



# Cortland County

Business Development Corporation

40 Main Street Cortland

Phone-756-5005

## Revolving Loan Fund Committee Agenda

April 13, 2026 11:30am

|                |  |
|----------------|--|
| Mike McMahon   |  |
| Kathleen Burke |  |
| Jason Hage     |  |
| Andrew Fox     |  |

- Cortland Housing Assistance Council Loan Request

{Note: The BDC Board of Directors expressly reserves the right to accept or reject any loan application and to approve or deny any loan request at its sole discretion. The BDC also reserves the right to deviate from any and all of the foregoing parameters.}

### LOAN APPLICATION

#### General Information:

1. Business Name: Cortland Housing Assistance Council, Inc
- 1a. If business is a d/b/a, please specify and include inception date: n/a
2. Business Address: 36 Taylor Street, Cortland, NY 13045
3. Business Telephone: 607-753-8271 Fax: 607-756-6267
4. Specify Business Type: (please check one):

Corporation

Partnership

Sole Proprietorship

❖ Additional information is required for corporations and partnerships. Please see Page 5 attached.

#### Existing Employment Information:

5. Number of current full-time employees: 3
6. Number of current part-time employees: 1
7. Do you operate any on-the-job training programs?  Yes  No

#### Project Information:

8. Please describe the project: Development of a 53-unit affordable housing project for income eligible seniors (62+) located on River Street, Cortland

9. Total Project Cost \$ 23,162,371.00

10. Amount of Loan Request: \$100,000.00

11. Please describe the use of the requested loan funds *Funds will be used for the purchase of the site located at 30 River Street Cortland. CHAC is also requesting funds for closing cost assistance*

12. Identify each source of financing for the project and the amount:

| Source              | Amount (\$) | Percent of Total (%) |
|---------------------|-------------|----------------------|
| Cortland County BDC |             |                      |
| NYS HCR             | 6,535,000   | 28%                  |
| HHAP                | 2,016,423   | 9%                   |
| FHLBNY              | 1,300,000   | 6%                   |
| SLHC Proceeds       | 2,107,742   | 9%                   |
| TOTAL               |             | 100%                 |

*L.P. Equity \$, 181,740 3% Funding Gap 2,800,000 (12%)  
 NYS ERDA Solar 25,270 (1%)*

13. Projected new employment: Full-time 2 Part-time 0

**Certification**

The undersigned certifies that all information which has been or will be furnished in support of this application is given for the purpose of the obtaining a loan under the Cortland County Business Development Corporation's (BDC) Revolving Loan Fund Program (RLF). I further certify that all information submitted has been examined and approved by me and is true, correct, and complete. I agree to abide by all requirements to be set forth in connection with said Loan Program and the penalties and provisions of all applicable local, state, and federal laws pertaining to falsification of any item contained herein or fraudulent misrepresentation of my business. Lastly, I agree that verification of any information contained herein, or to be provided in support of this loan request, may be obtained by any source deemed appropriate by the BDC.

Print or type name

*Shawna Grinnell*

Signature

*Shawna Grinnell*

*Executive Director*

Title

*April 8, 2026*

Date

**Information Required for Corporations or Partnerships**

This following information must be completed if your business is a Corporation or Partnership. If additional space is required, please attach an additional sheet.

Corporate officers or partners: *See Attached*

| Name: | Title: | Address: | % ownership (if applicable) | Telephone: |
|-------|--------|----------|-----------------------------|------------|
|       |        |          |                             |            |
|       |        |          |                             |            |
|       |        |          |                             |            |
|       |        |          |                             |            |
|       |        |          |                             |            |
|       |        |          |                             |            |
|       |        |          |                             |            |
|       |        |          |                             |            |

Please indicate below those persons authorized to sign as a representative of the Corporation / Partnership. *Jerry Hartnett, DT VanGorder, Steve Brown, Carrie Knight, Paul Sloney*  
 Name and telephone number of contact person for purposes of this loan application:

*Shawna Grinnell Executive Director 607-753-8271*

Date of inception of Corporation or Partnership. If Corporation, please indicate state of incorporation:

*New York State 1973*

For Corporations only: Please indicate if the Corporation is a subsidiary. If so, indicate name of parent company and whether it is a wholly owned subsidiary:

Subsidiary?  Yes  No

If yes, is it wholly owned?  Yes  No

If Yes, name of the parent company? \_\_\_\_\_

Do you conduct business from any other location(s)?  Yes  No

If yes, please identify those locations: *n/a*

Please provide the following information for each individual involved in the loan request and/or members of a partnership if applicable. Use additional sheets if required.

|  |  |
|--|--|
| Name:  |  |
| Social Security Number:  |  |
| Date of Birth:   |  |
| If a personal guarantee is required, please provide spouse's name: |  |
| Spouse's Social Security Number:                                   |  |
| Spouse's Date of Birth:  |  |
| Current address:   |  |
| Time at Current Address (yrs.)                                     |  |
| Previous address if at current address less than 7 years:          |  |
| Home Telephone Number:   |  |
| Current Occupation (s):  |  |
| Address of Current Employer(s):                                    |  |

## Supporting Documentation Required for All Loan Requests

The following is a list of information required in support of your loan request. The applicant should note that this list may not be all-inclusive and additional information can and will be requested at the option of the BDC. Should you have any questions concerning these requests, please contact the BDC at 607-756-5005.

Please check the  when complete

1.  Current financial statements of company (within the last two months), to include: balance sheet, income and expense statements.
2.  Most recent audited financial statements, if available.
3.  Personal balance sheet – for sole proprietor and all partners of partnership (within last two months). The BDC has the option of requesting personal balance sheets from corporate officers. They are not required at this time.
4.  Last two income tax returns filed. Personal and business tax returns are required from sole proprietors. Partnerships shall also provide personal income tax statements for all partners; corporations shall provide corporate income tax returns. Personal income tax returns from corporate officers may be requested at the BDC's option.
5.  Description of complete project to include:
  - a) Detailed project narrative or copy of current Business Plan;
  - b) Detailed cost estimate of complete project;
    - a) Public and/or funding sources involved and amounts;
    - b) Amount and source of equity and what it is to be used for;
    - c) Loan funds requested and what they are to be used for;
  1. Analysis of economic feasibility of the project;
  2. Cash flow projection for a minimum of three (3) years;
  3. Vendor estimates for all components of the project – Loan recipients should provide written estimates wherever possible. Engineering estimates may be substituted for vendor's estimates. For example, if the complete project involves the purchase of two pieces of machinery to be funded by the loan, and the construction of a loading dock to be privately funded, you should provide from you vendor written price estimates for the purchase of the machinery and the construction of the loading dock.
6.  Proof of site control for project (i.e. deed, long-term lease, executed purchase option, etc.)
7.  Personal and/or business collateral available for security to be provided. If the collateral is real property, specify location, mortgage holder, if any, and owner's equity in property.

Collateral provided will be verified and used in a security agreement, incorporated in loan note, and is crucial to loan approval. In most cases, personal guarantees will be required.

8.  Reiteration of new jobs being created (or existing jobs being retained), job titles, timetable for hiring, salaries or wages for each title, and brief description for each title.
9.  List all properties owned by corporation, partnership (all partners) and sole proprietor within Cortland County and their addresses. Corporations may be required to provide a list of properties owned by corporate officers at the BDC's request.
10.  List of credit references to include banks, suppliers, and mortgages, if any. The applicant should note that credit references will be verified. When using banks, provide account number(s) and authorization letter to be submitted to banks to allow BDC access to information.
11.  Proof of funding for the non-Business Development Corp. portion of the total project:  
Funding for the non-BDC portion of the project can be in the form of (1) bank financing; (2) other private financing; (3) equity; (4) public financing. Proof should include:  
Firm financial commitment letter from lending agency, institution, entity, etc. in letterform that includes: dollar amount, rate, term and annual payment.
12.  Equity: The applicant should indicate in what form the equity will be and should include a certification that the equity is now available, or will be available at the time the project is initiated.
13.  Resumes of all involved parties including education and employment histories at a minimum.

### Environmental Assessment

All applicants must complete the following questions. They are not necessarily all encompassing nor do they preclude more in-depth explanations, permit or code requirements or other pertinent information, which may have to be collected in the future. Please complete this questionnaire as comprehensively as possible.

|  | Circle Yes or No  |
|--|---|
| 1. Will there be odors, noise or vibrations as a result of the proposed action?                        | Yes / No <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 2. Will the proposed action affect air quality and/or require any special permits with respect to air? | Yes / No <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 3. Will the proposed action affect public health or safety?  | Yes / No <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 4. Will the project require the storage of 1,100 or more gallons of petroleum or chemical products?    | Yes / No <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 5. Is the project a new landfill construction?   | <input type="checkbox"/> / No <input checked="" type="checkbox"/>     |
| 6. Will new sanitary sewers be constructed?  | Yes / <del>No</del>   |
| 7. Will new septic tanks serving five households or more be constructed?                               | Yes / No NA   |
| 8. Will the project affect any water bodies?   | Yes / <del>No</del>   |
| 9. Will the project involve the storage of toxic/hazardous materials?                                  | Yes / <del>No</del>   |
| 10. Will new storm sewers or recharge basins be needed?  | Yes / <del>No</del>   |
| 11. Will the project involve new water facilities?   | Yes / <del>No</del>   |
| 12. Will the project involve ½ mile or more of street reconstruction or construction of new roads?     | Yes / <del>No</del>   |
| 13. Will the project involve parking facilities greater than one acre?                                 | Yes / <del>No</del>   |
| 14. Will the project use 20,000 gallons or more of water per day?                                      | Yes / <del>No</del>   |
| 15. Will a discharge permit be needed?   | Yes / <del>No</del>   |
| 16. Does the project involve the expansion or construction of a sanitary landfill?                     | Yes / <del>No</del>   |
| 17. Will the project generate a significant amount of solid waste?                                     | Yes / <del>No</del>   |
| 18. Will special permits be required for solid waste disposal?   | Yes / <del>No</del>   |

|   |  |
|---|--|
| 19. Will the proposed land use or building use provide a sharp contrast to current surrounding land use patterns? | Yes / <input checked="" type="radio"/> No                              |
| 20. Will there be an effect on existing transportation systems?   | Yes / <input checked="" type="radio"/> No                              |
| 21. Will the proposed action result in the generation of traffic significantly above present levels?              | Yes / <input checked="" type="radio"/> No                              |
| 22. Does the proposed action require review, approval, etc., from local planning or zoning boards?                | Yes / <input checked="" type="radio"/> No<br><i>Approvals received</i> |
| 23. Will police, fire, emergency medical services, schools, etc., be significantly affected by the project?       | Yes / <input checked="" type="radio"/> No                              |
| 24. Will energy consumption be greatly increased by this project?   | Yes / <input checked="" type="radio"/> No                              |
| 25. Please identify known permits that this project will require? <i>Building Permit</i>                          | Yes / <input checked="" type="radio"/> No                              |

Please provide an explanation for any question to which you answered YES.

*Please attach any additional information that would assist us in reviewing the environmental impact of this project. Specifically, include a description of any manufacturing processes used in the project, chemicals or compounds used in the processes, and any actions planned which will mitigate any potential adverse environmental concerns that may be associated with the project.*

The signature below certifies that the environmental information contained herein is true, correct, and with the complete understanding that falsification of any item may tender any current or future loan commitment null and void as well as result in all penalties and provisions of any applicable state and federal laws.

