POSTMARK DATE JUL 1 4 2020

Form **990-PF**

EXTENDED TO MAY 15, 2020

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

Go to www.irs.gov/Form990PF for instructions and the latest information.

For	calendar year 2018 or tax year beginning JUL	1, 2018	, and ending	JUN 30, 2019	
Nar	me of foundation			A Employer identification	number
	ACCESSIBLE APARTMENTS OF C			58-1828374	
	mber and street (or P O box number if mail is not delivered to street a	•	Room/suite	B Telephone number	
	2585 W. CLEMMONSVILLE RD.			336-765-39	
	y or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is p	ending, check here
_	VINSTON-SALEM, NC 27127	I leutrol roture of a fe	www.nuble.eboub.	D 4 Faraian araanimatiaaa	ahaalahara N
u	Check all that apply: Initial return Final return	Amended return	ormer public charity	D 1. Foreign organizations	s, check here
	X Address change	Name change		2. Foreign organizations me check here and attach co	eting the 85% test,
н (Check type of organization: X Section 501(c)(3) exe				
ï	-	Other taxable private founda	otion OM	E If private foundation sta under section 507(b)(1)	
l Fa	air market value of all assets at end of year J Accounting	<u>`</u> ,	X Accrual	F If the foundation is in a	• •
		ner (specify)		under section 507(b)(1)	
•	\$ 541,888. (Part I, colum		S.)		(-//
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	251,864.			
	2 Check If the foundation is not required to attach Sch. 8		10.		
	3 Interest on savings and temporary cash investments	80.	80.	80.	STATEMENT 1
	4 Dividends and interest from securities	CEIVED	<u> </u>		
	5a Gross rents	79			Į
	b Net rental income or (loss)	K 0 4 2020 8			ł
ē	62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	0 4 2020 0			
Revenue	b assets on line 6a		· ·		
ě	7 Capital gain net income (from Part IV, tine 2)	DEN. U.	0.		
_	8 Net Short-term capital gain	,	11 ,4		!
	9 Income modifications Gross sales less returns			,	<u> </u>
	102 and allowances				<u> </u>
	D Less Cost of goods sold		· · · · · · · · · · · · · · · · · · ·		<u> </u>
	c Gross profit or (loss)	64,553.	0.	64 553	STATEMENT 2
	11 Other income	316,497.	80.	64,633.	SIAIEMENI Z
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	0.	0.	04,033.	0.
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	•	· ·	· · · · · · · · · · · · · · · · · · ·	•
	15 Pension plans, employee benefits				
es					
enses	b Accounting fees				
Exp	c Other professional fees				
e E	17 Interest	54,425.	0.	54,425.	0.
aţ.	18 Taxes	· · · · · · · · · · · · · · · · · · ·			
ist	19 Depreciation and depletion	57,049.	0.	57,049.	
Ē	20 Occupancy	15,193.	0.	15,193.	0.
Ā	21 Travel, conferences, and meetings	574.	0.	574.	0.
ב	22 Printing and publications				
Jg a	23 Other expenses STMT 3	212,578.	80.	-62,608.	274,765.
Operating and Administrative	24 Total operating and administrative				
per	expenses. Add lines 13 through 23	339,819.	80.	64,633.	274,765.
0	25 Contributions, gifts, grants paid	0.			0.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	339,819.	80.	64,633.	274,765.
	27 Subtract line 26 from line 12.				
	Excess of revenue over expenses and disbursements	-23,322.			
	b Net investment income (if negative, enter -0-)		0.		
	c Adjusted net income (if negative, enter -0-)	,	ı	0.]
8235	501 12-11-18 LHA For Paperwork Reduction Act Notice	e, see instructions.			Form 990-PF (2018)

Form **990-PF** (2018)



-	-	Ralance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
۳	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	6,956.	1,475.	1,475.
		Savings and temporary cash investments	137,779.	155,197.	155,197.
	i	Accounts receivable ► 1,117.		,	
	-	Less: allowance for doubtful accounts	1,040.	1,117.	1,117.
	4	Pledges receivable ►	,		
		Less; allowance for doubtful accounts			······································
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	7	_ ` ` ` ` _			
	' '	Other notes and loans receivable Less: allowance for doubtful accounts			
					
