SCANNED MAY 22 2012

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

<u> </u>	For the 2	<u> 2011 cale</u>	ndar year, or tax year	beginning				, 2011, :	<u>and end</u>	ing		_	, 20			
В	Check if a	pplicable.	C Name of organization	MIDTOWN	PARK C	ORP	ORATION				_	D Emp	loyer identi	ification number		
	Address o	hange	Doing Business As										94-16	86946		
\Box	Name cha	· ·	Number and street (or I	PO box if ma	ıl ıs not d	elivere	ed to street a	ddress)	Room/	suite		E Teler	phone numb	per		
굼	Initial retu	•	c/o Charles Dunn						1					73-4400		
H		1	City or town, state or co			- 1101	ici oacct		1							
H	Terminate Amended		Petaluma, CA 949	•								G Gros	ss receipts \$	1.180.810		
H			F Name and address of p		,						M/a) Is this	s a group return for affiliates? Yes V No				
	Арріісаціо		Marchell Johnson, Pr	•	•						1 ''	•		Yes No		
_	Tax-exem		✓ 501(c)(3)	501(c) (14	Lines	rt no.)	47(a)(1) or	527		4 ' '	f "No," attach a list. (see instructions)				
<u>'</u>	Website:		<u> </u>	T soile!	, ,	(11.50	4:	147 (a)(1) UI	<u> </u>		1		tion number	•		
к			✓ Corporation ☐ Trust	Associat	<u></u>	ther ►		11 Vo	ar of form	ation			tate of legal			
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			scribe the organizat	ion's missi	on or m	nost s	significant	activities	· LOW	-MC	DERATE	INCOM	F HOUSIN	ıc .		
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8	-															
Activities & Governance	-															
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∞ ŏ	1		of independent votin	_	_			•						9		
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_	 ''	VEL GITTE	ated business taxab	ile il icollie	101111			••	- 6	iil -	Prior Y			Current Year		
	8 (Contribut	tions and grants (Par	t VIII. line 1	I 6\	88	APR :	2 3 201				- Cui				
Revenue	1		service revenue (Pai	•	•	-			·	₩—		1193,1	61	1 190 110		
			nt income (Part VIII,			֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	-6N 7N/5		_ਾ।∞	-		-		1,180,110		
æ	11 (Other rev	nt income (Part VIII.	column (A)), 4, (=N.J.	IT :	\vdash		1,4	*/	700		
			er revenue (Part VIII, column (A), lines 5, 6d 8 <u>c, 9c, 16c, and 11e) .</u> I revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,194,608 1,180,810													
										 		1, 134,0		1,100,010		
			d similar amounts paid (Part IX, column (A), lines 1–3)													
	1	•	other compensation,	•	-					-		95,1	76	123,953		
Expenses	i		onal fundraising fees			•				\vdash		93,1	76	123,533		
ē	1			•	•		•				-					
Ä	1		draising expenses (F									1 107 2	7.5	1 226 071		
_	1		penses (Part IX, colu					 (A) luno ()	 E\	-		1,107,2		1,226,071		
	1	-	enses. Add lines 13- less expenses. Subt							-		1,202,4		1,350,024		
		nevenue	less expenses. Sub-	uact line 16	o ironi i	ine i	<u> </u>			Rec	ginning of Cu	(7,84		(169,214) End of Year		
Net Assets or Fund Balances	20 -	Total aga	oto (Dort V. lino 16)								Julius 01 01			284,616		
1538 1938	21		ets (Part X, line 16) ilities (Part X, line 26			•				-		449,6				
je je	22 1		ts or fund balances.	•						\vdash		134,5 315,0		138,739		
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			s this return with the				`	น นบแบทร)	-	•	· · · · ·	· · ·	- · · · ·	Yes No		
FOI	r Paperw	ork Redu	ction Act Notice, see	me separat	e instru	CTION	s.		Cat	No	11282Y			Form 990 (2011)		