*April 8, 2026*

Date:

*Shauna Gunnell*

Signature of Applicant / Title

*Executive Director*

*Cortland Housing*

Company Name:

*Assistance Council, LLC*

## BOARD ROSTER

January 1, 2026-December 31, 2028

|  |  |  |
|--|--|--|
| Jerry Hartnett<br>President<br>Realtor<br>Elected: 10/27/2014                | 64 Floral Avenue<br>Cortland, NY 13045 | (607) 756-7619 (home)<br>(607) 423-4278 (cell)<br><a href="mailto:Jerry@hartnettrealtyolutions.com">Jerry@hartnettrealtyolutions.com</a> |
| DJ VanGorder<br>Vice President<br>Sales/Sports Company<br>Elected: 6/16/2015 | 66 Floral Avenue<br>Cortland, NY 13045 | (607) 591-1715 (cell)<br><a href="mailto:dvangorder@champrosports.com">dvangorder@champrosports.com</a>                                  |
| Carrie Knight<br>Treasurer<br>VP/Mgr NBT Bank<br>Elected: 6/23/2021          | 6167 Route 281<br>Preble, NY 13141     | (607) 345-3235 (cell)<br>(607) 758-1294 (work)<br><a href="mailto:cknight@nbtbank.com">cknight@nbtbank.com</a>                           |
| Paul Slowey<br>Secretary<br>Retired<br>Elected: 10/30/2002                   | 2649 Clute Road<br>Cortland, NY 13045  | (607) 835-6468 (home)<br>(607) 423-2838 (cell)<br><a href="mailto:pfslowey@gmail.com">pfslowey@gmail.com</a>                             |
| Stephen Brown<br>Member<br>Retired<br>Elected: 10/08/2009                    | 13 Summit Street<br>Cortland, NY 13045 | (607) 423-4088 (cell)<br><a href="mailto:cahssbrown@gmail.com">cahssbrown@gmail.com</a>  |

## 2026-2028 Board Roster Continued

|  |   |  |
|--|---|--|
| Amber Giamei<br>Member<br>Asst Director Office for Aging<br>Elected: 2/24/2020 | 6601 Grout Brook Rd<br>Homer, NY 13077  | (607) 283-6888 (cell)<br>(607) 753-5060 (work)<br><a href="mailto:agiamei@cortland-co.org">agiamei@cortland-co.org</a> |
| Machell Phelps<br>Member<br>Director Sports Council<br>Elected: 2/24/2020      | 41 Lamont Circle<br>Cortland, NY 13045  | (607) 423-1394 (cell)<br>(607) 756-1864 (work)<br><a href="mailto:machellphelps@yahoo.com">machellphelps@yahoo.com</a> |
| Garry VanGorder<br>Member<br>Retired<br>Elected: 2/24/2020                     | 1 Harmony Circle<br>Cortland, NY 13045  | (607) 591-4604 (cell)<br><a href="mailto:garryvangorderspike@gmail.com">garryvangorderspike@gmail.com</a>              |
| Kris Buchan<br>Member<br>Realtor<br>Elected: 5/16/2024                         | 202 Williams Street<br>Groton, NY 13073 | (607-745-8553)<br><a href="mailto:kris@tcreststate.com">kris@tcreststate.com</a>                                       |

**REAL ESTATE PURCHASE AND  
SALE AGREEMENT**

**THIS REAL ESTATE PURCHASE AND SALE AGREEMENT** (this "Agreement") is made effective this 29<sup>th</sup> day of August, 2025 (the "Effective Date") by and between RIVER STREET HOLDING CORP., a New York corporation with an address of 4287 North Homer Avenue, Cortland, New York ("Seller") and CORTLAND HOUSING ASSISTANCE COUNCIL, INC. (or an entity to be formed), a New York not-for-profit corporation with an address of 36 Taylor Street, Cortland, New York ("Buyer"). (Together, each a "Party" and together the "Parties").

**RECITALS:**

**WHEREAS**, Seller owns certain real property located at River Street, in the City of Cortland, County of Cortland, State of New York, identified as Tax ID: 87.29-01-03.100, and consisting of approximately 3.23 acres (the "Property");

**WHEREAS**, the Seller and Buyer entered into that certain Option Agreement for Exclusive Purchase Rights, dated as of June 1, 2022, as amended by that certain First Amendment of Option Agreement for Exclusive Purchase Rights, dated June 2, 2023, and that certain Second Amendment of Option Agreement for Exclusive Purchase Rights, dated August 22, 2024 (collectively, the "Option Agreement");

**WHEREAS**, pursuant to the terms of the Option Agreement, the Seller and Buyer agreed that Buyer has the exclusive option to purchase the Property (the "Option"), which Option shall expire on August 29, 2025;

**WHEREAS**, pursuant to the terms of the Option Agreement, in the event Buyer exercises its Option to purchase the Property, Seller and Buyer have agreed to enter into a definitive purchase and sale agreement for the acquisition of the Property;

**WHEREAS**, effective as of August 29, 2025, Buyer desires to exercise its Option to acquire the Property, and Seller has agreed to sell the Property to Buyer, on the terms and conditions contained in this definitive Agreement.

**NOW THEREFORE**, in consideration of the foregoing, along with other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, and incorporating the above recitals and is if fully set forth below, the Parties hereby agree as follows:

1. Purchase and Sale. Pursuant to the terms of the Option Agreement, Buyer has elected to exercise its Option to purchase the Property from Seller which shall be effective as of August 29, 2025, and Seller hereby agrees to sell to Buyer and Buyer agrees to purchase from Seller all of Seller's right, title, and interest in and to the Property, in accordance with the terms hereof. The Buyer shall deliver to Seller the "Option Notice" in the form attached hereto as Exhibit A, on or before August 29, 2025, to the Seller's address of 4287 N. Homer Avenue, Cortland, New York. The Property shall be conveyed hereunder together with all improvements thereon, and all appurtenances, rights, easements, rights-of-way, tenements, and hereditaments incident thereto. The sale shall include all of Seller's right, title, and interest, if any, in and to any streets, roads or avenues, opened or proposed, adjoining any part of the Property, to the center line thereof. The Property shall include all intangible property used in connection with the Property, including,

without limitation, all existing permits, licenses and governmental approvals or permissions, if any.

2. Purchase Price. The Purchase Price for the Property shall be **Ninety Nine Thousand 00/100 (\$99,000.00)**, to be paid as follows (the "Purchase Price"):

(a) Buyer has made the following deposits to Seller, which deposits have been held in escrow by Seller's attorney and shall applied to the Purchase Price at Closing (as defined below), returned to Buyer, or disbursed to Seller, in accordance with the provisions of this Agreement:

- (i) \$5,000, paid in March 2023;
- (ii) \$5,000, paid in December 2023; and
- (iii) \$5,000, paid in February 2024;

(b) Buyer shall pay the balance of the Purchase Price in the amount of **\$84,000.00** at the Closing (defined below), in immediately available cash funds, in the form of a wire transfer or certified official bank check, adjusted for tax and other pro-rations in accordance with provisions of this Agreement.

3. Closing Date. Seller and Buyer agree to complete the transaction described herein, within one hundred twenty (120) days after the satisfaction or waiver of all contingencies and conditions precedent to Closing (the "Closing" or "Closing Date"), with all prorations under to be calculated as of this date. The Closing shall take place on such date at a mutually agreeable time by exchange of documents in escrow between the Parties.

4. Closing Documents. At the Closing, the following documents shall be executed and delivered:

(a) Seller Deliveries.

(i) a Warranty Deed with Lien Covenant ("Deed"), executed by Seller, acknowledged and in recordable form, conveying to Buyer title to the Property, along with a New York State Department of Transfer and Finance "Form TP-584, Real Property Transfer Tax Affidavit, Real Estate Transfer Tax Return, Credit Line Mortgage Certificate" and New York State Board of Real Property Services "Form RP-5217, Real Property Transfer Report", executed and acknowledged, as applicable, for delivery to the County Clerk to allow recordation of the Deed;

(ii) a FIRPTA certificate in form and substance acceptable to Buyer;

(v) a statement of sale;

(vi) an incumbency certificate executed by an authorized officer of the Seller stating, among other things, that the representations and warranties set forth herein above are true and correct as of the Closing Date, that the person executing all of the Closing documents on behalf of the Seller is fully authorized and empowered to do so;

(xi) resolutions authorizing the transaction contemplated herein; and

(xii) such other documents and instruments as may be reasonably requested by Buyer in connection with the transactions contemplated by this Agreement.

(b) Buyer Deliveries.

- (i) countersigned statement of sale;
- (ii) resolutions authorizing the transactions contemplated herein; and
- (iii) remaining Purchase Price owed to Seller.

(c) Closing Costs and Prorations. The following shall be adjusted and prorated between the Seller and the Buyer at Closing: (i) real estate taxes and special assessments; (ii) water charges; (iii) sewer charges; and (iv) electricity and other utilities, to the extent and in the case where final readings cannot be made by the utility company. It is the intention of the parties hereto that the Seller shall be responsible for the payment of all costs described in (i) through (iv) above in connection with the Property which accrued prior to the Closing Date and that Buyer shall be responsible for the payment of all such costs which accrued or accrue on and after the Closing Date. Seller shall pay transfer tax on the sale of the Property, and Seller shall pay the recording fee for the TP-584 and for any required title curatives, and Buyer shall pay the recording fee for the deed.

5. Title Documents; Financing. Seller shall provide Buyer with an updated abstract of title, going back at least 40 years to a warranty deed conveying a 100% fee interest in the Property and a 10-year property tax search, and current property tax receipts ("Title Documents"). The Buyer shall have thirty (30) days after receipt of Title Documents (the "Title Review Period") to raise objections that title to the Property is not in accordance with the requirements of this Agreement ("Title Objection"). If Buyer fails to raise a Title Objection during the Title Review Period, then Buyer shall be deemed to have waived its ability to raise a Title Objection, except that Buyer shall be permitted to raise a Title Objection as to matters arising after the date of the updated abstract and prior to Closing. In the event Seller shall be unable to cure a Title Objection, Buyer's remedy is limited to accepting such title as Seller is able to convey without reduction in the Purchase Price, or either Party may terminate this Agreement. Notwithstanding anything herein to the contrary, all mortgage liens, mechanic's liens, judgments or any other lien which can be satisfied by the payment of money, and which arose as a lien on the Property during Seller's ownership shall automatically be deemed objected to by Buyer, and Seller shall remove or satisfy any such lien at or prior to Closing in accordance with local real estate custom and practice.

6. Assignment/Successors and Assigns. Neither Party shall have the right to assign this Agreement unless the other Party consents in writing to the same. Notwithstanding the foregoing, Buyer may assign this Agreement to a wholly owned subsidiary. This Agreement shall be binding upon and shall inure to the benefit of the Parties, their successors, and their permitted assigns.

7. Representations and Warranties.

(a) Seller represents and warrants to Buyer as of the date hereof, throughout the term of this Agreement and as of Closing, that:

(i) Seller is and will be as of the date of Closing duly organized, validly existing and in good standing under the laws of the State of New York and has all the requisite power and authority to enter into and carry out this Agreement according to its terms.

(ii) This Agreement has been duly authorized, executed, and delivered and constitutes a legal and binding obligation of Seller, enforceable in accordance with its terms, except as may be limited by bankruptcy and other laws affecting creditors' rights generally.

(iii) There is no litigation, proceeding, investigation or condemnation action pending, or (to the knowledge of Seller) threatened, against or affecting Seller or the Property or that might affect or relate to the validity of this Agreement or any action taken or to be taken pursuant hereto, or that might have a material adverse effect on the business or operations of Seller.

(iv) Neither the entry into this Agreement, nor the carrying out of the transactions contemplated herein has resulted in or will result in any violation of, or be in conflict with, or result in the creation of, any mortgage, lien, encumbrance or charge (other than those contemplated hereby) upon any of the properties or assets of Seller pursuant to, or constitute a default under, any agreement, or mortgage, indenture, contract, agreement, instrument, franchise, permit, judgment, decree, order, statute, rule or regulation applicable to Seller or the Property.

(v) To the best of Seller's knowledge, without duty or obligation to investigate, Seller has not received any written notice that Hazardous Material are present at the Property or that the Property is in violation of any environmental law. Seller during Seller's ownership has not used, manufactured, generated, treated, stored, disposed of, or released any material amounts of Hazardous Material on, under or about the Property or transported any material amounts of Hazardous Material over the Property or installed, used or removed any storage tank on, from or in connection with the Property except as disclosed in writing to Buyer before the date hereof, to the Seller's knowledge, there are no storage tanks or wells (whether existing or abandoned) located on, under or about any of the Property. "Hazardous Materials" shall mean any substance or material which is or contains: (a) any substance, waste or material now or hereafter defined in and/or regulated under any Environmental Law; (b) gasoline, diesel fuel or other petroleum hydrocarbons; (c) asbestos and asbestos containing materials, in any form, whether friable or nonfriable; (d) polychlorinated biphenyls; (e) radon gas; or (f) mold, mildew or other biological agents.

(vi) The representations and warranties of Seller contained in this Agreement, to Seller's actual knowledge, (i) do not contain any untrue statements of a material fact and (ii) do not fail to state a material fact, which failure would make this Agreement misleading. The representations and warranties contained in this Agreement shall survive for a period of six (6) months.