Assets	0	Inventories for sale or use	12,647.	6,408.	6,408.
Ass	40.	Prepaid expenses and deferred charges	12,047.	0,400.	0,400.
-	l .	Investments - U.S. and state government obligations			
	Į.	Investments - corporate stock			
	[Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	ŀ	Less accumulated depreciation			
	ŀ	Investments - mortgage loans			
		Investments - other			
	14	Land, buildings, and equipment: basis ► 1,734,581. Less accumulated depreciation			
			353,870.	302,816.	302,816.
	15	Other assets (describe ► STATEMENT 4)	77,142.	74,875.	74,875.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	589,434.	541,888.	541,888.
	17	Accounts payable and accrued expenses	17,248.	22,440.	
	18	Grants payable			
S.	19	Deferred revenue	429.	130.	
ij	20	Loans from officers, directors, trustees, and other disqualified persons			-
Liabilities	21	Mortgages and other notes payable	1,552,736.	1,523,341.	
=	22	Other liabilities (describe > STATEMENT 5)	6,507.	6,785.	
	23	Total liabilities (add lines 17 through 22)	1,576,920.	1,552,696.	•
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
Ses	24	Unrestricted	-987,486.	-1,010,808.	
and	l	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
ò	27	Capital stock, trust principal, or current funds			
ets	28				
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
et	30	Total net assets or fund balances	-987,486.	-1,010,808.	
Z	"	Total net assets of fund balances	307,1001	1,010,000.	
	24	Total liabilities and net assets/fund balances	589,434.	541,888.	
_	31	<u> </u>	<u> </u>	341,000.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
<u>_</u>	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	20		
			30	,	_097 196
	•	st agree with end-of-year figure reported on prior year's return)		1 1	-987,486. -23,322.
		r amount from Part I, line 27a		2	-23,322.
		r increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	-1,010,808.
		eases not included in line 2 (itemize)		5	0.
6	Fota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	-1,010,808.

Part I	V Capital Gains	and Lo	osses for Tax on I	nvestmen	t Income		·				
	(a) List and describe 2-story brick wa	the kind(s arehouse;	s) of property sold (for exa or common stock, 200 sh	mple, real esta s. MLC Co.)	ite,	I P	How ac Purc Don:	cquired hase ation		te acquired , day, yr.)	(d) Date sold (mo., day, yr.)
1a											
<u>b</u>	NO	NE	<u>-</u> -								
<u>c</u>						<u> </u>					
<u>d</u>				-		-					
е		(4)	Decree and a series of	(-) (-)		Щ,				• "	<u> </u>
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale		_			Gain or (loss lus (f) minus	
<u>a</u>				ļ							
<u>b</u>				<u> </u>							
d				<u>.</u>				·			
				 							
