -62 | 248,935 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-3954206 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identificati | 1 | lated Organi | zations Taxab | le as a Partne | rship | I | | I | 1 4 | ., 1 | |
|---|--------------------------------|---|-----------------------|--|---------------------------------|---|---------------------------|---------|---|-------------------|-----------------------------|--------------------------------|
| (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 Dispropr allocat | tionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | o Mana Part | eral er aging ner? | (k) Percentage ownership |
| MHEG COMMUNITY FUND 47 LP | DENITAL DEAL | NE | NI/A | , | -111 | 2,006,821 | Yes | No | | Yes | No | 0.010.0/ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-3993907 | RENTAL REAL ESTATE | NE | N/A | RELATED | -111 | 2,006,821 | | No | | Yes | | 0.010 % |
| MHEG COMMUNITY FUND 49 LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1846549 | RENTAL REAL ESTATE | NE | N/A | RELATED | -204 | 12,560,415 | | No | | Yes | | 0.010 % |
| MHEG FUND 40 LP | RENTAL REAL | NE | N/A | RELATED | -530 | 32,921 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0766625 | ESTATE | | | | | | | | | | | |
| MHEG FUND 42 LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 | RENTAL REAL ESTATE | NE | N/A | RELATED | -681 | 217,569 | | No | | Yes | | 0.010 % |
| 38-3922426 MHEG FUND 44 LP | RENTAL REAL | NE NE | N/A | RELATED | -596 | 2,236,101 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-0855739 | ESTATE | | IV A | KLLATED | 330 | 2,233,101 | | 140 | | 163 | | 0.010 % |
| MHEG FUND 46 LP | RENTAL REAL | NE | N/A | RELATED | -773 | 8,133,945 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1808582 | ESTATE | | | | | | | | | | | |
| MHEG FUND 48 LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 | RENTAL REAL ESTATE | NE | N/A | RELATED | -2,079 | 47,011,268 | | No | | Yes | | 0.010 % |
| 37-1859812 | DENITAL DEAL | | N1 / A | | | | | | | | | |
| MILL FARM PARTNERS LLC 534 S KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 61-1674660 | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 27-1814624 MODEL CITIES BROWNSTONE LP | RENTAL REAL | MN | N/A | | | | | | | | | |
| 1821 UNIVERSITY AVE N-461 ST PAUL, MN 55107 32-0466342 | ESTATE | | | | | | | | | | | |
| MONUMENT VIEW VILLA LLC 89-A WOODLEY PARK RD | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| GERING, NE 69341 45-4490800 | | | | | | | | | | | | |
| MORNINGSTAR SENIOR LP 2411 E 27TH STREET | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| 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 | | | | | | | | | | | | _ |

| Form 990, Schedule R, Par | t III - Identificatio | on of Re | lated Organiz | ations Taxabl | e as a Partne | rship | | | | | | |
|---|--------------------------------|---|--|--|--|---|---------------------------|------------------|--|---------------------------------|----------------------------|---------------------------------------|
| (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 Gen o Mana Parti | eral r nging ner? | (k) Percentage ownership |
| MOUNT OLIVE LIMITED PARTNERSHIP | RENTAL REAL ESTATE | ОК | N/A | | | | res | NO | | res | NO | |
| 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 | LSTATE | | | | | | | | | | | |
| 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 ESTATE | NE | N/A | RELATED | -68 | 8,429 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2444496 | | | | | | | | | | | | |
| NEBRASKA FUND XIV LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -94 | 9,455 | | 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 | -173 | 14,098 | | 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 | -121 | 7,865 | | 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 | -75 | 912,203 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-4757784 | | | | | | | | | | | | |
| NFW LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 2101 S 42ND ST OMAHA, NE 68105 45-3991190 | | | | | | | | | | | | |
| NORTH OMAHA AFFORDABLE HOMES LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | _ |
| 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 COTTAGES LIMITED PARTNERSHIP PHASE II | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 3014 NORTH 45TH STREET OMAHA, NE 68104 32-0363688 | | | | | | | | | | | | |
| NORTH OMAHA SENIOR COTTAGES LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 | | _ | | | | | | | | | | |
| NORTHFIELD AT STAPLETON APARTMENTS LLLP | RENTAL REAL ESTATE | СО | N/A | | | | | | | | | |
| 1735 GAYLORD STREET DENVER, CO 80206 37-1789100 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | | (c) | | | - as a raithe | | 1 | | | (j | n 1 | |
|--|--------------------------------|---|-----------------------|--|---------------------------------|--|---------------------------|---------|--|----------|----------------------------|---------------------------------------|
| (a) Name, address, and EIN of related organization | (b) Primary activity | 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) | Gen o | eral r iging ner? | (k) Percentage ownership |
| NORTHFIELD VILLAGE LP | RENTAL REAL | KS | N/A | | | | res | INO | | res | 140 | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 68-0571598 | ESTATE | | | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | - |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 87-0700265 | ESTATE | | | | | | | | | | | |
| NORTHPARK APARTMENTS LLLP | RENTAL REAL | IA | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-1784441 | ESTATE | | | | | | | | | | | |
| NORTHWOODS LIMITED PARTNERSHIP 1 | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 1600 UNIVERSITY AVENUE STE 212 ST PAUL, MN 55104 20-1743309 | | | | | | | | | | | | |
| OAK RIDGE APARTMENTS LP | RENTAL REAL | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 75-3044323 | ESTATE | | | | | | | | | | | |
| ODEBOLT ASSISTED LIVING LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3738090 | | | | | | | | | | | | |
| OKLAHOMA EQUITY FUND I LP | RENTAL REAL ESTATE | ОК | N/A | RELATED | -158 | 12,561 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 33-1115755 | ESTATE | | | | | | | | | | | |
| OKLAHOMA EQUITY FUND II LP | RENTAL REAL ESTATE | ОК | N/A | RELATED | -140 | 9,121 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5738947 | 2077112 | | | | | | | | | | | |
| OKLAHOMA FUND III LP | RENTAL REAL ESTATE | ОК | N/A | RELATED | -114 | 7,152 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-2381043 | | | | | | | | | | | | |
| OKLAHOMA FUND IV LP | RENTAL REAL ESTATE | ОК | N/A | RELATED | -123 | 444,954 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-5346263 | | | | | | | | | | | | |
| OLD SPENCER SCHOOL LLLP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| PO BOX 473 SPENCER, IA 51301 26-1232442 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| OPG SUMMIT WEST PARNERS LLC | RENTAL REAL ESTATE | TX | N/A | | | | | | | | | |
| 5345 W 151ST TERRACE LEAWOOD, KS 66224 32-0476107 | | | | | | | | | | | | |