(b) Buyer represents and warrants to Seller as of the date hereof, throughout the term of this Agreement and as of the Closing:

(i) Buyer is and will be as of the date of Closing duly organized, validly existing and in good standing under the laws of the State of New York and has all the requisite power and authority to enter into and carry out this Agreement according to its terms.

(ii) There is no litigation, proceeding or investigation pending, or to the knowledge of Buyer threatened against or affecting Buyer that might affect or relate to the validity of this Agreement or any action taken or to be taken pursuant hereto, or that might have a material adverse effect on the business or operations of Buyer.

(iii) The representations and warranties of Buyer contained in this Agreement, to Buyer's actual knowledge, (i) do not contain any untrue statements of a material fact and (ii) do not fail to state a material fact, which failure would make this Agreement misleading. The representations and warranties contained in this Agreement shall survive for a period of six (6) months.

8. Risk of Loss/Condemnation. The risk of loss or damage to the Property or condemnation or taking of the Property (or any portion thereof), until Closing, by fire or other risk insured against, or by condemnation or taking, is assumed by Seller. However, should such loss or damage, or condemnation or taking, occur before Closing, then Seller may elect to assign to Buyer Seller's rights under existing insurance policies (or any renewals or replacements thereof) or claims, in full discharge of all Seller's obligations with respect to such loss or damage or condemnation or taking, and in full satisfaction of all claims of Buyer by reason thereof so long as Buyer agrees to same. If Buyer does not so agree, Buyer may terminate this Agreement and shall be entitled to a return of its Deposit.

9. Broker. Each Party represents and warrants to the other Party that no brokers or agents are involved in the transaction contemplated by this Agreement. Each Party shall hold the other Party harmless and defend against any claim for commission, fee, or other compensation, alleged to be due or payable in connection with this Agreement, and the provisions of this section of this Agreement shall survive termination of this Agreement or Closing.

#### 10. Termination

(a) This Agreement may be terminated:

(i) By a Party (the "Non-Defaulting Party") with notice of termination, following a breach of this Agreement by the other Party (the "Defaulting Party"), if the Defaulting Party fails to cure such breach within 5 business days of the Defaulting Party's receipt of Notice of the same from the Non-Defaulting Party;

(ii) By mutual agreement of Seller and Buyer; or

(iii) As expressly permitted by any other provision of this Agreement.'

(b) Upon a termination of this Agreement, each Party's rights, and obligations, except for those which are identified in this Agreement as expressly surviving such termination, shall immediately terminate, and this Agreement shall be of no further force and effect.

#### 11. Remedies.

(a) In the event of any breach of this Agreement by one Party, the other Party shall be entitled to, in addition to any other right or remedy the other Party may have with respect to such breach under this Agreement, specific performance and such other equitable relief as may be available to remedy such breach, all without, in the case of injunctive relief, the necessity of posting any bond or other security therefor or proving actual damages. Any action for breach of this Agreement, for specific performance, or for any other legal or equitable relief shall be filed by a Party within 90 days of notice of termination, or else that Party shall be deemed to have irrevocably waived its rights to so file.

(a) All rights and remedies of the parties under this Agreement shall be cumulative in nature. The remedies set forth in this Agreement shall be the exclusive remedies of the Parties hereto under, respectively, this Agreement or with respect to any dispute arising out of the subject matter hereof or thereof. WITHOUT LIMITING THE SCOPE OF THE IMMEDIATELY PRECEDING SENTENCE, IT IS EXPRESSLY UNDERSTOOD AND AGREED BY BUYER AND SELLER THAT NEITHER OF THEM SHALL BE LIABLE TO THE OTHER UNDER THIS AGREEMENT OR IN ANY DISPUTE ARISING OUT OF THE SUBJECT MATTER HEREOF OR THEREOF FOR ANY INCIDENTAL, CONSEQUENTIAL, INDIRECT, SPECIAL, OR PUNITIVE DAMAGES.

12. Attorney Fees. If litigation or arbitration is required by either Party to enforce or interpret the terms of this Agreement, the prevailing party of such action or arbitration shall, in addition to all other relief granted or awarded by the court or arbitrator, be awarded costs and reasonable attorneys' fees, charges and disbursements and expert witnesses fees and costs incurred by reason of such action or arbitration and those incurred in preparation thereof at both the trial or arbitration and appellate levels.

13. Notice. Any notice or demand which, under the provisions of this Agreement, must or may be given or made by a Party, shall be in writing and shall be given or made by recognized overnight delivery courier service to the Party at the address listed above ("Notice"). Each Party may change its notice address or notice addressee by Notice of the same in accordance with the provisions of this Section of this Agreement.

14. Counterpart Signatures. This Agreement may be executed in two (2) or more counterparts, each of which shall be an original, but such counterparts together shall constitute one and the same instrument, notwithstanding that Seller and Buyer are not signatories to the same counterpart. Signatures to this Agreement transmitted by electronic mail in PDF format shall be valid and effective to bind the Party so signing.

15. Amendments and Waivers. This Agreement may be amended, modified, superseded, or canceled and any of the terms, covenants, representations, warranties, or conditions of this Agreement may be waived only by a written instrument signed by each Party to this Agreement or, in the case of a waiver, by or on behalf of the Party waiving compliance. The failure of any Party at any time to require performance of any provision in this Agreement shall not affect the right of that Party at a later time to enforce that or any other provision. No waiver by any Party of any condition, or of any breach of any term, covenant, representation, or warranty contained in this Agreement, in any one or more instances, shall be deemed to be a further or continuing waiver of any condition or of any breach of any other term, covenant, representation, or warranty.

16. Severability. Except as otherwise specifically provided in this Agreement, this Agreement shall be interpreted in all respects as if any invalid or unenforceable provision were omitted from this Agreement. All provisions of this Agreement shall be enforced to the full extent permitted by law.

17. Governing Law. This Agreement shall be governed by, and interpreted and enforced in accordance with, the laws of the State of New York, as applied to contracts made and to be performed in New York, without regard to conflicts of law principles. Venue shall be in Cortland County, New York.

**IN WITNESS WHEREOF**, the Parties have each executed this Agreement as of the dates indicated below.

**SELLER:**  
RIVER STREET HOLDING CORP.

Signed by:  
By: Steve Terwilliger  
C2DB61E5B5334A6...  
Steve Terwilliger, Sole Shareholder

Date: 8/11/2025

**BUYER:**  
CORTLAND HOUSING  
ASSISTANCE COUNCIL, INC.

Signed by:  
By: Shawna Grinnell  
237F510BD58B488...  
Shawna Grinnell, Executive  
Director

Date: 8/7/2025

**EXHIBIT A**  
**OPTION NOTICE**

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.  
36 Taylor Street  
Cortland, New York 13045**

August 29, 2025

**VIA CERTIFIED MAIL,  
RETURN RECEIPT REQUESTED**

River Street Holding Corp.  
Attention: Steve Terwilliger  
4287 N. Homer Avenue  
Cortland, New York 13045

**Re: OPTION NOTICE  
River Street Holding Corp. to Cortland Housing Assistance Council, Inc.  
Property: River Street, Cortland, New York**

Dear Steve:

Pursuant to the terms of that certain Option Agreement for Exclusive Purchase Rights, dated June 1, 2022, as amended by that certain First Amendment of Option Agreement for Exclusive Purchase Rights, dated June 2, 2023, and that certain Second Amendment of Option Agreement for Exclusive Purchase Rights, dated August 22, 2024 (the "*Option Agreement*"), Cortland Housing Assistance Council, Inc. ("*CHAC*") holds an exclusive option to purchase (the "*Option*") the real property located at River Street, Cortland, New York, Tax Map No. 87.29-01-03.100 (the "*Property*").

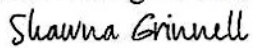
**Please be advised that, effective as of August 29, 2025, CHAC hereby exercises its Option to purchase the Property, and that this letter shall serve as formal notice that CHAC is exercising the Option and its intent to purchase the Property.**

Pursuant to the terms of the Option Agreement, CHAC and River Street Holding Corp. shall enter into a definitive purchase and sale agreement for sale and acquisition of the Property. Enclosed herewith is a proposed Real Estate Purchase and Sale Agreement, executed by CHAC (the "*Definitive Agreement*"). If the Definitive Agreement meets with your approval, please countersign the same and return an executed copy to CHAC.

Please let us know if you have any questions. We look forward to closing on the acquisition of the Property. Thank you.

Very truly yours,

Cortland Housing Assistance Council, Inc.

By:   
237F510BD58B488...  
Shawna Grinnell, Executive Director

cc: James Baranello, Esq. (via email)

**PORT, KASHDIN & MCSHERRY, CPAS  
3535 WEST RD  
CORTLAND, NY 13045  
(607) 756-5681**

January 14, 2026

CORTLAND HOUSING ASSISTANCE COUNCIL  
36 TAYLOR AVENUE  
CORTLAND, NY 13045

Dear Shawna:

Your 2024 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-TE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Please be sure to call us if you have any questions.

Sincerely,

**Christopher J. Guay, CPA**

CHRISTOPHER GUAY

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2024

Department of the Treasury Internal Revenue Service

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 For the 2024 calendar year, or tax year beginning 7/01, 2024, and ending 6/30, 2025

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C CORTLAND HOUSING ASSISTANCE COUNCIL, 36 TAYLOR AVENUE, CORTLAND, NY 13045. D Employer identification number 16-1130177. E Telephone number (607) 753-8271. G Gross receipts \$ 544,529.

F Name and address of principal officer: SAME AS C ABOVE. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No.

I Tax-exempt status: X 501(c)(3), 501(c) ( ) (insert no.), 4947(a)(1) or 527.

J Website: N/A. H(c) Group exemption number.

K Form of organization: X Corporation, Trust, Association, Other. L Year of formation: 1978. M State of legal domicile: NY.

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO SECURE HOUSING AT LOW AND MODERATE COST FOR THE ECONOMICALLY DISADVANTAGED CITIZENS OF CORTLAND COUNTY, NEW YORK

Table with 2 columns: Description and Amount. Rows include: 2 Check this box, 3 Number of voting members, 4 Number of independent voting members, 5 Total number of individuals employed, 6 Total number of volunteers, 7a Total unrelated business revenue, 7b Net unrelated business taxable income.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants, 9 Program service revenue, 10 Investment income, 11 Other revenue, 12 Total revenue.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 13 Grants and similar amounts paid, 14 Benefits paid to or for members, 15 Salaries, other compensation, 16a Professional fundraising fees, 17 Other expenses, 18 Total expenses, 19 Revenue less expenses.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets, 21 Total liabilities, 22 Net assets or fund balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer SHAWNA GRINNELL, Date, EXECUTIVE DIRECTOR.

Paid Preparer Use Only: Preparer's name CHRISTOPHER GUAY, Signature Christopher J. Guay, Date 1/14/26, PTIN P01346366, Firm's name PORT, KASHDIN & MCSHERRY, CPAS, Firm's address 3535 WEST RD, CORTLAND, NY 13045, Firm's EIN 16-1013595, Phone no. (607) 756-5681.

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No

**Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

TO SECURE HOUSING AT LOW AND MODERATE COST FOR THE ECONOMICALLY DISADVANTAGED  
CITIZENS OF CORTLAND COUNTY, NEW YORK

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 188,358. including grants of \$ ) (Revenue \$ 130,968.)

TO PROVIDE HOUSING REHABILITATION AND OTHER HOUSING RELATED SERVICES TO LOW INCOME  
RESIDENTS OF CORTLAND COUNTY

4b (Code: ) (Expenses \$ 161,125. including grants of \$ ) (Revenue \$ 117,504.)

TO PURCHASE AND RESTORE RESIDENTIAL UNITS FOR RENTAL TO LOW INCOME FAMILIES AT  
REDUCED RATES

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 349,483.