	olete only for assets showing	l ng gain in	column (h) and owned by	the foundation	on 12/31/69				(I) Gains	(Col. (h) gain	minue
	,,		(j) Adjusted basis		cess of col. (1)			С	ol. (k), bu	it not less that	n -0-) or
(i)	FMV as of 12/31/69		as of 12/31/69		col. (j), if any				Losse	es (from col. (h)) ´
			· · · · · · · · · · · · · · · · · · ·								
<u>b</u>		· · · ·		· · · · · · · · · · · · · · · · · · ·							
С	· ······		<u>-</u>				-				
d											
<u>e</u>	·····				· ··						
			∫ If gain, also ente	r in Part I line	7	7		-			
2 Capital	gain net income or (net ca	pital loss)				-	2				
3 Net sh	ort-term capital dain or (los	ss) as defi	ined in sections 1222(5) ai			_					
	, also enter in Part I, line 8,			iu (0 <i>)</i> .		J					
If (loss	s), enter -0- in Part I, line 8	•	•				3				
Part V	Qualification U	Inder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent In	come		
(For optio	nal use by domestic private	e foundati	ons subject to the section	4940(a) tax or	net investment in	come	e.)				
If section	4940(d)(2) applies, leave t	his nart hl	ank								
11 00011011	10 10(0)(E) applies, leave t	nio part or	uin.						•		
			tax on the distributable an		•	rıod?					Yes X No
			ection 4940(e). Do not cor			-4		-	-		
- Enter	(a)	each colui	mn for each year; see the I	nstructions be	fore making any e				1		741
Calaad	Base periód years		(b) Adjusted qualifying dis	tributions	Net value of no	(C) ncha		1100 2000	.	Distrib	(d)
Calenda	ar year (or tax year beginni	ng in)			iver value of file	IIIII	ritable-use assets (col. (b) divided by col. (c))				ided by col. (c))
	2017			7,890.							
	2016		34	0,9/2.							
	2015	<u> </u>	 -								
	2014 2013										
	2013	J									
2 Total o	of line 1, column (d)								2		.000000
		5_vear had	se period - divide the total	on line 2 by 5 i	n or by the numb	ar of s	iparc				.000000
	indation has been in existe			un mie z by o.	o, or by the number	61 01 3	ycars		3		.000000
1110 100	mation has been in existe	1106 11 1633	tilali 5 years						<u> </u>	<u> </u>	.00000
4 Enter t	he net value of noncharitat	عد معار-ما	sets for 2018 from Part X,	line 5					4		
7 LINGIL	THE HELL VALUE OF HOHEHAITMAN	//C U3C U3.	3013 101 2010 1101111 art A,	iiio o					⊢	-	
5 Multini	ly line 4 by line 3								5		0.
• Midilipi	y iiilo 4 by iiilo 5								<u> </u>	 	
6 Enter 1	% of net investment incon	ne (1% of	Part I line 27h)						6		0.
Citto	70 Of fict invosament incom	10 (170 01	1 art 1, 11110 270)						 	+	
7 Add lin	es 5 and 6								7		0.
	v m v								<u> </u>	+	
8 Enter o	ualifying distributions fron	n Part XII,	line 4				,		8	<u> </u>	274,765.
	B is equal to or greater than Part VI instructions.	ı lıne 7, ch	neck the box in Part VI, line	1b, and comp	lete that part using	g a 19	% ťax r	ate.			

Form 990-F	<u> </u>			VC.		1828			Page 4
Part VI					948	- see	ınstrı	ıctio	ns)
1a Exem	pt operating foundations described in section 4940(d)(2), check here 🕨 📖 and ei	nter "N//	A" on line	·)	-				l
	of ruling or determination letter: (attach copy of letter if nec			• •	<u> </u>				
b Dome	istic foundations that meet the section 4940(e) requirements in Part V, check here	ــا	and enter	1%	1				0.
of Par	rt I, line 27b					i			1
c All oth	ner domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Par	t I, line 12	, col. (b). 🕽					
2 Tax u	nder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; ot	hers, er	iter -0-)		2				0.
3 Add II	nes 1 and 2				3				0.
4 Subtif	tle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, e	nter -0-)		4				0.
5 Tax b	ased on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5				0.
6 Credit	ts/Payments:								- 1
a 2018	estimated tax payments and 2017 overpayment credited to 2018	6a		0.					1
b Exem	pt foreign organizations - tax withheld at source	6b		0.					1
c Tax p	aid with application for extension of time to file (Form 8868)	6с	l	0.					ĺ
d Backı	ıp withholding erroneously withheld	6d		0.					
7 Total	credits and payments. Add lines 6a through 6d				7				0.
8 Enter	any penalty for underpayment of estimated tax. Check here if Form 2220 is attain	ched			8				0.
9 Tax d	ue. If the total of lines 5 and 8 is more than line 7, enter amount owed			>	9				0.
10 Overp	payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			•	10				
11 Enter	the amount of line 10 to be. Credited to 2019 estimated tax			Refunded ▶	11				
Part VI	I-A [·] Statements Regarding Activities								
1a Durin	g the tax year, did the foundation attempt to influence any national, state, or local legis	lation o	r did it par	ticipate or intervene	ın			Yes	
any p	olitical campaign?						1a		X
b Did it	spend more than \$100 during the year (either directly or indirectly) for political purpos	es? Se	e the instr	uctions for the defin	ition		1b		X
If the	answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	f any m	aterials pi	iblished or				,	
distrit	outed by the foundation in connection with the activities.								
c Did th	e foundation file Form 1120-POL for this year?						1c		X
d Enter	the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:							91
(1) 0	On the foundation. > \$ 0. (2) On foundation managers	.▶\$		0.					,
e Enter	the reimbursement (if any) paid by the foundation during the year for political expendi	ture tax	imposed	on foundation	<u>.</u> '				
mana	gers. ▶ \$ 0 •						l		
2 Has th	ne foundation engaged in any activities that have not previously been reported to the IF	RS?					2		X
If "Yes	s," attach a detailed description of the activities.								}
3 Has th	ne foundation made any changes, not previously reported to the IRS, in its governing ii	nstrume	ent, article	s of incorporation, c	r				
bylaw	s, or other similar instruments? If "Yes," attach a conformed copy of the changes						3		X
4a Did th	e foundation have unrelated business gross income of \$1,000 or more during the year	L)					4a		X
b If "Yes	s," has it filed a tax return on Form 990-T for this year?				N	/A	4b		
5 Was t	here a liquidation, termination, dissolution, or substantial contraction during the year?						5		X
If "Yes	s," attach the statement required by General Instruction T								1
6 Are th	ne requirements of section 508(e) (relating to sections 4941 through 4945) satisfied er	ther:							
● By l	language in the governing instrument, or								1
● By :	state legislation that effectively amends the governing instrument so that no mandatory	/ directi	ons that c	onflict with the state	law				
remai	n in the governing instrument?						6	X	
7 Did th	ie foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	lete Par	t II, col. (c), and Part XV			7	X	
							<i>[,</i>		
8a Enter	the states to which the foundation reports or with which it is registered. See instruction	ns. 🕨					١.		
NC							·		
b If the	answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Al	torney	General (c	r designate)					
of eac	ch state as required by General Instruction G? If "No," attach explanation	-		•			8b	X	
	foundation claiming status as a private operating foundation within the meaning of sec	ction 49	(3) o	r 4942(j)(5) for cale	ndar				
	2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com			•			9		X 0
-	ny persons become substantial contributors during the tax year? If "Yes " attach a schedu			and addresses			10		X