| (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) | Gendon O Mana Partr | eral r ging ner? | (k) Percentage ownership |
|---|----------------------|---|--|--|---------------------------------|-----|---------------------------|---------|--|------------------------------|---------------------------|--------------------------------|
| PANORA ASSISTED LIVING LLC | RENTAL REAL ESTATE | IA | N/A | | | | 103 | .10 | | | | |
| 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 | OK | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-1557203 | | | | | | | | | | | | |
| PARKWILD HEIGHTS LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | _ |
| 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 | | | | | | | | | | | | |

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

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

| (a) Name, address, and EIN of related organization | (b) Primary activity | Legal Domicile (State or Foreign Country) | (d) Direct Controlling Entity | (e) Predominant income(related, unrelated, excluded from tax under sections | (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 | (k) Percentage ownership |
|---|--------------------------------|---|--|---|---------------------------------|--|---------------------------|----------|--|---------------------------|--------------------|---------------------------------------|
| 222.12 | DENITAL SECTION | | 21/2 | 512-514) | | | Yes | No | | Yes | No | |
| 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 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| LLC 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 | | | .,,. | | | | | | | | | |
| PROSPECT VILLAGE LIMITED PARTNERSHIP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 4324 FORT ST OMAHA, NE 68111 47-2505472 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | 1 | ated Organiza | tions Taxable | as a Partner | ship | | | 1 | ١ ، | , I | |
|---|--------------------------------|---|-----------------------|--|--|--|---------------------------|------------------|--|-----------------------------------|---------------------------|--------------------------------|
| (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 Dispropr allocat | tionate ions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gend or Mana Partr | eral r ging ner? | (k) Percentage ownership |
| RIDGEWOOD CROWN LLC | RENTAL REAL ESTATE | NE | N/A | - | | | Yes | No | | Yes | NO | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-0371887 | NENTAL NEAL ESTATE | 11/2 | | | | | | | | | | |
| RIVER CITY LP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| PO BOX 473 14 WEST 21ST ST SPENCER, IA 51301 42-1527377 | | | | | | | | | | | | |
| RIVER ROAD TOWNHOMES LLC 5404 N 107TH PLZ OMAHA, NE 68134 46-3364313 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | |

| (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 Dispropriallocat | tionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gen o Mana Parti | eral r nging ner? | (k) Percentage ownership |
|---|--------------------------------|---|-----|--|-----|------------------------|---------|--|---------------------------------|----------------------------|--------------------------------|
| 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 | | | | | | | | |
| 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 | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2337175 | | | | | | | | | | | |
| SIMMONS SENIOR HOUSING LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | |
| 2500 STRONG AVE KANSAS CITY, KS 66106 35-2466219 | | | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 73-1717296 | | | | | | | | | | | |
| SIXTEENTH STREET LIMITED PARTNERSHIP | RENTAL REAL ESTATE | NE | N/A | | | | | | _ | | |
| 2221 N 24TH STREET OMAHA, NE 68110 20-5421205 | | | | | | | | | | | |
| SKIATOOK RETIREMENT COMMUNITY LIMITED PARTNERSHIP | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | |
| 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 | | | | | | | | | | | |
| SOUTH ROCK CREEK ESTATES LLC | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | |
| 8551 LEXINGTON AVENUE LINCOLN, OK 68505 45-3838751 | | | | | | | | | | | |
| SOUTHEAST VILLA LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-8622939 | | | | | | | | | | | |
| SOUTHERN MEADOWS HOMES LP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | |
| 1312 LOCUST STREET SUITE 300A DES MOINES, IA 50309 45-4350525 | | | | | | | | | | | |