**Part IV 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)? <i>If "Yes," complete Schedule A.</i>   | X   |    |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions.  |     | X  |
| 3 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>  |     | X  |
| 4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>   |     | X  |
| 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>   |     | X  |
| 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? <i>If "Yes," complete Schedule D, Part I.</i>  |     | X  |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>  |     | X  |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>   |     | X  |
| 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? <i>If "Yes," complete Schedule D, Part IV.</i>            |     | X  |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>   |     | X  |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.   |     |    |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>   | X   |    |
| 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? <i>If "Yes," complete Schedule D, Part VII.</i>  |     | X  |
| c 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? <i>If "Yes," complete Schedule D, Part VIII.</i>  |     | X  |
| 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? <i>If "Yes," complete Schedule D, Part IX.</i>   | X   |    |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>   | X   |    |
| 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)? <i>If "Yes," complete Schedule D, Part X.</i>  | X   |    |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>  |     | X  |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>   | X   |    |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>  |     | X  |
| 14a Did the organization maintain an office, employees, or agents outside of the United States?   |     | X  |
| 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? <i>If "Yes," complete Schedule F, Parts I and IV.</i> |     | X  |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>   |     | X  |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>   |     | X  |
| 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions.   |     | X  |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>   |     | X  |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>   |     | X  |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>   |     | X  |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  |     |    |
| 21 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? <i>If "Yes," complete Schedule I, Parts I and II.</i>  |     | X  |

**Part IV Checklist of Required Schedules** (continued)

|  | Yes | No |
|--|-----|----|
| <b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III.</i> .....  |     | X  |
| <b>23</b> 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> .....  |     | X  |
| <b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i> .....  |     | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....   |     |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....  |     |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....   |     |    |
| <b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> .....  |     | X  |
| <b>b</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? <i>If "Yes," complete Schedule L, Part I.</i> .....   |     | X  |
| <b>26</b> 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> .....   |     | X  |
| <b>27</b> 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, Part III.</i> ..... |     | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).  |     |    |
| <b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i> .....  |     | X  |
| <b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i> .....   |     | X  |
| <b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i> .....  |     | X  |
| <b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i> .....  |     | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> .....   |     | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> .....   |     | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> .....   |     | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> .....   |     | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i> .....   | X   |    |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....   |     | X  |
| <b>b</b> 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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> .....   |     |    |
| <b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> .....   |     | X  |
| <b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI.</i> .....  |     | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O. ....  | X   |    |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

|   | Yes | No |
|---|-----|----|
| <b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable. ....  |     |    |
| <b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable. ....  |     |    |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? ..... | X   |    |

**Part V Statements Regarding Other IRS Filings and Tax Compliance** (continued)

|            |  | Yes        | No |
|------------|--|------------|----|
| <b>2a</b>  | 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>2a</b> 5  |            |    |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .   | X          |    |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .  |            | X  |
| <b>b</b>   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O. . . . .   |            |    |
| <b>4a</b>  | 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)? . . . . .     |            | X  |
| <b>b</b>   | If "Yes," enter the name of the foreign country _____<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   |            |    |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .  |            | X  |
| <b>b</b>   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .   |            | X  |
| <b>c</b>   | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .   |            |    |
| <b>6a</b>  | 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? . . . . .  |            | X  |
| <b>b</b>   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .  |            |    |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |            |    |
| <b>a</b>   | 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? . . . . .  |            | X  |
| <b>b</b>   | If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .  |            |    |
| <b>c</b>   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .   |            | X  |
| <b>d</b>   | If "Yes," indicate the number of Forms 8282 filed during the year. . . . .   |            |    |
|            | <b>7d</b>  |            |    |
| <b>e</b>   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .  |            | X  |
| <b>f</b>   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .   |            | X  |
| <b>g</b>   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .   |            |    |
| <b>h</b>   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .   |            |    |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .   |            |    |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>   |            |    |
| <b>a</b>   | Did the sponsoring organization make any taxable distributions under section 4966? . . . . .   |            |    |
| <b>b</b>   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .  |            |    |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter:   |            |    |
| <b>a</b>   | Initiation fees and capital contributions included on Part VIII, line 12. . . . .  | <b>10a</b> |    |
| <b>b</b>   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . .   | <b>10b</b> |    |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter:  |            |    |
| <b>a</b>   | Gross income from members or shareholders. . . . .   | <b>11a</b> |    |
| <b>b</b>   | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .  | <b>11b</b> |    |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .  | <b>12a</b> |    |
| <b>b</b>   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . . . .   | <b>12b</b> |    |
| <b>13</b>  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>  |            |    |
| <b>a</b>   | Is the organization licensed to issue qualified health plans in more than one state? . . . . .   | <b>13a</b> |    |
|            | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |            |    |
| <b>b</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. . . . .   | <b>13b</b> |    |
| <b>c</b>   | Enter the amount of reserves on hand . . . . .   | <b>13c</b> |    |
| <b>14a</b> | Did the organization receive any payments for indoor tanning services during the tax year? . . . . .   | <b>14a</b> | X  |
| <b>b</b>   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. . . . .   | <b>14b</b> |    |
| <b>15</b>  | 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? . . . . .<br>If "Yes," see the instructions and file Form 4720, Schedule N.                   | <b>15</b>  | X  |
| <b>16</b>  | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . .<br>If "Yes," complete Form 4720, Schedule O.   | <b>16</b>  | X  |
| <b>17</b>  | <b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . . .<br>If "Yes," complete Form 6069. | <b>17</b>  |    |

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI. [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets?... 6 Did the organization have members or stockholders?... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?... b Each committee with authority to act on behalf of the governing body?... 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 on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?... 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?... 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?... 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If "No," go to line 13. 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?... 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. 13 Did the organization have a written whistleblower policy?... 14 Did the organization have a written document retention and destruction policy?... 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? a The organization's CEO, Executive Director, or top management official. 15a b Other officers or key employees of the organization. 15b If "Yes" to line 15a or 15b, describe the process on 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?... 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[ ] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
20 State the name, address, and telephone number of the person who possesses the organization's books and records.
EMMA DIPPOLITO 36 TAYLOR AVE. CORTLAND NY 13045 607-753-8271

**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 VII.

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and title                 | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |         | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------|--|---|-----------------------|---------|--------------|------------------------------|---------|---|--|---|
|                                       |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former  |   |  |   |
| (1) SHAWNA GRINNELL<br>EXECUTIVE DIR. | 40<br>0  |   |                       | X       |              |                              | 53,848. | 0.  | 0.   |   |
| (2) CARRIE KNIGHT<br>MEMBER           | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (3) DJ VANGORDER<br>VICE PRESIDENT    | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (4) AMBER GIAMEI<br>MEMBER            | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (5) PAUL SLOWEY<br>SECRETARY          | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (6) STEVEN BROWN<br>TREASURER         | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (7) KRIS BUCHAN<br>MEMBER             | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (8) MACHELL PHELPS<br>MEMBER          | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (9) JERRY HARTNETT<br>PRESIDENT       | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (10) GARRY VANGORDER<br>MEMBER        | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (11)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (12)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (13)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (14)                                  |  |   |                       |         |              |                              |         |   |  |   |

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A)<br>Name and title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------|--|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
|                       |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |   |  |   |
| (15) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (16) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (17) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (18) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (19) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (20) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (21) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (22) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (23) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (24) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (25) -----            |  |   |                       |         |              |                              |        |   |  |   |

|  |         |    |    |
|--|---------|----|----|
| <b>1b Subtotal</b> .....   | 53,848. | 0. | 0. |
| <b>c Total from continuation sheets to Part VII, Section A</b> ..... | 0.      | 0. | 0. |
| <b>d Total (add lines 1b and 1c)</b> .....                           | 53,848. | 0. | 0. |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

|  | Yes | No |
|--|-----|----|
| 3 Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i> .....  | 3   | X  |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i> ..... | 4   | X  |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i> .....                       | 5   | X  |

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

**Part VIII Statement of Revenue**

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

|  |  | (A)<br>Total revenue  | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |  |
|--|--|---|--|---|--|--|
| <b>Contributions, Gifts, Grants,<br/>and Other Similar Amounts</b>           | <b>1a</b> Federated campaigns .....  | <b>1a</b>   |  |   |  |  |
|  | <b>b</b> Membership dues .....   | <b>1b</b>   |  |   |  |  |
|  | <b>c</b> Fundraising events .....  | <b>1c</b>   |  |   |  |  |
|  | <b>d</b> Related organizations .....   | <b>1d</b>   |  |   |  |  |
|  | <b>e</b> Government grants (contributions) .....   | <b>1e</b> 185,138.  |  |   |  |  |
|  | <b>f</b> All other contributions, gifts, grants, and<br>similar amounts not included above ..... | <b>1f</b>   |  |   |  |  |
|  | <b>g</b> Noncash contributions included in<br>lines 1a-1f .....                                  | <b>1g</b>   |  |   |  |  |
|  | <b>h Total.</b> Add lines 1a-1f .....  |   | 185,138.   |   |  |  |
|  | <b>Program Service Revenue</b>   | <b>Business Code</b>  |  |   |  |  |
| <b>2a</b> PROPERTY MANAGEMENT FEES .....                                     |  |   | 117,504.   |   | 117,504.   |  |
| <b>b</b> LOW INCOME RENTALS .....  |  |   | 76,799.  |   | 76,799.  |  |
| <b>c</b> RAMP PROGRAM .....  |  |   | 39,035.  |   | 39,035.  |  |
| <b>d</b> HANDYMAN PROGRAM .....  |  |   | 12,431.  |   | 12,431.  |  |
| <b>e</b> OTHER HOUSING PROGRAMS .....  |  |   | 8,063.   |   | 8,063.   |  |
| <b>f</b> All other program service revenue .....                             |  |   | 10,000.  |   | 10,000.  |  |
| <b>g Total.</b> Add lines 2a-2f .....  |  |   | 263,832.   |   |  |  |
| <b>Miscellaneous<br/>Revenue</b>   | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts) .....   |   | 2.   |   | 2.   |  |
|  | <b>4</b> Income from investment of tax-exempt bond proceeds .....                                |   |  |   |  |  |
|  | <b>5</b> Royalties .....   |   |  |   |  |  |
|  | <b>6a</b> Gross rents .....  | (i) Real  |  |   |  |  |
|  |  | (ii) Personal   |  |   |  |  |
|  |  | <b>6b</b> Less: rental expenses .....   | <b>6b</b>  |   |  |  |
|  | <b>c</b> Rental income or (loss) .....   | <b>6c</b>   |  |   |  |  |
|  | <b>d</b> Net rental income or (loss) .....   |   |  |   |  |  |
|  | <b>7a</b> Gross amount from<br>sales of assets<br>other than inventory .....                     | (i) Securities  |  |   |  |  |
|  |  | (ii) Other  |  |   |  |  |
|  |  | <b>7b</b> Less: cost or other basis<br>and sales expenses .....   | <b>7b</b>  |   |  |  |
|  | <b>c</b> Gain or (loss) .....  | <b>7c</b>   |  |   |  |  |
|  | <b>d</b> Net gain or (loss) .....  |   |  |   |  |  |
|  | <b>Other Revenue</b>   | <b>8a</b> Gross income from fundraising events<br>(not including \$ _____<br>of contributions reported on line 1c).<br>See Part IV, line 18 ..... | <b>8a</b>  |   |  |  |
| <b>b</b> Less: direct expenses .....   |  | <b>8b</b>   |  |   |  |  |
| <b>c</b> Net income or (loss) from fundraising events .....                  |  |   |  |   |  |  |
| <b>9a</b> Gross income from gaming activities.<br>See Part IV, line 19 ..... |  | <b>9a</b>   |  |   |  |  |
|  |  | <b>b</b> Less: direct expenses .....  | <b>9b</b>  |   |  |  |
| <b>c</b> Net income or (loss) from gaming activities .....                   |  |   |  |   |  |  |
| <b>10a</b> Gross sales of inventory, less<br>returns and allowances .....    | <b>10a</b>   |   |  |   |  |  |
|  | <b>b</b> Less: cost of goods sold. ....  | <b>10b</b>  |  |   |  |  |
|  | <b>c</b> Net income or (loss) from sales of inventory .....                                      |   |  |   |  |  |
| <b>Miscellaneous<br/>Revenue</b>   | <b>Business Code</b>   |   |  |   |  |  |
|  | <b>11a</b> OTHER INCOME .....  |   | 95,557.  |   | 95,557.  |  |
|  | <b>b</b> .....   |   |  |   |  |  |
|  | <b>c</b> .....   |   |  |   |  |  |
|  | <b>d</b> All other revenue .....   |   |  |   |  |  |
| <b>e Total.</b> Add lines 11a-11d .....                                      |  | 95,557.   |  |   |  |  |
| <b>12 Total revenue.</b> See instructions .....                              |  | 544,529.  | 0.   | 0.                                      | 359,391.   |  |