Form **990-PF** (2018)

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► NC HOUSING SERVICES AND MANAGEMENT Telephone no. ► 336-76	5-3	906	
'7	Located at ► 2585 W. CLEMMONSVILLE RD. SUITE 102, WINSTON-SALE ZIP+4 ►27		,,,,	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	121	_	П
10		N	/A	
16	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,	7.4	Yes	No
10		16	162	X
	securities, or other financial account in a foreign country?	16		^
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Da	foreign country Art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		L
		,	Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year, did the foundation (either directly or indirectly):		162	NO
14	The second se			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		1	,
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			<u>. </u>
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	_	
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	j l		
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		<u> </u>	
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	r		
	during the year?	1	l	
b	olf "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			İ
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	<u> </u>		·
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X

Part VII-D Statements negaring Activities for Willer	Offit 4720 Way be i	nequired (contin	uea)					
5a During the year, did the foundation pay or incur any amount to.				Ye	s No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	,		es 🗶 No 「					
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	· · · · · · · · · · · · · · · · · · ·	_					
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
4945(d)(4)(A)? See instructions			es 🗶 No					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t							
the prevention of cruelty to children or animals?			es 🗶 No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	in Regulations	- /- -		_			
section 53.4945 or in a current notice regarding disaster assistance? See instri			N/A	5b	 _			
Organizations relying on a current notice regarding disaster assistance, check l				- 4				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. —		'				
expenditure responsibility for the grant?	I.	I/A 🔲 Y	es L No		i i			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				i				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				•`			
a personal benefit contract?		Y	es 🗶 No 📙	_				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X			
If "Yes" to 6b, file Form 8870.			[
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es 🗓 No 📙					
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b				
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration of				,			
excess parachute payment(s) during the year?			es X No		*			
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highl	у					
1 List all officers, directors, trustees, and foundation managers and t								
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou alio	Expense unt, other wances			
LEE SCHULTE	CHAIRMAN							
2585 W. CLEMMONSVILLE ROAD, SUITE 102				İ				
WINSTON-SALEM, NC 27127	0.00	0.	0.		0.			
CAROL THREATT	VICE CHAIRMAN							
2585 W. CLEMMONSVILLE ROAD, SUITE 102								
WINSTON-SALEM, NC 27127	0.00	0.	0.		0.			
DEBORAH CALDERON	BOARD MEMBER							
2585 W. CLEMMONSVILLE ROAD, SUITE 102				1				
WINSTON-SALEM, NC 27127	0.00	0.	0.		0.			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou allo	xpense int, other wances			
NONE				†				
- · · · · · · · · · · · · · · · · · · ·								
Total number of other employees paid over \$50,000			>		0			
				200 5				