Form 99	0 (2011) Page 2
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: LOW-MODERATE INCOME HOUSING
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount organisand allocations to others, the total expenses, and revenue, if any, for each program service reported.
4 a	(Code:) (Expenses \$ 1,350,024 including grants of \$) (Revenue \$ 1,180,810) SINCE 1965, MPC CONTINUES TO OPERATE THE MIDTOWN PARK APARTMENTS WITH SIX BUILDINGS AND 139 UNITS PROVIDING AFFORDABLE HOUSING TO LOW-MODERATE INCOME RESIDENTS.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ \$1,350,024

Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1	✓	ļ.,
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		1
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		1
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? If "Yes," complete Schedule C, Part III	5		1
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 I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
	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		1
_	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		1
	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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 .	11e	✓	1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
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, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	<u> </u>	

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		~
24 a	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 25	24a		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
Ū	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		
25a	Section 501(c)(3) and 501(c)(4) 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		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	1
b	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		1
36	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		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>	 	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	3/	-	
	19? Note. All Form 990 filers are required to complete Schedule O	38	√ - 990	l Inc.
		Ean	- uun	• /2∩11

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Office if Schedule O contains a response to any question in this rait v	 .	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	,		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	-		į
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 /		
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	l
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		·- <u>-</u>	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			ł
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
ь	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		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
đ	If "Yes," indicate the number of Forms 8282 filed during the year]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1 . !		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		ŀ
а	Did the organization make any taxable distributions under section 4966?	9a		
- b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on Part VIII, line 12	- 1		ŀ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	4 !		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	1 1		
a b	Gross income from other sources (Do not net amounts due or paid to other sources	-		ŀ
_	against amounts due or received from them.)	!		ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
, 20 b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1 1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
4	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	1 !		ŀ
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		-

Form 99				age o
Part \		and i	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response to any question in this Part VI			
Section	on A. Governing Body and Management	<u></u>	·····	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		/
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		/
6 7a	Did the organization have members or stockholders?	6		
<i>i</i> a	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
_	stockholders, or persons other than the governing body?	7b		/
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			,
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b		1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40-	Did the avantination have lead charters broughed or affiliated?	10a	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	iva		-
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		1
13	Did the organization have a written whistleblower policy?	13	-	1
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
Sect:	organization's exempt status with respect to such arrangements?	16b	<u> </u>	L
Section	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	only)
	☐ Own website ☐ Another's website ☐ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization ▶	of the)	

Form 990 (2011	1)										Page <i>I</i>
Part VII	Compensation of Officers, Directors	ectors, Tr	uste	es,	Ke	y E	mple	oye	es, Highest (Compensated	Employees, and
	Check if Schedule O contains a re	sponse to	any	que	stic	n ir	this	Pa	rt VII	<u></u>	<u></u> . 🗆
	Officers, Directors, Trustees, Key										
1a Complet organization	te this table for all persons required it's tax year.	d to be list	ed. F	lepo	ort c	com	pens	atıo	n for the caler	ndar year ending	g with or within the
	of the organization's current office on. Enter -0- in columns (D), (E), and	-	-		•				viduals or orga	anızatıons), rega	rdless of amount of
List the who receives	of the organization's current key eme organization's five current highes of reportable compensation (Box 5 and any related organizations	t compens	ated	emp	oloy	ees	(oth	er tl	han an officer,	director, trustee	
\$100,000 of	l of the organization's former office reportable compensation from the c	organization	and	any	rela	ated	orga	ınız	ations.	. ,	
organization	of the organization's former direc n, more than \$10,000 of reportable co	ompensatio	n fro	m th	ne o	rga	nızatı	on a	and any related	l organizations.	
	is in the following order: individu ed employees; and former such pers		s or	dire	ecto	ors;	instı	tutio	onal trustees;	officers; key	employees; highest
☐ Check the	nis box if neither the organization noi	any relate	d org	aniz	atic	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee
	(A) Name and Title	(B) Average hours per	box,	ot ch unles	Pos eck s pe	rson	e than o is both or/trus	an	(D) Reportable compensation	(E) Reportable compensation from	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Marchel	Johnson, President	1	√		1						
(2) Donald	Griggs, Vice President	1	1		1						
(3) Olivia G	eter, Secretary	1	1		1						
(4) Maxine	Caton, Treasurer	1	1		1						
(5) Myles D	ixon	1	1								
(6) Terry Ma	ajors	1	1								
(7) Yeheyie	s Teldesel	1	1						-		
(8) Francis	Thomas	1	1								
(9) Rufus W	/atkins	1	1								