**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).

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

| <b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>   | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service expenses | <b>(C)</b><br>Management and general expenses | <b>(D)</b><br>Fundraising expenses |
|---|------------------------------|--|---|------------------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21  |                              |  |   |                                    |
| 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  | 53,848.                      | 43,078.                                | 10,770.                                       | 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)  | 0.                           | 0.                                     | 0.  | 0.                                 |
| 7 Other salaries and wages  | 126,676.                     | 101,341.                               | 25,335.                                       |                                    |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  | 4,370.                       | 3,496.                                 | 874.  |                                    |
| 9 Other employee benefits   | 31,737.                      | 25,390.                                | 6,347.  |                                    |
| 10 Payroll taxes  | 13,681.                      | 10,945.                                | 2,736.  |                                    |
| 11 Fees for services (nonemployees):  |                              |  |   |                                    |
| a Management  | 4,343.                       | 3,474.                                 | 869.  |                                    |
| b Legal   | 3,539.                       | 2,831.                                 | 708.  |                                    |
| c Accounting  | 2,750.                       | 2,369.                                 | 381.  |                                    |
| d Lobbying  |                              |  |   |                                    |
| 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.)   |                              |  |   |                                    |
| 12 Advertising and promotion  | 310.                         |  | 310.  |                                    |
| 13 Office expenses  | 5,008.                       | 3,760.                                 | 1,248.  |                                    |
| 14 Information technology   |                              |  |   |                                    |
| 15 Royalties  |                              |  |   |                                    |
| 16 Occupancy  |                              |  |   |                                    |
| 17 Travel   | 3,386.                       |  | 3,386.  |                                    |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials   |                              |  |   |                                    |
| 19 Conferences, conventions, and meetings   |                              |  |   |                                    |
| 20 Interest   | 1,156.                       |  | 1,156.  |                                    |
| 21 Payments to affiliates   |                              |  |   |                                    |
| 22 Depreciation, depletion, and amortization  | 45,069.                      | 27,179.                                | 17,890.                                       |                                    |
| 23 Insurance  | 12,753.                      | 10,203.                                | 2,550.  |                                    |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)                                    |                              |  |   |                                    |
| a <u>CONTRACTUAL</u>  | 65,569.                      | 65,569.                                |   |                                    |
| b <u>REPAIR AND MAINTENANCE</u>   | 35,549.                      | 35,549.                                |   |                                    |
| c <u>UTILITIES AND TELEPHONE</u>  | 16,887.                      | 13,715.                                | 3,172.  |                                    |
| d <u>OTHER ADMINISTRATIVE</u>   | 5,534.                       |  | 5,534.  |                                    |
| e All other expenses  | 1,451.                       | 584.                                   | 867.  |                                    |
| 25 Total functional expenses. Add lines 1 through 24e   | 433,616.                     | 349,483.                               | 84,133.                                       | 0.                                 |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) |                              |  |   |                                    |

**Part X Balance Sheet**

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

|   |  | (A)<br>Beginning of year |           | (B)<br>End of year  |
|---|--|--------------------------|-----------|---------------------|
| <b>Assets</b>   | <b>1</b> Cash – non-interest-bearing .....   | 135,036.                 | <b>1</b>  | 168,375.            |
|   | <b>2</b> Savings and temporary cash investments .....  |                          | <b>2</b>  |                     |
|   | <b>3</b> Pledges and grants receivable, net .....  |                          | <b>3</b>  |                     |
|   | <b>4</b> Accounts receivable, net .....  | 1,560.                   | <b>4</b>  | 3,617.              |
|   | <b>5</b> Loans and other receivables from 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 ..... |                          | <b>5</b>  |                     |
|   | <b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....   |                          | <b>6</b>  |                     |
|   | <b>7</b> Notes and loans receivable, net .....   |                          | <b>7</b>  |                     |
|   | <b>8</b> Inventories for sale or use .....   |                          | <b>8</b>  |                     |
|   | <b>9</b> Prepaid expenses and deferred charges .....   |                          | <b>9</b>  |                     |
|   | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....   | <b>10a</b> 1,253,971.    |           |                     |
|   | <b>b</b> Less: accumulated depreciation .....  | <b>10b</b> 797,423.      | 489,621.  | <b>10c</b> 456,548. |
|   | <b>11</b> Investments – publicly traded securities .....   |                          | <b>11</b> |                     |
|   | <b>12</b> Investments – other securities. See Part IV, line 11 .....   |                          | <b>12</b> |                     |
|   | <b>13</b> Investments – program-related. See Part IV, line 11 .....  |                          | <b>13</b> |                     |
|   | <b>14</b> Intangible assets .....  |                          | <b>14</b> |                     |
|   | <b>15</b> Other assets. See Part IV, line 11 .....   | 133,076.                 | <b>15</b> | 238,930.            |
| <b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) ..... | 759,293.   | <b>16</b>                | 867,470.  |                     |
| <b>Liabilities</b>  | <b>17</b> Accounts payable and accrued expenses .....  | 3,697.                   | <b>17</b> | 5,664.              |
|   | <b>18</b> Grants payable .....   |                          | <b>18</b> |                     |
|   | <b>19</b> Deferred revenue .....   |                          | <b>19</b> |                     |
|   | <b>20</b> Tax-exempt bond liabilities .....  |                          | <b>20</b> |                     |
|   | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....  |                          | <b>21</b> |                     |
|   | <b>22</b> 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 .....     |                          | <b>22</b> |                     |
|   | <b>23</b> Secured mortgages and notes payable to unrelated third parties .....   | 754,090.                 | <b>23</b> | 747,723.            |
|   | <b>24</b> Unsecured notes and loans payable to unrelated third parties .....   |                          | <b>24</b> |                     |
|   | <b>25</b> 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 .....  | 2,612,312.               | <b>25</b> | 2,623,271.          |
|   | <b>26 Total liabilities.</b> Add lines 17 through 25 .....   | 3,370,099.               | <b>26</b> | 3,376,658.          |
| <b>Net Assets or Fund Balances</b>  | <b>Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.</b> <input checked="" type="checkbox"/>   |                          |           |                     |
|   | <b>27</b> Net assets without donor restrictions .....  | -2,653,658.              | <b>27</b> | -2,509,188.         |
|   | <b>28</b> Net assets with donor restrictions .....   | 42,852.                  | <b>28</b> |                     |
|   | <b>Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.</b> <input type="checkbox"/>  |                          |           |                     |
|   | <b>29</b> Capital stock or trust principal, or current funds .....   |                          | <b>29</b> |                     |
|   | <b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....   |                          | <b>30</b> |                     |
|   | <b>31</b> Retained earnings, endowment, accumulated income, or other funds .....   |                          | <b>31</b> |                     |
|   | <b>32</b> Total net assets or fund balances .....  | -2,610,806.              | <b>32</b> | -2,509,188.         |
| <b>33</b> Total liabilities and net assets/fund balances .....            | 759,293.   | <b>33</b>                | 867,470.  |                     |

**Part XI Reconciliation 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  | 544,529.    |
| 2  | Total expenses (must equal Part IX, column (A), line 25)   | 2  | 433,616.    |
| 3  | Revenue less expenses. Subtract line 2 from line 1   | 3  | 110,913.    |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | 4  | -2,610,806. |
| 5  | Net unrealized gains (losses) on investments   | 5  |             |
| 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 on Schedule O) SEE SCHEDULE O                            | 9  | -9,295.     |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | -2,509,188. |

**Part XII Financial Statements and Reporting**

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

|   |  | Yes | No |
|---|--|-----|----|
| 1   | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____   |     |    |
| If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   |  |     |    |
| 2a  | Were the organization's financial statements compiled or reviewed by an independent accountant?  |     | X  |
| If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. |  |     |    |
| <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                 |  |     |    |
| 2b  | Were the organization's financial statements audited by an independent accountant?   | X   |    |
| If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.              |  |     |    |
| <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis      |  |     |    |
| 2c  | 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? |     | X  |
| If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   |  |     |    |
| 3a  | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?  |     | X  |
| 3b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits     |     |    |

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2024**

Open to Public  
Inspection

|  |   |
|--|---|
| Name of the organization<br><b>CORTLAND HOUSING ASSISTANCE COUNCIL</b> | Employer identification number<br><b>16-1130177</b> |
|--|---|

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
|                                    |          |   | Yes   | No |   |   |
| (A)                                |          |   |   |    |   |   |
| (B)                                |          |   |   |    |   |   |
| (C)                                |          |   |   |    |   |   |
| (D)                                |          |   |   |    |   |   |
| (E)                                |          |   |   |    |   |   |
| <b>Total</b>                       |          |   |   |    |   |   |

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)  | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   |          |          |          |          |          |           |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.   |          |          |          |          |          |           |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge.   |          |          |          |          |          |           |
| 4 <b>Total.</b> 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 <b>Public support.</b> Subtract line 5 from line 4.  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)   | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total                |
|---|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4.  |          |          |          |          |          |                          |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  |          |          |          |          |          |                          |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on.   |          |          |          |          |          |                          |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  |          |          |          |          |          |                          |
| 11 <b>Total support.</b> Add lines 7 through 10.  |          |          |          |          |          |                          |
| 12 Gross receipts from related activities, etc. (see instructions)  |          |          |          |          | 12       |                          |
| 13 <b>First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . |          |          |          |          |          | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|   |    |                          |
|---|----|--------------------------|
| 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)).   | 14 | %                        |
| 15 Public support percentage from 2023 Schedule A, Part II, line 14.  | 15 | %                        |
| 16a <b>33-1/3% support test—2024.</b> If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization.   |    | <input type="checkbox"/> |
| b <b>33-1/3% support test—2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization.  |    | <input type="checkbox"/> |
| 17a <b>10%-facts-and-circumstances test—2024.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.    |    | <input type="checkbox"/> |
| b <b>10%-facts-and-circumstances test—2023.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. |    | <input type="checkbox"/> |
| 18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.   |    | <input type="checkbox"/> |

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)  | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total  |
|--|----------|----------|----------|----------|----------|------------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | 364,952. | 263,794. | 300,828. | 121,783. | 185,138. | 1,236,495. |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. | 271,936. | 270,027. | 227,821. | 226,265. | 263,832. | 1,259,881. |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513.   |          |          |          |          |          | 0.         |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  |          |          |          |          |          | 0.         |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge.  |          |          |          |          |          | 0.         |
| <b>6 Total.</b> Add lines 1 through 5.   | 636,888. | 533,821. | 528,649. | 348,048. | 448,970. | 2,496,376. |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons.  | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.           | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>c</b> Add lines 7a and 7b.  | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)   |          |          |          |          |          | 2,496,376. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)   | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total  |
|---|----------|----------|----------|----------|----------|------------|
| <b>9</b> Amounts from line 6.   | 636,888. | 533,821. | 528,649. | 348,048. | 448,970. | 2,496,376. |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. |          |          |          |          |          | 0.         |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.                           |          |          |          |          |          | 0.         |
| <b>c</b> Add lines 10a and 10b.   | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.      |          |          |          |          |          | 0.         |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI                      | 14,469.  | 3,952.   | 7,478.   | 23,375.  | 95,557.  | 144,831.   |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)  | 651,357. | 537,773. | 536,127. | 371,423. | 544,527. | 2,641,207. |

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

|  |           |         |
|--|-----------|---------|
| <b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)). | <b>15</b> | 94.52 % |
| <b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15.                       | <b>16</b> | 97.82 % |

**Section D. Computation of Investment Income Percentage**

|   |           |        |
|---|-----------|--------|
| <b>17</b> Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)). | <b>17</b> | 0.00 % |
| <b>18</b> Investment income percentage from 2023 Schedule A, Part III, line 17.                         | <b>18</b> | 0.00 % |

**19a 33-1/3% support tests—2024.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33-1/3% support tests—2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.   |     |    |
| <b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).  |     |    |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.   |     |    |
| <b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.  |     |    |
| <b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.   |     |    |
| <b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.   |     |    |
| <b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.   |     |    |
| <b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.  |     |    |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). |     |    |
| <b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  |     |    |
| <b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?   |     |    |
| <b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .  |     |    |
| <b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).  |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).  |     |    |
| <b>9a</b> 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 <b>Part VI</b> .   |     |    |
| <b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .  |     |    |
| <b>c</b> Did a disqualified person (as defined on 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 <b>Part VI</b> .   |     |    |
| <b>10a</b> 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," answer line 10b below.  |     |    |
| <b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)   |     |    |