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		10203/4 Page /
3 Five highest-paid independent contractors for professional services. If none, enter "!		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		-
Tabel number of others recovered over \$50,000 for professional convices		▶ 0
Total number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities	•	<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produce	I information such as the ed, etc.	Expenses
1 THE ORGANIZATION PROVIDES HOUSING FOR THE CAR OF ELDERLY AND HANDICAPPED INDIVIDUALS (30 UN		
SECTION 202 OF THE U.S HOUSING ACT OF 1959.		339,819.
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line 1 N/A	is 1 and 2.	Amount
2		•
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

For	m 990-PF (2018) ACCESSIBLE APARTMENTS OF CHARLOTTE, INC.	58-1828374	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	indations, see instruction	ns)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		-
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	3,414.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,414.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,414.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 6	4	3,414.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations at	nd certain	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 27	4,765.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4 27	4,765.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 27	4,765.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for the section	

Form **990-PF** (2018)

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI, line 7	·			0.
2 Undistributed income, if any, as of the end of 2018		 		
a Enter amount for 2017 only			0.	
b Total for prior years:		^		
3 Excess distributions carryover, if any, to 2018:		0.		
a From 2013				
b From 2014				
c From 2015				
d From 2016 320,972.				
e From 2017 287,890.				
f Total of lines 3a through e	608,862.			
4 Qualifying distributions for 2018 from				!
Part XII, line 4: ►\$ 274,765.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				0.
e Remaining amount distributed out of corpus	274,765.			-
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	883,627.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		İ
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019		٠,		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.]
Subtract lines 7 and 8 from line 6a	883,627.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015		•		
c Excess from 2016 320, 972.				
d Excess from 2017 287,890.				į
e Excess from 2018 274,765.				<u> </u>

Form 990-PF (2018) ACCESSI Part XIV Private Operating F		NTS OF CHAR			28374 Page 1
			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	•	•	▶	, , _ , _ , _ , _ , _ , _ , _ , _ ,	/
b Check box to indicate whether the found		ng foundation described i			42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0047	Prior 3 years	1110045	(-) 7-4-1
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.			/		
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon. a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(1)(3)(B)(1)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5.000 or mo	ore in assets
at any time during t				. ,	
Information Regarding Foundation List any managers of the foundation whyear (but only if they have contributed in NONE	o have contributed more		ributions received by th	e foundation before the clos	ee of any tax
b List any managers of the foundation who other entity) of which the foundation has			or an equally large port	ion of the ownership of a pa	irtnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation of	nly makes contributions	to preselected charitable	organizations and does		ests for funds. If
the foundation makes gifts, grants, etc., a The name, address, and telephone num				<u> </u>	
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s such as by neographic	al areas, charutable fields	kinds of institutions or	other factors:	

Jart XV Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
a Paid during the year				
NONE				
NONE				
	•			
Total			► 3a	
b Approved for future payment				
NONE				
		ļ		
		}		
		ļ		
Total			▶ 3b	_

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a RENTAL INCOME			-		62 561
b LAUNDRY AND OTHER TENANT			-		63,561.
					
c CHARGES					992.
d					
e					
f			<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	80.	
4 Dividends and interest from securities	-				
5 Net rental income or (loss) from real estate:	 		 		
a Debt-financed property					
	·				
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					* *
c					·
d					
2		·········			
12 Subtotal. Add columns (b), (d), and (e)		0.		80.	64,553.
13 Total. Add line 12, columns (b), (d), and (e)				13	64,633.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom	e is reported	in column (e) of Part XVI-A	contrib	outed importantly to the accord	nnlishment of
the foundation's exempt purposes (other than b				To the account	
1-A INCOME FROM THE RENTAL	OF THE	LOW-INCOME	HOU	SING IS THE P	RIMARY MEANS
BY WHICH ACCESSIBLE APA	RTMENT	S OF CHARLOT	TE.	INC. ACCOMPL	ISHES ITS
PRIMARY PURPOSE OF PROV					
WITH HOUSING AND OTHER					
1-B LAUNDRY AND VENDING SER			CON	VENIENCE OF T	HE TENANTS.
					