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership **(j)** General (c) (e) Predominant (h) (d) Direct **(f)** Share of total **(g)** Share of end-Lègal (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) (a) Name, address, and EIN of related organization **(b)** Primary activity Disproprtionate (k) Domicile or income(related, unrelated, allocations? Percentage Managing Partner? Controlling (State income of-year assets ownership or Entity excluded from Foreign Country) tax under sections 512-514) Yes No Yes No SOUTHERN POINTE LLLP RENTAL REAL ESTATE IΑ N/A 14 WEST 21ST ST SPENCER, IA 51301 47-2315878 SOUTHGATE APARTMENTS RENTAL REAL ESTATE NE N/A BELLEVUE LP

| BELLEVUE LP | | i | | ' | ' | | 1 | , | 1 |
|--|--------------------|----------|-----|------|----------|--|---|---|----------|
| 16910 FRANCES STREET STE 200 OMAHA, NE 68130 35-2432369 | | l | | | | | | l | |
| SOUTHWOOD ESTATES LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-2231206 | | l | | | | | | l | |
| SPRING VILLAGE APARTMENTS OF IOWA LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | |
| 2 E MIFFLIN STREET SUITE 401 MADISON, IA 53703 20-4593874 | | <u> </u> | | | | | | | |
| SPRUCE HILLS VILLAGE LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | |
| 2 E MIFFLIN STREET SUITE 401 MADISON, IA 53703 20-4261825 | | l | | | | | | | |
| ST MARGARET'S LIHTC LP | RENTAL REAL ESTATE | KS | N/A | | | | | | |
| 8201 NW 97TH TERRACE KANSAS CITY, KS 64153 90-0435859 | | <u> </u> | | | | | | | |
| ST MARY'S APARTMENTS OF DUBUQUE LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | |
| 2 EAST MIFFLIN STREET SUITE | | i | | | ' | | 1 | , | 1 |
| 401 MADISON, IA 53703 26-0472283 | | l | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | <u>'</u> | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-1437758 | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | 1 | | | | |
| 8109 NW HILLSIDE DRIVE WEATHERBY LAKE, KS 64152 27-3160956 | | | | | | | | | |
| STILWELL HOUSING PARTNERS II LIMITED PARTNERSHIP | RENTAL REAL ESTATE | OK | N/A | | | | | | |
| 1031 FAYETTEVILLE ROAD SUITE 205 | | l | | | | | | | |
| VAN BUREN, AR 72956 45-5561459 | | i | | | ' | | 1 | , | |
| | RENTAL REAL ESTATE | IA | N/A | | 1 | | | | |
| 1620 PLEASANT STREET DES MOINES, IA 50314 20-5829617 | | l | | | | | | | |
| | RENTAL REAL ESTATE | IA | N/A | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-3671527 | | l | | | | | | | |
| STONEBROOK ESTATES LLC | RENTAL REAL ESTATE | ок | N/A | | | | 1 | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1324774 | | <u> </u> | | | | | | | <u> </u> |
| STONEBROOK VILLAS LLC | RENTAL REAL ESTATE | ОК | N/A | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1324435 | | l | | | | | | | |
| STONEPOST PARTNERS II LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | |
| 2850 MISSION WOODS DR TOPEKA. KS 66614 | | i | | | | | | | i |

TOPEKA, KS 66614 26-3380572

| Form 990, Schedule R, Part | III - Identification | | ated Organiza | tions Taxable | as a Partner | ship | 1 | | | | , 1 | |
|--|--------------------------------|---|---|--|--------------|--|---------------------------------|--------------------|--|---------------------------------|----------------------------|---------------------------------------|
| (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) | | (g) Share of end- of-year assets | (f Disprop alloca | rtionate tions? | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gen o Mana Parti | eral r nging ner? | (k) Percentage ownership |
| STONEPOST PARTNERS III LLC | RENTAL REAL ESTATE | KS | N/A | 312 314) | | | Yes | No | | Yes | No | |
| 534 SOUTH KANSAS AVENUE SUITE 900 TOPEKA, KS 66603 27-3489267 | THE REAL ESTATE | | | | | | | | | | | |
| STONEPOST PARTNERS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 7500 COLLEGE BLVD STE 500 OVERLAND PARK, KS 66210 20-5868538 | | | | | | | | | | | | |
| STONEWOOD TOWNHOMES II | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 2604 26TH AVENUE CENTRAL CITY, NE 68826 45-5606892 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 45-1205288 | | | | | | | | | | | | |
| STORM LAKE AFFORDABLE PARTNERS LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 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 | | | | | | | | | |
| 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 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | - Identification | 1 | iceu Organiza | | as a Partners | | I | | 1 | (j | , 1 | |
|---|--------------------------------|---|-----------------------|--|--|--|---------------------------|----------|--|-----------------------------|---------------------------|---------------------------------------|
| (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 | rtionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | Gene of Mana Partr | eral r ging ner? | (k) Percentage ownership |
| SYCAMORE RENAISSANCE LP | RENTAL REAL ESTATE | МО | N/A | | | | res | NO | | res | NO | |
| 1021 N 7TH STREET STE 106 KANSAS CITY, KS 66101 61-1709251 | | | | | | | | | | | | |
| T TOWN HOMES LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | _ |
| 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 | | | | | | | | | | | | |
| TECHNOLOGY HEIGHTS APARTMENTS LP | RENTAL REAL ESTATE | SD | N/A | | | | | | | | | |
| 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 LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 84-1688521 | | | | | | | | | | | | |
| THE ANTLERS LP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| PO BOX 473 SPENCER, IA 51301 20-1888027 | | | | | | | | | | | | |
| THE NATHAN LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-2536126 | | | | | | | | | | | | |
| THE VILLAGE AT HEARTLAND PARK LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0843816 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 47-0834890 | | | | | | | | | | | | |
| THORNBURY WAY LP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| PO BOX 473 14 WEST 21ST STREET SPENCER, IA 51301 | | | | | | | | | | | | |
| 42-1527248 THUNDER WAY LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 | THE REAL POINTE | .,_ | | | | | | | | | | |
| OMAHA, NE 68118 20-1760070 | | | | | | | | | | | | |
| TIERRA VERDE APARTMENTS LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-4798645 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| TRAIL RIDGE PARTNERS II LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 5345 W 151ST TERRACE LEAWOOD, KS 66224 81-2950634 | | | | | | | | | | | | |