(11)

(12)

(13)

(14)

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title		Position (do not check more than o box, unless person is both officer and a director/trusti					an	(D) Reportable compensation	(E) Reportable compensation from related		Estu amo	nated	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		compensation from the organization and related organizations		1
(15)		-												
(16)														
(17)														
(18)														
(19)														
(20)		-				-								
(21)														
(22)		_												
(23)		1												
(24)														
(25)		-												
1b c d	Sub-total	VII, Section						> > >					- <u></u>	
2	Total number of individuals (including bur reportable compensation from the organ	t not limited						e) w	rho received m	ore than \$10	0,000 of	F		
3	Did the organization list any former of employee on line 1a? If "Yes," complete								oloyee, or high		sated	3	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re greater th	porta an \$	ble 150,	000,	npe)? /	nsatio	on a s,"	and other complete Sch	pensation fro	m the such	4		1
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co? If "Yes," o	ompe comp	nsa lete	tion Scl	fro hedi	m any ule J t	un or s	related organi: such person	zation or indi	vidual	5		1
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Rej year.	compensat	ed in ensation	dep on f	end or ti	ent ne c	contralend	act lar y	ors that receive year ending wit	ed more than th or within th	\$100,0 ne orgar	00 of	on's t	ax
	(A) Name and business address							(B) Description of s	services	Co	(C) mpens	ation		
								-						
								├-						
2	Total number of independent contractor received more than \$100,000 of compen		_					1 th	nose listed ab	ove) who				

Part	VIII	Statement of Revenue					
				(Å) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns 1a	· ·				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b		ļ			
S, E	c	Fundraising events 1c					
ift. ar /	d	Related organizations 1d					
S, E	е	Government grants (contributions) 1e			į		
r S	f	All other contributions, gifts, grants,					
the state		and similar amounts not included above 15					
ntr d O	g	Noncash contributions included in lines 1a-1f: \$!			
<u>ය</u> ස	h	Total. Add lines 1a-1f					
IUE			Business Code				
ven	2a	Rental Income	531110	1,165,277	1,165,277		
Program Service Revenue	b	Laundry Income	531110	8,409	8,409		
ξ	C	Late Charges	531110	6,199	6,199		
Ser	d	Miscellaneous and Other fees	531110	225	226		
ᇤ	e						
g	f	All other program service revenue.					L
<u>~</u>	g	Total. Add lines 2a–2f	<u> ▶</u>	1,180,110			ı · · · · · · · · · · · · · · · · · · ·
	3	Investment income (including divid					
	_	•		700	-		700
	4	Income from investment of tax-exempt be					
	5	Royalties	(ıi) Personal				
	-		(ii) T GISONAI				
	6a	Gross rents					
	b	Less: rental expenses					
	C	Rental income or (loss) Net rental income or (loss)	•				
	d 7a	Gross amount from sales of (i) Securities	(ii) Other				
	14	assets other than inventory	(1) (1)				
	ь	Less cost or other basis					
		and sales expenses .					
	c	Gain or (loss)					
	d	Net gain or (loss)					į
	_	, tot ga o. (.000)					
9	8a	Gross income from fundraising					
en/		events (not including \$					
Other Revenue		of contributions reported on line 1c).					
<u>_</u>	1	See Part IV, line 18 a	İ				
₹	ь	Less: direct expenses b					į
•	C	Net income or (loss) from fundraising	events . ►				
	9a	Gross income from gaming activities.]
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming acti	ivities ▶				
	10a	Gross sales of inventory, less					
		returns and allowances a		[
	b	Less: cost of goods sold b				:	
	<u>c</u>	Net income or (loss) from sales of inv				-	_
	L	Miscellaneous Revenue	Business Code		-	-	1
	11a						
	Ь						ļ
	С						
	d	All other revenue	L				
	e	Total. Add lines 11a-11d			4 400 4 - 5		
	12	Total revenue. See instructions.	<u> • </u>	1,180,810	1,180,110		700