					
				<u></u>	
				·	<u> </u>
					·
					
	····				

Form 990				'S OF CHARLOT			328374		ge 1
	Exempt Organ	nizations				·			
	the organization directly or indi					section 501(c)		Yes	No
	ner than section 501(c)(3) organ				•				
	nsfers from the reporting found Cash	lation to a nonchari	table exempt or	ganization of:			10(1)		X
	Other assets						1a(1) 1a(2)		$\frac{\Lambda}{X}$
	er transactions;						14(2)	\longrightarrow	
	Sales of assets to a noncharita	hle exempt organiz	ation				1b(1)		χ
	Purchases of assets from a no						1b(2)		X
	Rental of facilities, equipment,		o gamzanon				1b(3)	\dashv	X
	Reimbursement arrangements						1b(4)	\neg	X
	Loans or loan guarantees						1b(5)		Х
(6)	Performance of services or me	embership or fundra	aising solicitatio	ons			1b(6)	$\neg \uparrow$	X
c Sha	iring of facilities, equipment, ma	ailing lists, other ass	sets, or paid em	ployees			1c	\neg	Х
d If th	e answer to any of the above is	"Yes," complete the	e following sche	edule. Column (b) should al	ways show the fa	air market value of the good	ds, other ass	ets,	
or s	ervices given by the reporting f	foundation. If the fo	undation receiv	ed less than fair market valu	ue in any transac	tion or sharing arrangemer	nt, show in		
col	ımn (d) the value of the goods,								
(a)Line n	(b) Amount involved	(c) Name		e exempt organization	(d) Descrip	otion of transfers, transactions, a	and sharing arr	angemer	ıts
			N/A						
		ļ							
		<u> </u>							
		-		·- · · · · · · · · · · · · · · · · · ·	-				
	 	-							
		 							
	-	-		=			 		
		<u> </u>			-				
	 								
	- 	-							
	· · · · · · · · · · · · · · · · · · ·	†							
2a Ist	ne foundation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	zations describe	d			
	ection 501(c) (other than section	•		, ,			Yes	X	No
	es," complete the following sch								
	(a) Name of org	ganization		(b) Type of organization		(c) Description of relation	onship		
	N/A								
					I				
				<u> </u>	<u> </u>				
ο:	Under penalties of perjury, I declare and belief, it is true, correct, and cor					sever has any knowledge	May the IRS d		
Sign Here	La CI		, ,	1/		, ,	return with the shown below?	See ins	ir
11616	Sugnatur materials or trustee	MI CONTRACTOR OF THE PARTY OF T	··· · · · · · ·	7/7/2012	. <i></i>	IDENT	X Yes		No
	Signature of officer or trustee		Preparer's s	Date '	Title Date	Check if PTI	IM		
	A This was the higher of 2 III	41110	ן ויטף מוכו ס סו	ignatur 6	Louis	" " F	IIA		

Firm's name ▶ BERNARD ROBINSON & COMPANY, LLP

GREENSBORO, NC 27419-9608

GRETA G. MEADS

05/06/20

Check _____ if

self- employed

Firm's EIN ▶ 56-0571159

Phone no. 336-294-4494Form **990-PF** (2018)

P00851798

Paid

Preparer

Use Only

GRETA G. MEADS

Firm's address ▶ PO BOX 19608

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

Employer identification number

A	CCESSIBLE APARTMENTS OF CHARLOTTE, INC.	58-1828374				
Organization type (check	one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ri	ule. See instructions				
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin by one contributor. Complete Parts I and II. See instructions for determining a contributor					
Special Rules						
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a tor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, Inne 1. Complete Parts I and II.	, or 16b, and that received from				
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of the file of	cational purposes, or for the				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
•	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF).				

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

ACCESSIBLE APARTMENTS OF CHARLOTTE, INC.

58-1828374

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	ıl space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	U.S. DEPT. OF HOUSING & URBAN DEVELOPMENT RENTAL ASSISTANCE PAYMENTS WASHINGTON, DC 20410	\$ <u>251,864.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	,	\$	Person Payroll Oncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

ACCESSIBLE APARTMENTS OF CHARLOTTE, INC.