**Part IV Supporting Organizations** (continued)

|  | Yes        | No |
|--|------------|----|
| <b>11</b> Has the organization accepted a gift or contribution from any of the following persons?  |            |    |
| <b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? | <b>11a</b> |    |
| <b>b</b> A family member of a person described on line 11a above?  | <b>11b</b> |    |
| <b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>                              | <b>11c</b> |    |

**Section B. Type I Supporting Organizations**

|   | Yes      | No |
|---|----------|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> | <b>1</b> |    |
| <b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>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 organization.</i>   | <b>2</b> |    |

**Section C. Type II Supporting Organizations**

|  | Yes      | No |
|--|----------|----|
| <b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | <b>1</b> |    |

**Section D. All Type III Supporting Organizations**

|   | Yes      | No |
|---|----------|----|
| <b>1</b> 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? | <b>1</b> |    |
| <b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>  | <b>2</b> |    |
| <b>3</b> By reason of the relationship described on line 2, above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>  | <b>3</b> |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|   |           |     |    |
|---|-----------|-----|----|
| <b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ).   |           |     |    |
| <b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>   |           |     |    |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>  |           |     |    |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>  |           |     |    |
| <b>2</b> Activities Test. <b>Answer lines 2a and 2b below.</b>  |           | Yes | No |
| <b>a</b> 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? <i>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.</i> | <b>2a</b> |     |    |
| <b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>  | <b>2b</b> |     |    |
| <b>3</b> Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>  |           |     |    |
| <b>a</b> 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>If "Yes" or "No," provide details in Part VI.</i>  | <b>3a</b> |     |    |
| <b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>   | <b>3b</b> |     |    |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| <b>Section A – Adjusted Net Income</b> |  | (A) Prior Year | (B) Current Year (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                                      | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)  | 8              |                             |

| <b>Section B – Minimum Asset Amount</b> |   | (A) Prior Year | (B) Current Year (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): |                |                             |
| a                                       | Average monthly value of securities   | 1a             |                             |
| b                                       | Average monthly cash balances   | 1b             |                             |
| c                                       | Fair market value of other non-exempt-use assets  | 1c             |                             |
| d                                       | <b>Total</b> (add lines 1a, 1b, and 1c)   | 1d             |                             |
| e                                       | <b>Discount</b> 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 0.015 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 0.035.   | 6              |                             |
| 7                                       | Recoveries of prior-year distributions  | 7              |                             |
| 8                                       | <b>Minimum Asset Amount</b> (add line 7 to line 6)  | 8              |                             |

| <b>Section C – Distributable Amount</b> |   |   | Current Year |
|---|---|---|--------------|
| 1                                       | Adjusted net income for prior year (from Section A, line 8, column A)   | 1 |              |
| 2                                       | Enter 0.85 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                                       | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 |              |

7  Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

| <b>Section D – Distributions</b> |  | <b>Current Year</b> |
|----------------------------------|--|---------------------|
| <b>1</b>                         | Amounts paid to supported organizations to accomplish exempt purposes  | <b>1</b>            |
| <b>2</b>                         | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity              | <b>2</b>            |
| <b>3</b>                         | Administrative expenses paid to accomplish exempt purposes of supported organizations  | <b>3</b>            |
| <b>4</b>                         | Amounts paid to acquire exempt-use assets  | <b>4</b>            |
| <b>5</b>                         | Qualified set-aside amounts (prior IRS approval required – provide details in <b>Part VI</b> )   | <b>5</b>            |
| <b>6</b>                         | Other distributions (describe in <b>Part VI</b> ). See instructions.   | <b>6</b>            |
| <b>7</b>                         | <b>Total annual distributions.</b> Add lines 1 through 6.  | <b>7</b>            |
| <b>8</b>                         | Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions. | <b>8</b>            |
| <b>9</b>                         | Distributable amount for 2024 from Section C, line 6   | <b>9</b>            |
| <b>10</b>                        | Line 8 amount divided by line 9 amount   | <b>10</b>           |

| <b>Section E – Distribution Allocations (see instructions)</b>   | <b>(i)<br/>Excess<br/>Distributions</b> | <b>(ii)<br/>Underdistributions<br/>Pre-2024</b> | <b>(iii)<br/>Distributable<br/>Amount for 2024</b> |
|--|---|---|--|
| <b>1</b> Distributable amount for 2024 from Section C, line 6  |   |   |  |
| <b>2</b> Underdistributions, if any, for years prior to 2024 (reasonable cause required – explain in <b>Part VI</b> ). See instructions.   |   |   |  |
| <b>3</b> Excess distributions carryover, if any, to 2024   |   |   |  |
| <b>a</b> From 2019 . . . . .   |   |   |  |
| <b>b</b> From 2020 . . . . .   |   |   |  |
| <b>c</b> From 2021 . . . . .   |   |   |  |
| <b>d</b> From 2022 . . . . .   |   |   |  |
| <b>e</b> From 2023 . . . . .   |   |   |  |
| <b>f</b> Total of lines 3a through 3e  |   |   |  |
| <b>g</b> Applied to underdistributions of prior years  |   |   |  |
| <b>h</b> Applied to 2024 distributable amount  |   |   |  |
| <b>i</b> Carryover from 2019 not applied (see instructions)  |   |   |  |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |   |   |  |
| <b>4</b> Distributions for 2024 from Section D, line 7: \$   |   |   |  |
| <b>a</b> Applied to underdistributions of prior years  |   |   |  |
| <b>b</b> Applied to 2024 distributable amount  |   |   |  |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |   |   |  |
| <b>5</b> Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions. |   |   |  |
| <b>6</b> Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.                        |   |   |  |
| <b>7</b> Excess distributions carryover to 2025. Add lines 3j and 4c.  |   |   |  |
| <b>8</b> Breakdown of line 7:  |   |   |  |
| <b>a</b> Excess from 2020 . . . . .  |   |   |  |
| <b>b</b> Excess from 2021 . . . . .  |   |   |  |
| <b>c</b> Excess from 2022 . . . . .  |   |   |  |
| <b>d</b> Excess from 2023 . . . . .  |   |   |  |
| <b>e</b> Excess from 2024 . . . . .  |   |   |  |

BAA

Schedule A (Form 990) 2024

**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**PART III, LINE 12 - OTHER INCOME**

| <u>NATURE AND SOURCE</u> | <u>2024</u>       | <u>2023</u>       | <u>2022</u>      | <u>2021</u>      | <u>2020</u>       |
|--------------------------|-------------------|-------------------|------------------|------------------|-------------------|
| MISC INCOME              | \$ 12,266.        | \$ 23,375.        | \$ 7,478.        | \$ 3,952.        | \$ 14,469.        |
| ERT CREDIT               | 83,291.           |                   |                  |                  |                   |
| <b>TOTAL</b>             | <u>\$ 95,557.</u> | <u>\$ 23,375.</u> | <u>\$ 7,478.</u> | <u>\$ 3,952.</u> | <u>\$ 14,469.</u> |

SCHEDULE D (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate value of contributions, aggregate value of grants, and aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows 2a-2d for total number of easements, total acreage, and number of easements on certified historic structures.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table.
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Yes  No

**Part V Endowment Funds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

|  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_ %
  - b Permanent endowment \_\_\_\_\_ %
  - c Term endowment \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes    | No |
|--|--------|----|
| (i) Unrelated organizations?   | 3a(i)  |    |
| (ii) Related organizations?  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land  |                                      | 25,000.                         |                              | 25,000.        |
| b Buildings  |                                      | 862,172.                        | 662,561.                     | 199,611.       |
| c Leasehold improvements   |                                      | 299,584.                        | 84,184.                      | 215,400.       |
| d Equipment  |                                      | 46,445.                         | 29,908.                      | 16,537.        |
| e Other  |                                      | 20,770.                         | 20,770.                      | 0.             |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B).) |                                      |                                 |                              | 456,548.       |

**Part VII Investments – Other Securities** N/A  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security)        | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives   |                |   |
| (2) Closely held equity interests   |                |   |
| (3) Other   |                |   |
| (A) -----   |                |   |
| (B) -----   |                |   |
| (C) -----   |                |   |
| (D) -----   |                |   |
| (E) -----   |                |   |
| (F) -----   |                |   |
| (G) -----   |                |   |
| (H) -----   |                |   |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, column (B)) |                |   |

**Part VIII Investments – Program Related** N/A  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment   | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1)   |                |   |
| (2)   |                |   |
| (3)   |                |   |
| (4)   |                |   |
| (5)   |                |   |
| (6)   |                |   |
| (7)   |                |   |
| (8)   |                |   |
| (9)   |                |   |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, column (B)) |                |   |

**Part IX Other Assets**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description   | (b) Book value |
|---|----------------|
| (1) CONSTRUCTION IN PROGRESS  | 238,929.       |
| (2) ROUNDING  | 1.             |
| (3)   |                |
| (4)   |                |
| (5)   |                |
| (6)   |                |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, column (B)) | 238,930.       |

**Part X Other Liabilities**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability   | (b) Book value |
|---|----------------|
| (1) Federal income taxes  |                |
| (2) COMPENSATED ABSENCES  | 24,195.        |
| (3) INTERFUND PAYABLES  | 21,000.        |
| (4) INVESTMENT IN AFFILIATE   | 2,572,073.     |
| (5) OTHER CURRENT LIABILITIES   | 204.           |
| (6) TENANT'S SECURITY DEPOSITS  | 5,799.         |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, column (B)) | 2,623,271.     |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. SEE PART XIII.

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** N/A

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

|   |   |    |    |  |
|---|---|----|----|--|
| 1 | Total revenue, gains, and other support per audited financial statements        |    | 1  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:             |    |    |  |
|   | a Net unrealized gains (losses) on investments                                  | 2a |    |  |
|   | b Donated services and use of facilities  | 2b |    |  |
|   | c Recoveries of prior year grants   | 2c |    |  |
|   | d Other (Describe in Part XIII.)  | 2d |    |  |
|   | e Add lines 2a through 2d   |    | 2e |  |
| 3 | Subtract line 2e from line 1  |    | 3  |  |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1:            |    |    |  |
|   | a Investment expenses not included on Form 990, Part VIII, line 7b              | 4a |    |  |
|   | b Other (Describe in Part XIII.)  | 4b |    |  |
|   | c Add lines 4a and 4b   |    | 4c |  |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) |    | 5  |  |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return** N/A

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

|   |  |    |    |  |
|---|--|----|----|--|
| 1 | Total expenses and losses per audited financial statements                       |    | 1  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25:                |    |    |  |
|   | a Donated services and use of facilities   | 2a |    |  |
|   | b Prior year adjustments   | 2b |    |  |
|   | c Other losses   | 2c |    |  |
|   | d Other (Describe in Part XIII.)   | 2d |    |  |
|   | e Add lines 2a through 2d  |    | 2e |  |
| 3 | Subtract line 2e from line 1   |    | 3  |  |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1:               |    |    |  |
|   | a Investment expenses not included on Form 990, Part VIII, line 7b               | 4a |    |  |
|   | b Other (Describe in Part XIII.)   | 4b |    |  |
|   | c Add lines 4a and 4b  |    | 4c |  |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) |    | 5  |  |

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X - FASB ASC 740 FOOTNOTE**

CHAC FOLLOWS THE PROVISIONS OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE CODIFICATION. THE CODIFICATION REQUIRES THE EVALUATION OF TAX POSITIONS, WHICH INCLUDES MAINTAINING ITS TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNRELATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT HAS TAKEN ANY TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD. CHAC'S INCOME TAX RETURNS ARE SUBJECT

**Part XIII** Supplemental Information *(continued)***PART X - FASB ASC 740 FOOTNOTE (CONTINUED)**

TO POSSIBLE FEDERAL EXAMINATION, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED.

SIGNIFICANT MANAGEMENT JUDGMENT IS REQUIRED IN DETERMINING UNCERTAIN TAX POSITIONS. WHILE THE COUNCIL BASES ITS ESTIMATES ON HISTORICAL EXPERIENCE AND VARIOUS OTHER ASSUMPTIONS THAT MANAGEMENT BELIEVES TO BE REASONABLE UNDER THE CIRCUMSTANCES, ACTUAL RESULTS MAY DIFFER FROM THESE ESTIMATES, AND, AS A RESULT, COULD HAVE A MATERIAL IMPACT ON THE FINANCIAL POSITION.

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Employer identification number

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

**FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.**

DJ VANGORDER & GARRY VANGORDER ARE BROTHERS.