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 Name, address, and EIN of allocations? Code V-UBI amount in Percentage Primary activity income(related, Controlling Managing (State income of-year assets ownership related organization unrelated. Box 20 of Schedule K-1 Entity Partner? or excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes Yes No No 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 ОК N/A 3900 N MARTIN LUTHER KING AVE OKLAHOMA CITY, OK 73111 26-1776170 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 ΝE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-5170773 VALLEY VIEW PLACE LLLP RENTAL REAL ESTATE СО N/A 710 WEST MIDLAND AVE WOODLAND PARK, CO 80863 36-4824530 VALLIANT VILLAGE APARTMENTS RENTAL REAL ESTATE ОК N/A 2537 N HIGHWAY 81 DUNCAN, OK 73533 20-2557716 RENTAL REAL ESTATE VAN ALLEN LP IΑ N/A 14 WEST 21ST STREET-PO BOX 473 SPENCER, IA 51301 42-1507169 VICTORY PLACE LLC RENTAL REAL ESTATE ΝE 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 ΝE N/A 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2232245 VILLAGE CROWN II LIMITED RENTAL REAL ESTATE NE N/A **PARTNERSHIP** 3014 NORTH 45TH STREET OMAHA, NE 68104 46-1789241 VILLAGE CROWN LIMITED RENTAL REAL ESTATE ΝE N/A 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 ΝE N/A PARTNERSHIP 2221 NORTH 24TH STREET SUITE 200 **OMAHA, NE 68110** 20-3533854

| Form 990, Schedule R, Part | iii - idenuncation | of Rela | iceu Organiza | | as a rartner: | | l . | | | (j |) 1 | |
|---|---------------------|--|--|--|--|--|---------------------------|---------|--|---------------------------|----------------------------|--------------------------------|
| (a) Name, address, and EIN of related organization | Primary activity | 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 o Mana Parti | eral r iging ner? | (k) Percentage ownership |
| VILLE DE SANTE III LIMITED PARTNERSHIP | RENTAL REAL ESTATE | NE | N/A | | | | 165 | 110 | | 103 | 110 | |
| 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 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-1260184 | | | | | | | | | | | | |
| WALNUT COURT APARTMENTS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| | 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 | DENITAL BEAL ECTATE | N.E | N1/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 74-3123188 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| - | 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 | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-2123886 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | | ted Organiza | tions Taxable | as a Partner | ship | 1 | | 1 | i | | |
|--|----------------------|---|---|--|--|--|-------------------------|-----|--|---------------------------------|----------------------------|---------------------------------------|
| (a) Name, address, and EIN of related organization | Finnary 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 Disprop alloca | | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gen o Mana Parti | eral r iging ner? | (k) Percentage ownership |
| WILBURTON VILLAGE LP | RENTAL REAL ESTATE | ОК | N/A | | | | 103 | 110 | | 103 | | |
| 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 | | | | | | | | | | | | |
| WILDERNESS FALLS LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 27-4849619 | | | | | | | | | | | | |
| WILLOW BEND I LIMITED PARTNERSHIP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 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 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | _ |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 | | | | | | | | | | | | |
| 20-8197688 WOODSON PARK APARTMENTS | RENTAL REAL ESTATE | OK | N/A | | | | | | | | | |
| LTD 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 | | | | | | | | | | | | |

| Form 990, Schedule R, Par | t III - Identificati | on of Re | lated Organi | zations Taxab | e as a Partne | ership | | | | | | |
|--|--------------------------------|---|-------------------------------|--|---------------|------------|----------------------------|------------------|--|---------------------------------|----------------------------|--------------------------------|
| (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) | | (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? | (k) Percentage ownership |
| YORKTOWNE ESTATES II LLC | RENTAL REAL | NE | N/A | , | | | Yes | No | | Yes | No | |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 26-3913156 | ESTATE | | | | | | | | | | | |
| YORKTOWNE ESTATES LLC 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 20-8197598 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| BANCFIRST COMMUNITY FUND 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 38-4027218 | RENTAL REAL ESTATE | NE | N/A | RELATED | -24 | 647,223 | | No | | Yes | | 0.010 % |
| MHEG FUND 2017 LP 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 61-1828583 | RENTAL REAL ESTATE | NE | N/A | RELATED | -237 | 21,198,295 | | No | | Yes | | 0.010 % |
| ADAMS PARK SENIOR COTTAGES I LP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 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 6800 W 64TH STREET SUITE 101 OVERLAND PARK, KS 66202 47-3700134 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| BRITTANY COURT LP 7920 WARD PARKWAY KANSAS CITY, MO 64114 | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| 81-5105858 CHANDLER TERRACE LP 115 N BROADWAY INOLA, OK 74036 | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 47-5406950 COLUMBIA CROSSING LLC | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 600 S WASHINGTON ARDMORE, OK 73401 81-4553801 | | | | | | | | | | | | |
| COURT VIEW LP 14 WEST 21ST ST SPENCER, IA 51303 | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 42-1416426 DELAWARE PLACE LLC 2 SOUTH 14TH ST | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| KANSAS CITY, KS 66102 81-3465626 | | | | | | | | | | | | |
| HERITAGE PLACE BOWLING GREEN LP PO BOX 350 | RENTAL REAL ESTATE | MO | N/A | | | | | | | | | |
| REPUBLIC, MO 65738 81-4841018 HORIZON PLACE APARTMENTS | RENTAL REAL | SD | N/A | | | | | | | | | |
| LP 111 N VAN EPS MADISON, SD 57042 | ESTATE | חפ | IIV/A | | | | | | | | | |
| 38-4026716 JACK ESTATES LP | RENTAL REAL | CA | N/A | | | | | | | | | |
| PO BOX 1808 TURLOCK, CA 95381 47-0975505 | ESTATE | | | | | | | | | | | |