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Charlet Cabadala O anataine a sanan	4	a this Dark IV		
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o			
7 8	Other salaries and wages	43,575	43,575		
9	Other employee benefits	4,409	4,409		
10	Payroll taxes	6,772	6,772		
11	Fees for services (non-employees):				
а	Management	69,897	69,897		
b	Legal	7,736	7.736		
c	Accounting	7,980	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7,980	
d	Lobbying	-,,,,,		1,000	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g g	Other				
12	Advertising and promotion				
13	• •	1,698		1 600	
	Office expenses	1,090		1,698	
14	Information technology				
15	Royalties	4 405 504	4 405 504		
16	Occupancy	1,125,584	1,125,584		
17 18	Travel				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates	· · · · · · · · · · · · · · · · · · ·			
22	Depreciation, depletion, and amortization .				
23	Insurance	70,683	70,683		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			1	
а	Office Supplies	2,162		2,162	
b	License, permits and fees	1,010		1,010	
c	Telephone	4,822		4,822	
ď	Other General and Administrative Expense	3,696		3,696	
e	All other expenses	5,550		3,030	
25	Total functional expenses. Add lines 1 through 24e	1.350,024	1,328,656	21,368	· <u> </u>
26	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)	1.330,024	1,320,030	21,300	

Р	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	166,555	1	46,049
	2	Savings and temporary cash investments	241,743	2	172,444
i	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	41,377	4	60,293
ts	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	5,830
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 1,260,267			
	b	Less: accumulated depreciation 10b 1,260,267		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	449,675	16	284,616
	17	Accounts payable and accrued expenses	33,105	17	30,352
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
2:	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	101,479	9.	108387
	ae		404 504	25	420 700
	26	Total liabilities. Add lines 17 through 25	134,584	26	138,739
ces		lines 27 through 29, and lines 33 and 34.			
	27	• .	322,934		456 774
aga	27 28	Unrestricted net assets	342,934	27 28	156,774
Ö	29	Permanently restricted net assets		29	· · · · · · · · · · · · · · · · · · ·
Ĕ	25	Organizations that do not follow SFAS 117, check here ▶ □ and		25	
正		complete lines 30 through 34.			,
Net Assets or Fund Balan	30	Capital stock or trust principal, or current funds		30	
šet	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
e	33	Total net assets or fund balances	322,934		145,877
Z	34	Total liabilities and net assets/fund balances	449,675		284,616
	, • •	. The manufacture for account faire ballations	1.0,575		207,010

Form 9	90 (2011)			Pa	ige 12				
Par	IXI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI	· · ·	· · · ·	•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1 _		1,18	0,810				
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,024					
3 Revenue less expenses. Subtract line 2 from line 1									
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))									
5									
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,								
	column (B))	6		14	5,877				
Pari	XII Financial Statements and Reporting				_				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>				
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain i	n						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	<u> </u>	1				
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>	✓				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account								
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain 11	٦ -						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolidated basis, or both:	ar wer	е						
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			1					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth II	n 3a		/				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under								
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b	L	<u> </u>				
			For	m 99 0	(2011)				