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

A DRAFT COPY OF FORM 990 IS REVIEWED BY MANAGEMENT AND THE BOARD OF DIRECTORS PRIOR  
TO FILING.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THE ORGANIZATION'S GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE  
AVAILABLE UPON REQUEST.

**FORM 990, PART XI, LINE 9  
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

|  |    |                |
|--|----|----------------|
| ADJUSTMENT OF PARTNERSHIP INTEREST ..... | \$ | -9,295.        |
| TOTAL                                    | \$ | <u>-9,295.</u> |

**SCHEDULE R**  
**(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public Inspection**

CORTLAND HOUSING ASSISTANCE COUNCIL

Employer identification number

16-1130177

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable) of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
| (1) -----<br>-----<br>-----   |                         |  |                     |                           |                                  |
| (2) -----<br>-----<br>-----   |                         |  |                     |                           |                                  |
| (3) -----<br>-----<br>-----   |                         |  |                     |                           |                                  |

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Sec 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------|---|----------------------------------|--|----|
|   |                         |  |                            |   |                                  | Yes                                      | No |
| (1) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |
| (2) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |
| (3) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |
| (4) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |

**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.

| (a)<br>Name, address, and EIN of related organization                      | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disproportionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>General or managing partner? |    | (k)<br>Percentage ownership |
|--|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
|  |                         |  |                                  |  |                              |                                    | Yes                                  | No |  | Yes                                 | No |                             |
| SEE PART VII   |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |
| (1) POMEROY SCHOOL A<br>36 TAYLOR STREET<br>CORTLAND, NY 130<br>45-3249163 | RENTAL                  | NY   | N/A                              |  | 0.                           | 0.                                 |                                      | X  | N/A  | X                                   |    | 98.00                       |
| (2) -----<br>-----<br>-----  |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |
| (3) -----<br>-----<br>-----  |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |

**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)<br>Name, address, and EIN of related organization                                   | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Type of entity (C corp, S corp, or trust) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Percentage ownership | (i)<br>Sec 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|-----------------------------|--|----|
|   |                         |  |                                  |  |                              |                                    |                             | Yes                                      | No |
| (1) POMEROY SCHOOL PROJECT, INC<br>36 TAYLOR STREET<br>CORTLAND, NY 13045<br>16-1435592 | RENTALS                 | NY   | N/A                              | C CORP   | 0.                           | 0.                                 | 100.00                      |  | X  |
| (2) -----<br>-----<br>-----   |                         |  |                                  |  |                              |                                    |                             |  |    |
| (3) -----<br>-----<br>-----   |                         |  |                                  |  |                              |                                    |                             |  |    |

**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 |
|--|-----|----|
| <b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |     |    |
| <b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....                   |     | X  |
| <b>b</b> Gift, grant, or capital contribution to related organization(s) .....   |     | X  |
| <b>c</b> Gift, grant, or capital contribution from related organization(s) .....   |     | X  |
| <b>d</b> Loans or loan guarantees to or for related organization(s) .....  |     | X  |
| <b>e</b> Loans or loan guarantees by related organization(s) .....   |     | X  |
| <b>f</b> Dividends from related organization(s) .....  |     | X  |
| <b>g</b> Sale of assets to related organization(s) .....   |     | X  |
| <b>h</b> Purchase of assets from related organization(s) .....   |     | X  |
| <b>i</b> Exchange of assets with related organization(s) .....   |     | X  |
| <b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....  |     | X  |
| <b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....  |     | X  |
| <b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....  |     | X  |
| <b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....   |     | X  |
| <b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....   |     | X  |
| <b>o</b> Sharing of paid employees with related organization(s) .....  |     | X  |
| <b>p</b> Reimbursement paid to related organization(s) for expenses .....  |     | X  |
| <b>q</b> Reimbursement paid by related organization(s) for expenses .....  |     | X  |
| <b>r</b> Other transfer of cash or property to related organization(s) .....   |     | X  |
| <b>s</b> Other transfer of cash or property from related organization(s) .....   |     | X  |

**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.

|     | (a)<br>Name of related organization | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-----|-------------------------------------|-------------------------------|------------------------|--|
| (1) |                                     |                               |                        |  |
| (2) |                                     |                               |                        |  |
| (3) |                                     |                               |                        |  |
| (4) |                                     |                               |                        |  |
| (5) |                                     |                               |                        |  |
| (6) |                                     |                               |                        |  |

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

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

| (a)<br>Name, address, and EIN of entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e)<br>Are all partners section 501(c)(3) organizations? |    | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disproportionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>General or managing partner? |    | (k)<br>Percentage ownership |
|---|-------------------------|--|--|--|----|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
|   |                         |  |  | Yes  | No |                              |                                    | Yes                                  | No |  | Yes                                 | No |                             |
| (1) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (2) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (3) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (4) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (5) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (6) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (7) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (8) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |

**Part VII** Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

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**PART III - PARTNERSHIP FULL NAME, ADDRESS, FEIN**

POMEROY SCHOOL APARTMENTS, LP      45-3249163      36 TAYLOR STREET      CORTLAND, NY  
13045

**BALANCE SHEET  
MORTGAGES AND OTHER NOTES PAYABLE [O]**

|                   |          |                 |
|-------------------|----------|-----------------|
| MAPLE AVENUE..... | \$       | 150,000.        |
| TAYLOR ST.....    |          | 13,495.         |
| MAPLE AVENUE..... |          | 584,228.        |
|                   | TOTAL \$ | <u>747,723.</u> |

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2024

Department of the Treasury Internal Revenue Service

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 For the 2024 calendar year, or tax year beginning 7/01, 2024, and ending 6/30, 2025

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C CORTLAND HOUSING ASSISTANCE COUNCIL, 36 TAYLOR AVENUE, CORTLAND, NY 13045. D Employer identification number 16-1130177. E Telephone number (607) 753-8271. G Gross receipts \$ 544,529.

F Name and address of principal officer: SAME AS C ABOVE. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No.

I Tax-exempt status: X 501(c)(3), 501(c) ( ) (insert no.), 4947(a)(1) or 527.

J Website: N/A. H(c) Group exemption number.

K Form of organization: X Corporation, Trust, Association, Other. L Year of formation: 1978. M State of legal domicile: NY.

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO SECURE HOUSING AT LOW AND MODERATE COST FOR THE ECONOMICALLY DISADVANTAGED CITIZENS OF CORTLAND COUNTY, NEW YORK

Table with 2 columns: Description and Amount. Rows include: 2 Check this box if the organization discontinued its operations... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue - add lines 8 through 11.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 13 Grants and similar amounts paid... 14 Benefits paid to or for members... 15 Salaries, other compensation... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer SHAWNA GRINNELL, Date, EXECUTIVE DIRECTOR.

Paid Preparer Use Only: Preparer's name CHRISTOPHER GUAY, Preparer's signature, Date, Check self-employed, PTIN P01346366, Firm's name PORT, KASHDIN & MCSHERRY, CPAS, Firm's address 3535 WEST RD, CORTLAND, NY 13045, Firm's EIN 16-1013595, Phone no. (607) 756-5681.

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No

**Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

TO SECURE HOUSING AT LOW AND MODERATE COST FOR THE ECONOMICALLY DISADVANTAGED  
CITIZENS OF CORTLAND COUNTY, NEW YORK

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 188,358. including grants of \$ ) (Revenue \$ 130,968.)

TO PROVIDE HOUSING REHABILITATION AND OTHER HOUSING RELATED SERVICES TO LOW INCOME  
RESIDENTS OF CORTLAND COUNTY

4b (Code: ) (Expenses \$ 161,125. including grants of \$ ) (Revenue \$ 117,504.)

TO PURCHASE AND RESTORE RESIDENTIAL UNITS FOR RENTAL TO LOW INCOME FAMILIES AT  
REDUCED RATES

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 349,483.

**Part IV 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)? <i>If "Yes," complete Schedule A.</i>   | X   |    |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions.  |     | X  |
| 3 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>  |     | X  |
| 4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>   |     | X  |
| 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>   |     | X  |
| 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? <i>If "Yes," complete Schedule D, Part I.</i>  |     | X  |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>  |     | X  |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>   |     | X  |
| 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? <i>If "Yes," complete Schedule D, Part IV.</i>            |     | X  |
| 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>   |     | X  |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.   |     |    |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>   | X   |    |
| 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? <i>If "Yes," complete Schedule D, Part VII.</i>  |     | X  |
| c 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? <i>If "Yes," complete Schedule D, Part VIII.</i>  |     | X  |
| 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? <i>If "Yes," complete Schedule D, Part IX.</i>   | X   |    |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>   | X   |    |
| 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)? <i>If "Yes," complete Schedule D, Part X.</i>  | X   |    |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>  |     | X  |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>   | X   |    |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>  |     | X  |
| 14a Did the organization maintain an office, employees, or agents outside of the United States?   |     | X  |
| 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? <i>If "Yes," complete Schedule F, Parts I and IV.</i> |     | X  |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>   |     | X  |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>   |     | X  |
| 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions.   |     | X  |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>   |     | X  |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>   |     | X  |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>   |     | X  |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  |     |    |
| 21 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? <i>If "Yes," complete Schedule I, Parts I and II.</i>  |     | X  |

**Part IV Checklist of Required Schedules** (continued)

|  | Yes | No |
|--|-----|----|
| <b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III.</i> .....  |     | X  |
| <b>23</b> 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> .....  |     | X  |
| <b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i> .....  |     | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....   |     |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....  |     |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....   |     |    |
| <b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> .....  |     | X  |
| <b>b</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? <i>If "Yes," complete Schedule L, Part I.</i> .....   |     | X  |
| <b>26</b> 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> .....   |     | X  |
| <b>27</b> 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, Part III.</i> ..... |     | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).  |     |    |
| <b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i> .....  |     | X  |
| <b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i> .....   |     | X  |
| <b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i> .....  |     | X  |
| <b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i> .....  |     | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> .....   |     | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> .....   |     | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> .....   |     | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> .....   |     | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i> .....   | X   |    |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....   |     | X  |
| <b>b</b> 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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> .....   |     |    |
| <b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> .....   |     | X  |
| <b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI.</i> .....  |     | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O. ....  | X   |    |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

|   | Yes | No |
|---|-----|----|
| <b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable. ....  |     |    |
| <b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable. ....  |     |    |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? ..... | X   |    |

**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

|            |  | Yes | No |
|------------|--|-----|----|
| <b>2a</b>  | 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>2a</b> 5  |     |    |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .   | X   |    |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .  |     | X  |
| <b>b</b>   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O. . . . .   |     |    |
| <b>4a</b>  | 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)? . . . . .     |     | X  |
| <b>b</b>   | If "Yes," enter the name of the foreign country _____<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   |     |    |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .  |     | X  |
| <b>b</b>   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .   |     | X  |
| <b>c</b>   | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .   |     |    |
| <b>6a</b>  | 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? . . . . .  |     | X  |
| <b>b</b>   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .  |     |    |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |     |    |
| <b>a</b>   | 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? . . . . .  |     | X  |
| <b>b</b>   | If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .  |     |    |
| <b>c</b>   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .   |     | X  |
| <b>d</b>   | If "Yes," indicate the number of Forms 8282 filed during the year. . . . .   |     |    |
|            | <b>7d</b>  |     |    |
| <b>e</b>   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .  |     | X  |
| <b>f</b>   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .   |     | X  |
| <b>g</b>   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .   |     |    |
| <b>h</b>   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .   |     |    |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .   |     |    |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>   |     |    |
| <b>a</b>   | Did the sponsoring organization make any taxable distributions under section 4966? . . . . .   |     |    |
| <b>b</b>   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .  |     |    |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter:   |     |    |
| <b>a</b>   | Initiation fees and capital contributions included on Part VIII, line 12. . . . .  |     |    |
|            | <b>10a</b>   |     |    |
| <b>b</b>   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . .   |     |    |
|            | <b>10b</b>   |     |    |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter:  |     |    |
| <b>a</b>   | Gross income from members or shareholders. . . . .   |     |    |
|            | <b>11a</b>   |     |    |
| <b>b</b>   | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .  |     |    |
|            | <b>11b</b>   |     |    |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .  |     |    |
| <b>b</b>   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . . . .   |     |    |
|            | <b>12b</b>   |     |    |
| <b>13</b>  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>  |     |    |
| <b>a</b>   | Is the organization licensed to issue qualified health plans in more than one state? . . . . .   |     |    |
|            | <b>13a</b>   |     |    |
|            | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |     |    |
| <b>b</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. . . . .   |     |    |
|            | <b>13b</b>   |     |    |
| <b>c</b>   | Enter the amount of reserves on hand . . . . .   |     |    |
|            | <b>13c</b>   |     |    |
| <b>14a</b> | Did the organization receive any payments for indoor tanning services during the tax year? . . . . .   |     | X  |
| <b>b</b>   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. . . . .   |     |    |
|            | <b>14b</b>   |     |    |
| <b>15</b>  | 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? . . . . .<br>If "Yes," see the instructions and file Form 4720, Schedule N.                   |     | X  |
| <b>16</b>  | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . .<br>If "Yes," complete Form 4720, Schedule O.   |     | X  |
| <b>17</b>  | <b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . . .<br>If "Yes," complete Form 6069. |     |    |
|            | <b>17</b>  |     |    |