| Form 990, Schedule R, Part | iii - identilication | | aceu Organiza | icions raxable | as a raftner | אווופ | I | | 1 | (j | , I | |
|---|--------------------------------|---|-----------------------|---|---------------------------------|--|-------------------------|----------|--|---------------------------------|--------------------|---------------------------------------|
| (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 | (f) Share of total income | (g) Share of end- of-year assets | († Disprop alloca | rtionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | (j Gen o Mana Parti | eral r iging | (k) Percentage ownership |
| KENSINGTON SQUARE LLC | RENTAL REAL ESTATE | KS | N/A | 512-514) | | | Yes | No | | Yes | No | |
| 1313 STONE ST | NEITH RENE ESTATE | 1.0 | 11,77 | | | | | | | | | |
| GREAT BEND, KS 67530 82-1913915 | | | | | | | | | | | | |
| LARKSPUR GARDENS LP | RENTAL REAL ESTATE | AR | N/A | | | | | | | | | |
| 109 W WALNUT WALNUT RIDGE, AR 72476 81-0999128 | | | | | | | | | | | | |
| PAOLA SENIORS II LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 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 | | | | | | | | | | | | |
| PRAGUE TERRACE LP | RENTAL REAL ESTATE | ок | N/A | | | | | | | | | _ |
| 115 N BROADWAY INOLA, OK 74036 47-5420454 | | | | | | | | | | | | |
| | 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 | | | | | | | | | _ |
| 131 S HIGGINS ST MISSOULA, MT 59802 47-2509259 | | | | | | | | | | | | |
| SOUTHVIEW ESTATES LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 108 W 3RD STREET WAYNE, NE 68787 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 | | | | | | | | | |
| 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 | | | | | | | | | | | | |

| (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 | (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 |
|--|--------------------------------|---|-------------------------------|--|------------------------------|-------------------------------|------------------|--|------------------------------|----------------------------|--------------------------------|
| 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 | | | | | | | | | | | |
| WHITTIER PLACE LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | |
| PO BOX 350 REPUBLIC, MO 65738 82-1753715 | | | | | | | | | | | |
| FINNEY PLACE LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | |
| 25 WINDEMERE PLACE ST LOUIS, MO 63112 36-4858099 | | | | | | | | | | | |
| SHADY ACRES LLC | RENTAL REAL ESTATE | OK | N/A | | | | | | | | |
| 600 S WASHINGTON ARDMORE, OK 73401 82-1710018 | | | | | | | | | | | |
| BETHEL ESTATES OF GARDNER PHASE IV LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | |
| 30555 W 119TH ST OLATHE, KS 66061 35-2598956 | | | | | | | | | | | |
| BUCHANAN'S CROSSING SUBDIVISION KANSAS CITY II LP | RENTAL REAL ESTATE | NC | N/A | | | | | | | | |
| 3116 GLEN SUMMIT DR CHARLOTTE, NC 28270 35-2580934 | | | | | | | | | | | |
| CLEVELAND CENTER APARTMENTS LIMITED PARTNERSHIP | RENTAL REAL ESTATE | SD | N/A | | | | | | | | |
| 220 S MINNESOTA AVE SIOUX FALLS, SD 57104 82-4034465 | | | | | | | | | | | |
| EASTBROOKE GARDENS LP | RENTAL REAL ESTATE | CA | N/A | | | | | | | | |
| PO BOX 1808 TURLOCK, CA 95381 82-1544296 | | | | | | | | | | | |
| ELLINWOOD PROPERTIES LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | · |
| 111 N MAIN ST CLARKTON, MO 63837 82-1928655 | | | | | | | | | | | |
| HIGHLAND TRAILS LLC | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | |
| 600 S WASHINGTON ARDMORE, OK 73401 82-3603926 | | | | | | | | | | | |
| JASMINE COURT LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | |
| 8551 LEXINGTON AVENUE LINCOLN, NE 68505 82-3463131 | | | | | | | | | | | |
| MADISON VILLAS LP | RENTAL REAL ESTATE | CA | N/A | | | | | | | | |
| PO BOX 1808 TURLOCK, CA 95381 82-1535418 | | | | | | | | | | | |
| MERRIAM SUNFLOWER LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | |
| 7701 E KELLOGG WICHITA, KS 67207 81-1324025 | | | | | | | | | | | |
| NEBRASKA CITY SENIOR PATIO HOMES LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | |
| 31711 E PINK HILL ROAD GRAIN VALLEY, MO 64029 82-3568774 | | | | | | | | | | | |