58-1828374

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	f additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Employer identification number

ACCES	SIBLE APARTMENTS OF CHA	RLOTTE, INC.		58-1828374			
Part III	Exclusively religious, charitable, etc., contribution any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	tions to organizations described in section) through (e) and the following line entry. For charitable, etc., contributions of \$1,000 or less fo	r organizations	that total more than \$1,000 for the year			
(a) No.	Use duplicate copies of Part III if additional						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift	-				
	Transferee's name, address, a	.,	Relationship of tra	nsferor to transferee			
•							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
		(a) Transfer of city					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	Transferee 3 name, address, a	10211 + 4	Telationship of a a	insteror to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
			 	. <u>.</u>			
	(e) Transfer of gift						
	Transferee's name, address, a	Relationship of trai	nsferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
				-			
	(e) Transfer of gift						
_	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee			
			-				

FORM 990-PF INTEREST ON SAVI	NGS AND TI	EMPORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE	RE\	(A) /ENUE BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BANK INTEREST		80.		80.	80.
TOTAL TO PART I, LINE 3		80.		80.	80.
FORM 990-PF	OTHER	INCOME			STATEMENT 2
DESCRIPTION		(A) REVENT PER BOO		(B) NET INVEST- MENT INCOME	
RENTAL INCOME LAUNDRY AND OTHER TENANT CHAR	GES	6	3,561. 992.	0	•
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	64	4,553.	0	64,553.
FORM 990-PF	OTHER	EXPENSE	3		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	NET II	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES
OTHER RENTING EXPENSES OFFICE SALARY REIMBURSEMENT OFFICE EXPENSES MANAGEMENT FEE MANAGER SALARY REIMBURSEMENT ACCOUNTING FEES MISC ADMINISTRATIVE EXPENSES PAYROLL REIMBURSEMENT SUPPLIES CONTRACTS GARBAGE AND TRASH REMOVAL SECURITY CONTRACT HEATING/COOLING REPAIRS &	133 4,320 7,813 18,515 22,536 4,666 3,786 20,285 9,363 19,412 2,232 1,999). 3. 5. 5. 5. 5. 5.	0 0 0 0 0 0 80 0 0	4,32 7,81 18,51 22,53 4,66 3,78 20,28 9,36 19,41	0. 0. 3. 0. 5. 0. 6. 0. 6. 0. 5. 0. 3. 0. 2. 0. 2. 0.
MAINTENANCE MISC OPERATING EXPENSES PAYROLL TAX REIMBURSEMENT INSURANCE MORTGAGE INSURANCE PREMIUMS MISC FINANCIAL EXPENSES	3,701 50 3,317 11,894 6,361). 7. 1.	0 0 0 0 0	. 3,31° . 3,31° . 11,89° . 6,36°	0. 7. 0. 4. 0.

ACCESSIBLE APARTMENTS OF CHARL	OTTE, INC.			58-1828374	
NURSING HOME/ELDERLY CARE EXPENSES AMORTIZATION DISBURSEMENTS FOR CHARITABLE PURPOSES BAD DEBTS	69,221. 2,545. 0. 421.	0. 0. 0.	69,22 2,54 -274,76	5. 0.	
TO FORM 990-PF, PG 1, LN 23	212,578.	80.	-62,60	08. 274,765.	
FORM 990-PF	OTHER ASSETS			STATEMENT 4	
DESCRIPTION	BEGINNING OF YR BOOK VALUE		OF YEAR K VALUE	FAIR MARKET VALUE	
INTANGIBLE ASSETS TENANT SECURITY DEPOSITS	70,635 6,507		68,090. 6,785.	68,090. 6,785.	
TO FORM 990-PF, PART II, LINE 15	77,142	2.	74,875.	74,875.	
FORM 990-PF O	THER LIABILITIE	ES		STATEMENT 5	
DESCRIPTION		ВОХ	AMOUNT	EOY AMOUNT	
TENANT SECURITY DEPOSITS			6,507.	6,785.	
TOTAL TO FORM 990-PF, PART II, LINE 22			6,507.	6,785.	

FORM 990-PF CASH DEEMED CHARITABLE EXPLANATION STATEMENT STATEMENT PART X, LINE 4

NONE OF THE ORGANIZATION'S CASH ON HAND IS USED FOR ANYTHING OTHER THAN ITS DIRECT CHARITABLE ACTIVITIES, AND ALL SUCH CASH IS NEEDED BY THE ORGANIZATION IN ORDER TO MEET ITS ONGOING CASH FLOW REQUIREMENTS.