| (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) | (j Gen- o Mana Partr | eral r iging ner? | (k) Percentage ownership |
|---|----------------------|---|-------------------------------|--|---------------------------------|-----|---------------------------|---------|--|----------------------------------|----------------------------|---------------------------------------|
| OAK POINT PARTNERS LLC | RENTAL REAL ESTATE | МО | N/A | | | | 1 63 | .10 | | 163 | 110 | |
| 5240 PROSPECT AVENUE KANSAS CITY, MO 64130 45-5280079 | | | | | | | | | | | | |
| OPG WOLFFORTH PARTNERS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 204 S SANTA FE AVE SALINA, KS 67401 82-2517770 | | | | | | | | | | | | |
| ROCKTREE FULTON LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | · |
| PO BOX 639 DEXTER, MO 63841 35-2525702 | | | | | | | | | | | | |
| SUNFLOWER GARDENS III LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 2145 NORTH TOPEKA WICHITA, KS 67214 82-2194932 | | | | | | | | | | | | |
| SUNSET SPENCER LLLP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 14 WEST 21ST ST SPENCER, IA 51303 30-0956312 | | | | | | | | | | | | |
| TEAL LAKE VILLAGE MEXICO LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | · |
| PO BOX 397 DEXTER, MO 63841 81-4829881 | | | | | | | | | | | | |
| THE LINK OF HUTCHINSON LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 10 EAST 1ST AVENUE HUTCHINSON, KS 67504 82-3052600 | | | | | | | | | | | | |
| THE LINK OF HUTCHINSON II LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 10 EAST 1ST AVENUE HUTCHINSON, KS 67504 82-3081305 | | | | | | | | | | | | |
| WASHITA PLAINS II LLC | RENTAL REAL ESTATE | ок | N/A | | | | | | | | | |
| 600 S WASHINGTON ARDMORE, OK 73401 82-3548844 | | | | | | | | | | | | |
| YBARRA PLACE II LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 2010 SE CALIFORNIA AVE TOPEKA, KS 66607 35-2610844 | | | | | | | | | | | | |
| OPG LAMAR PARTNERS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | · |
| 204 S SANTA FE AVE STE 9 SALINA, KS 67401 82-2597164 | | | | | | | | | | | | |
| ADAMS PARK CROWN I LIMITED PARTNERSHIP | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 4324 FORT ST OMAHA, NE 68111 61-1774040 | | | | | | | | | | | | |
| CANTERBURY ESTATES LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 2459 11TH AVE SIDNEY, NE 69162 30-0968297 | | | | | | | | | | | | |
| THE ESTATES OF MIDWEST CITY LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 30555 W 119TH ST OLATHE, KS 66061 32-0548183 | | | | | | | | | | | | |
| 1314 W 3RD LLC | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 509 WALKER WOODBINE, IA 51579 37-1857376 | | | | | | | | | | | | |

| Form 990, Schedule R, Par | t III - Identificati | on of Re | elated Organi | zations Taxab | le as a Partne | ership | | | | | | |
|---|--------------------------------|---|-----------------------|--|--|--|-------------------------|----------|--|-------|-----------------------------|--------------------------------|
| (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 Disprop alloca | rtionate | (i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065) | IMan- | eral er aging ner? | (k) Percentage ownership |
| | RENTAL REAL ESTATE | NE | N/A | | | | 163 | 110 | | 163 | 110 | |
| 1044 N 115TH STREET SUITE | | | | | | | | | | | | |
| 500 OMAHA, NE 68154 37-1870114 | | | | | | | | | | | | |
| JEFFERSON ESTATES LLC | RENTAL REAL | NE | N/A | | | | | | | | | |
| 8551 LEXINGTON AVENUE LINCOLN, NE 68505 82-4666279 | ESTATE | | | | | | | | | | | |
| MAGNOLIA RIDGE APARTMENTS LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | _ |
| 8551 LEXINGTON AVENUE LINCOLN, NE 68505 83-0677754 | | | | | | | | | | | | |
| CHI PENN OAKS LLLP | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 14 WEST 21ST ST SPENCER, IA 51303 35-2608073 | | | | | | | | | | | | |
| VILLAGE MEADOW LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | _ |
| 720 W BUSINESS HWY 60 DEXTER, MO 63841 82-1863408 | | | | | | | | | | | | |
| WATERMAN RESIDENCES LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 400 SOUTH BROADWAY WICHITA, KS 67202 82-2190215 | | | | | | | | | | | | |
| NINE MILE STATION SENIOR LIVING LLC | RENTAL REAL ESTATE | со | N/A | | | | | | | | | |
| 155 INVERNESS DR W STE 200 ENGLEWOOD, CO 80112 81-2094853 | | | | | | | | | | | | |
| EASTRIDGE VILLAS LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| PO BOX 382 GREAT BEN, KS 67530 83-1560582 | | | | | | | | | | | | |
| SOLANA VILLAGE TOWNHOMES LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 1207 SO MAIN ST MCPHERSON, KS 67460 82-4208962 | | | | | | | | | | | | |
| THE VILLAS OF SMITHVILLE LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| PO BOX 248 STOCKTON, MO 65785 81-4753291 | | | | | | | | | | | | |
| MHEG FUND 50 LP | RENTAL REAL ESTATE | NE | N/A | RELATED | -763 | 162,759,597 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 32-0561145 | | | | | | | | | | | | |
| EAGLE FLATS LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 8551 LEXINGTON AVENUE LINCOLN, NE 68505 83-0677143 | | | | | | | | | | | | |
| REMINGTON I LLLP | RENTAL REAL ESTATE | со | N/A | | | | | | | | | |
| 300 REMINGTON STREET FORT COLLINS, CO 80524 83-3102538 | | | | | | | | | | | | |
| SAYRE COMMUNITY HOUSING LP | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 1401 SOUTH MAIN ST STILLWATER, OK 74074 83-1818570 | | | | | | | | | | | | |
| CALIFORNIA APARTMENTS MO LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| PO BOX 639 DEXTER, MO 63841 81-0784529 | | | | | | | | | | | | |

| (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 | (g) | (h Dispropr 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 |
|--|----------------------|---|-------------------------------|--|------------------------------|-----|---------------------------|---------|--|---------------------------------|----------------------------|--------------------------------|
| WESTPORT MARSHALL LP | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| 1415 S ODELL AVE MARSHALL, MO 65340 36-4824000 | | | | | | | | | | | | |
| 4834 S 23RD STREET LLC 509 WALKER WOODBINE, IA 51579 | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 30-1003165 | RENTAL REAL ESTATE | IA | N/A | | | | | | | | | |
| 14 WEST 21ST STREET SUITE 3 PO BOX SPENCER, IA 51301 32-0545996 | | IA | N/A | | | | | | | | | |
| OPG MAPLEWOOD PARTNERS II LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 227 N SANTA FE AVE STE 310 SALINA, KS 67401 83-1667440 | | | | | | | | | | | | |
| VILLAS AT CRYSTAL COURT III LLC 8551 LEXINGTON AVE LINCOLN, NE 68505 83-3136237 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| | RENTAL REAL ESTATE | со | N/A | | | | | | | | | |
| 328 RIVERVIEW CT CANON CITY, CO 81212 36-4916223 | | | | | | | | | | | | |
| APARTMENTS LIMITED PARTNERSHIP | RENTAL REAL ESTATE | SD | N/A | | | | | | | | | |
| 220 S MINNESOTA AVE SIOUX FALLS, SD 57104 83-3015266 | | | 21/2 | | | | | | | | | |
| WILDWOOD LLC 8551 LEXINGTON AVENUE LINCOLN, NE 68505 83-2403542 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| EPWORTH SENIOR RESIDENCES LLC 201 W 11TH ST HAYS, KS 67601 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 82-4255715 | DENTAL DEAL SOTATE | 140 | DI/A | | | | | | | | | |
| FORT SCOTT LOFTS LLC 832 PENNSYLVANIA ST LAWRENCE, KS 66044 35-2606479 | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| COFFEYVILLE, KS 67337 83-1031747 | | | | | | | | | | | | |
| OSBORNE VIEW ESTATES LLC PO BOX 335 CENTRAL CITY, NE 68826 83-2267202 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| 16284 WESTWOODS BUSINESS PARK ELLISVILLE, MO 63021 | | | | | | | | | | | | |
| 83-2447893 OPG CANYON LAKE PARTNERS LLC | RENTAL DEAL COTATE | KS | N/A | | | | | | | | | |
| 227 N SANTA FE AVE STE 310 SALINA, KS 67401 83-1659433 | INCINIAL REAL ESTATE | , ,,, | IVA | | | | | | | | | |
| STILLWATER SPRINGS LLC | RENTAL REAL ESTATE | ок | N/A | | | | | | | | | |
| 600 SOUTH WASHINGTON ARDMORE, OK 73401 83-0638181 | | | | | | | | | | | | |

| Form 990, Schedule R, Part | III - Identification | | ted Organiza | tions Taxable | as a Partners | ship | ı | | 1 | | . 1 | |
|---|--------------------------------|---|--|--|---------------|--|---------------------------|---------|--|---------------------------------|----------------------------|--------------------------------|
| (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) | | (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 Gen o Mana Parti | eral r iging ner? | (k) Percentage ownership |
| COLUMBUS CHERRY CREEK LLC | RENTAL REAL ESTATE | NE | N/A | | | | 163 | NO | | 165 | NO | |
| PO BOX 335 CENTRAL CITY, NE 68826 83-3064334 | | | | | | | | | | | | |
| THE RESIDENCES AT GREENWAY LIMITED PARTNERSHIP | RENTAL REAL ESTATE | SD | N/A | | | | | | | | | |
| 630 S MINNESOTA AVE SIOUX FALLS, SD 57104 83-3330145 | | | | | | | | | | | | |
| WESTPORT VILLAGE MARSHALL LP 1415 S ODELL MARSHALL, MO 65340 36-4913653 | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| | RENTAL REAL ESTATE | IL | N/A | | | | | | | | | |
| 666 DUNDEE RD STE 1102 NORTHBROOK, IL 60062 83-4615158 | | | | | | | | | | | | |
| MRES CEDARWOOD HOLDINGS LP 11128 JOHN GALT BLVD 100 OMAHA, NE 68137 83-2051780 | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | _ |
| RT 1 BOX 189-A STOCKTON, MO 65785 84-1862538 | | | | | | | | | | | | |
| HORIZON ESTATES LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| PO BOX 335 CENTRAL CITY, NE 68826 36-4913153 | | | | | | | | | | | | |
| INOLA VILLA LIMITED PARTNERSHIP | RENTAL REAL ESTATE | OK | N/A | | | | | | | | | |
| 115 N BROADWAY INOLA, OK 74036 26-1389059 | | | | | | | | | | | | |
| LINDSBORG PLACE LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 2107 INDUSTRIAL DR MCPHERSON, KS 67460 84-2050373 | | | | | | | | | | | | |
| VICTORY APARTMENTS II - OMAHA LLC | RENTAL REAL ESTATE | NE | N/A | | | | | | | | | |
| 1004 FARNAM STREET SUITE 400 OMAHA, NE 68102 83-2259257 | | | | | | | | | | | | |
| EILEEN'S PLACE LLC | RENTAL REAL ESTATE | МО | N/A | | | | | | | | | |
| 305 W COMMERCIAL ST SPRINGFIELD, MO 65803 83-1579316 | | | | | | | | | | | | |
| LAURELBROOKE ESTATES LP | RENTAL REAL ESTATE | CA | N/A | | | | | | | | | |
| PO BOX 1808 TURLOCK, CA 95381 83-1327490 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | ок | N/A | | | | | | | | | |
| 20 E 9TH ST SHAWNEE, OK 74801 84-1848025 | | | | | | | | | | | | |
| LINDENWOODS TOWNHOMES II LLC | RENTAL REAL ESTATE | ок | N/A | | | | | | | | | |
| 20 E 9TH ST SHAWNEE, OK 74801 83-2654281 | | | | | | | | | | | | |
| | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 227 N SANTA FE SUITE 310 SALINA, KS 67401 82-3298047 | | | | | | | | | | | | |

| Form 990, Schedule R, Par | t III - Identificati | 1 | lated Organi: | zations Taxabl | e as a Partne | ership | 1 | | 1 | | . 1 | |
|--|--------------------------------|---|--------------------------------------|--|--|--|----------------------------|------------------|--|---------------------------------|----------------------------|---------------------------------------|
| (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 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 nging ner? | (k) Percentage ownership |
| DRAIDIE ED CE LO | DENTAL DEAL | 140 | N. / A | , | | | Yes | No | | Yes | No | |
| PRAIRIE EDGE LP 220 NW EXECUTIVE WAY LEES SUMMIT, MO 64063 84-1922163 | RENTAL REAL ESTATE | MO | N/A | | | | | | | | | |
| RENOVA V LLLP | RENTAL REAL | со | N/A | | | | | | | | | |
| 6000 SPINE ROAD SUITE 101 BOULDER, CO 80301 84-3097553 | ESTATE | | | | | | | | | | | |
| 424 S 24TH STREET LLC | RENTAL REAL | IA | N/A | | | | | | | | | |
| 505 WALKER STREET WOODBINE, IA 51579 27-4277847 | ESTATE | | | | | | | | | | | |
| BETHEL ESTATES OF LAWRENCE PHASE II LP | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 30555 W 119TH ST OLATHE, KS 66061 84-2069339 | | | | | | | | | | | | |
| NEOSHO PLAZA LP | RENTAL REAL | МО | N/A | | | | | | | | | |
| 220 NW EXECUTIVE WAY LEES SUMMIT, MO 64063 84-2028365 | ESTATE | | | | | | | | | | | |
| OHIO 36 LIMITED PARTNERSHIP | | NE | N/A | | | | | | | | | |
| 4324 FORT ST OMAHA, NE 68111 30-1129930 | ESTATE | | | | | | | | | | | |
| THE MILL TOWNHOMES OF STAPLES LIMITED PARTNERSHIP | RENTAL REAL ESTATE | MN | N/A | | | | | | | | | |
| 37 28TH AVE N STE 102 SAINT CLOUD, MN 56303 37-1915474 | | | | | | | | | | | | |
| 7TH DAY SENIOR HOUSING | RENTAL REAL | KS | N/A | | | | | | | | | |
| 3301 PARALLEL PARKWAY KANSAS CITY, KS 66104 84-2093117 | ESTATE | | | | | | | | | | | |
| FIELDCREST LLC | RENTAL REAL ESTATE | KS | N/A | | | | | | | | | |
| 2145 NORTH TOPEKA WICHITA, KS 67214 84-1946112 | | | | | | | | | | | | |
| LAKELAND COVE SENIOR VILLAGE LP | RENTAL REAL ESTATE | ОК | N/A | | | | | | | | | |
| 1401 SOUTH MAIN ST STILLWATER, OK 74074 83-4620157 | | | | | | | | | | | | |
| MHEG FUND 51 LP | RENTAL REAL | NE | | | -27 | 68,024,550 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 30-1166390 | ESTATE | | | | | | | | | | | |
| MHEG OZ FUND 1 LP | RENTAL REAL ESTATE | NE | | | 3 | 1,205,721 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 37-1950813 | LSIAIE | | | | | | | | | | | |
| MHEG NE SC FUND I LP | RENTAL REAL | NE | | | -2 | 2,806,508 | | No | | Yes | | 0.010 % |
| 515 N 162ND AVE SUITE 202 OMAHA, NE 68118 35-2641019 | ESTATE | | | | | | | | | | | |

Form 990, Schedule R, Part V - Transactions With Related Organizations (b) (c) (d) Name of related organization Amount Involved Transaction Method of determining amount involved type(a-s) BANCFIRST COMMUNITY FUND I LP 3,315,440 D MHEG FUND 40 LP D 234,000 MHEG FUND 42 LP D 100,000 MHEG FUND 44 LP D 2,155,824 MHEG FUND 46 LP D 5,361,298 MHEG FUND 48 LP D 14,597,753 MHEG FUND 2017 LP 9,370,068 D MHEG FUND 50 LP 20,465,532 D MHEG FUND 40 LP L 67,850 MHEG FUND 42 LP 77,000 MHEG FUND 44 LP L 1,072,250 MHEG FUND 46 LP L 76,688 MHEG FUND 48 LP 68,825 L MHEG FUND 50 LP 4,416,852 MIDWEST HOUSING DEVELOPMENT FUND INC В 772,500 MHEG FUND 51 LP D 3,424,128 MHEG FUND 51 LP 3,362,765 L MHEG NE SC FUND 1 LP L 300,000

L

Α

1,192,000

13,300

MHEG OZ FUND LP

MIDWEST HOUSING DEVELOPMENT FUND INC