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI. [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year... 1b Enter the number of voting members included on line 1a, above, who are independent... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? SEE SCHEDULE O 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 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 on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If "No," go to line 13. 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 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? 15a The organization's CEO, Executive Director, or top management official. 15b Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process on 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? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[ ] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O
20 State the name, address, and telephone number of the person who possesses the organization's books and records.
EMMA DIPPOLITO 36 TAYLOR AVE. CORTLAND NY 13045 607-753-8271

**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 VII.

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and title                 | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |         | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------|--|---|-----------------------|---------|--------------|------------------------------|---------|---|--|---|
|                                       |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former  |   |  |   |
| (1) SHAWNA GRINNELL<br>EXECUTIVE DIR. | 40<br>0  |   |                       | X       |              |                              | 53,848. | 0.  | 0.   |   |
| (2) CARRIE KNIGHT<br>MEMBER           | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (3) DJ VANGORDER<br>VICE PRESIDENT    | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (4) AMBER GIAMEI<br>MEMBER            | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (5) PAUL SLOWEY<br>SECRETARY          | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (6) STEVEN BROWN<br>TREASURER         | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (7) KRIS BUCHAN<br>MEMBER             | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (8) MACHELL PHELPS<br>MEMBER          | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (9) JERRY HARTNETT<br>PRESIDENT       | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (10) GARRY VANGORDER<br>MEMBER        | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (11)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (12)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (13)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (14)                                  |  |   |                       |         |              |                              |         |   |  |   |

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A)<br>Name and title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------|--|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
|                       |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |   |  |   |
| (15) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (16) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (17) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (18) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (19) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (20) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (21) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (22) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (23) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (24) -----            |  |   |                       |         |              |                              |        |   |  |   |
| (25) -----            |  |   |                       |         |              |                              |        |   |  |   |

|  |         |    |    |
|--|---------|----|----|
| <b>1b Subtotal</b> .....   | 53,848. | 0. | 0. |
| <b>c Total from continuation sheets to Part VII, Section A</b> ..... | 0.      | 0. | 0. |
| <b>d Total (add lines 1b and 1c)</b> .....                           | 53,848. | 0. | 0. |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

|   | Yes | No |
|---|-----|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i> .....  |     | X  |
| <b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i> ..... |     | X  |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i> .....                       |     | X  |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

**Part VIII Statement of Revenue**

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

|  |  | (A)<br>Total revenue  | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |  |
|--|--|---|--|---|--|--|
| <b>Contributions, Gifts, Grants,<br/>and Other Similar Amounts</b>           | <b>1a</b> Federated campaigns .....  | <b>1a</b>   |  |   |  |  |
|  | <b>b</b> Membership dues .....   | <b>1b</b>   |  |   |  |  |
|  | <b>c</b> Fundraising events .....  | <b>1c</b>   |  |   |  |  |
|  | <b>d</b> Related organizations .....   | <b>1d</b>   |  |   |  |  |
|  | <b>e</b> Government grants (contributions) .....   | <b>1e</b> 185,138.  |  |   |  |  |
|  | <b>f</b> All other contributions, gifts, grants, and<br>similar amounts not included above ..... | <b>1f</b>   |  |   |  |  |
|  | <b>g</b> Noncash contributions included in<br>lines 1a-1f .....                                  | <b>1g</b>   |  |   |  |  |
|  | <b>h Total.</b> Add lines 1a-1f .....  |   | 185,138.   |   |  |  |
|  |  |   |  |   |  |  |
| <b>Program Service Revenue</b>   | <b>Business Code</b>   |   |  |   |  |  |
|  | <b>2a</b> <u>PROPERTY MANAGEMENT FEES</u> .....  |   | 117,504.   |   | 117,504.   |  |
|  | <b>b</b> <u>LOW INCOME RENTALS</u> .....   |   | 76,799.  |   | 76,799.  |  |
|  | <b>c</b> <u>RAMP PROGRAM</u> .....   |   | 39,035.  |   | 39,035.  |  |
|  | <b>d</b> <u>HANDYMAN PROGRAM</u> .....   |   | 12,431.  |   | 12,431.  |  |
|  | <b>e</b> <u>OTHER HOUSING PROGRAMS</u> .....   |   | 8,063.   |   | 8,063.   |  |
|  | <b>f</b> All other program service revenue .....   |   | 10,000.  |   | 10,000.  |  |
|  | <b>g Total.</b> Add lines 2a-2f .....  |   | 263,832.   |   |  |  |
|  |  |   |  |   |  |  |
| <b>Miscellaneous<br/>Revenue</b>   | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts) .....   |   | 2.   |   | 2.   |  |
|  | <b>4</b> Income from investment of tax-exempt bond proceeds .....                                |   |  |   |  |  |
|  | <b>5</b> Royalties .....   |   |  |   |  |  |
|  | <b>6a</b> Gross rents .....  | <b>6a</b>   |  |   |  |  |
|  |  | (i) Real  | (ii) Personal                                      |   |  |  |
|  |  | <b>6b</b> Less: rental expenses .....   |  |   |  |  |
|  | <b>c</b> Rental income or (loss) .....   | <b>6c</b>   |  |   |  |  |
|  | <b>d</b> Net rental income or (loss) .....   |   |  |   |  |  |
|  | <b>7a</b> Gross amount from<br>sales of assets<br>other than inventory .....                     | <b>7a</b>   |  |   |  |  |
|  |  | (i) Securities  | (ii) Other   |   |  |  |
|  |  | <b>7b</b> Less: cost or other basis<br>and sales expenses .....   |  |   |  |  |
|  | <b>c</b> Gain or (loss) .....  | <b>7c</b>   |  |   |  |  |
|  | <b>d</b> Net gain or (loss) .....  |   |  |   |  |  |
|  | <b>Other Revenue</b>   | <b>8a</b> Gross income from fundraising events<br>(not including \$ _____<br>of contributions reported on line 1c).<br>See Part IV, line 18 ..... | <b>8a</b>  |   |  |  |
|  |  | <b>b</b> Less: direct expenses .....  | <b>8b</b>  |   |  |  |
| <b>c</b> Net income or (loss) from fundraising events .....                  |  |   |  |   |  |  |
| <b>9a</b> Gross income from gaming activities.<br>See Part IV, line 19 ..... |  | <b>9a</b>   |  |   |  |  |
|  |  | <b>9b</b> Less: direct expenses .....   |  |   |  |  |
| <b>c</b> Net income or (loss) from gaming activities .....                   |  |   |  |   |  |  |
| <b>10a</b> Gross sales of inventory, less<br>returns and allowances .....    | <b>10a</b>   |   |  |   |  |  |
|  | <b>10b</b> Less: cost of goods sold. ....  |   |  |   |  |  |
|  | <b>c</b> Net income or (loss) from sales of inventory .....                                      |   |  |   |  |  |
|  |  |   |  |   |  |  |
| <b>Miscellaneous<br/>Revenue</b>   | <b>Business Code</b>   |   |  |   |  |  |
|  | <b>11a</b> <u>OTHER INCOME</u> .....   |   | 95,557.  |   | 95,557.  |  |
|  | <b>b</b> .....   |   |  |   |  |  |
|  | <b>c</b> .....   |   |  |   |  |  |
|  | <b>d</b> All other revenue .....   |   |  |   |  |  |
| <b>e Total.</b> Add lines 11a-11d .....                                      |  | 95,557.   |  |   |  |  |
| <b>12 Total revenue.</b> See instructions .....                              |  | 544,529.  | 0.   | 0.                                      | 359,391.   |  |

**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).

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

| <b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>   | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service expenses | <b>(C)</b><br>Management and general expenses | <b>(D)</b><br>Fundraising expenses |
|---|------------------------------|--|---|------------------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21  |                              |  |   |                                    |
| 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  | 53,848.                      | 43,078.                                | 10,770.                                       | 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)  | 0.                           | 0.                                     | 0.  | 0.                                 |
| 7 Other salaries and wages  | 126,676.                     | 101,341.                               | 25,335.                                       |                                    |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  | 4,370.                       | 3,496.                                 | 874.  |                                    |
| 9 Other employee benefits   | 31,737.                      | 25,390.                                | 6,347.  |                                    |
| 10 Payroll taxes  | 13,681.                      | 10,945.                                | 2,736.  |                                    |
| 11 Fees for services (nonemployees):  |                              |  |   |                                    |
| a Management  | 4,343.                       | 3,474.                                 | 869.  |                                    |
| b Legal   | 3,539.                       | 2,831.                                 | 708.  |                                    |
| c Accounting  | 2,750.                       | 2,369.                                 | 381.  |                                    |
| d Lobbying  |                              |  |   |                                    |
| 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.)   |                              |  |   |                                    |
| 12 Advertising and promotion  | 310.                         |  | 310.  |                                    |
| 13 Office expenses  | 5,008.                       | 3,760.                                 | 1,248.  |                                    |
| 14 Information technology   |                              |  |   |                                    |
| 15 Royalties  |                              |  |   |                                    |
| 16 Occupancy  |                              |  |   |                                    |
| 17 Travel   | 3,386.                       |  | 3,386.  |                                    |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials   |                              |  |   |                                    |
| 19 Conferences, conventions, and meetings   |                              |  |   |                                    |
| 20 Interest   | 1,156.                       |  | 1,156.  |                                    |
| 21 Payments to affiliates   |                              |  |   |                                    |
| 22 Depreciation, depletion, and amortization  | 45,069.                      | 27,179.                                | 17,890.                                       |                                    |
| 23 Insurance  | 12,753.                      | 10,203.                                | 2,550.  |                                    |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)                                    |                              |  |   |                                    |
| a <u>CONTRACTUAL</u>  | 65,569.                      | 65,569.                                |   |                                    |
| b <u>REPAIR AND MAINTENANCE</u>   | 35,549.                      | 35,549.                                |   |                                    |
| c <u>UTILITIES AND TELEPHONE</u>  | 16,887.                      | 13,715.                                | 3,172.  |                                    |
| d <u>OTHER ADMINISTRATIVE</u>   | 5,534.                       |  | 5,534.  |                                    |
| e All other expenses  | 1,451.                       | 584.                                   | 867.  |                                    |
| 25 Total functional expenses. Add lines 1 through 24e   | 433,616.                     | 349,483.                               | 84,133.                                       | 0.                                 |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) |                              |  |   |                                    |

**Part X Balance Sheet**

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

|                                    |  | (A)<br>Beginning of year  |             | (B)<br>End of year |             |          |
|------------------------------------|--|---|-------------|--------------------|-------------|----------|
| <b>Assets</b>                      | 1  | Cash – non-interest-bearing   | 135,036.    | 1                  | 168,375.    |          |
|                                    | 2  | Savings and temporary cash investments  |             | 2                  |             |          |
|                                    | 3  | Pledges and grants receivable, net  |             | 3                  |             |          |
|                                    | 4  | Accounts receivable, net  | 1,560.      | 4                  | 3,617.      |          |
|                                    | 5  | Loans and other receivables from 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 |             | 5                  |             |          |
|                                    | 6  | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   |             | 6                  |             |          |
|                                    | 7  | Notes and loans receivable, net   |             | 7                  |             |          |
|                                    | 8  | Inventories for sale or use   |             | 8                  |             |          |
|                                    | 9  | Prepaid expenses and deferred charges   |             | 9                  |             |          |
|                                    | 10a  | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   | 10a         | 1,253,971.         |             |          |
|                                    | b  | Less: accumulated depreciation  | 10b         | 797,423.           | 10c         | 456,548. |
|                                    | 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  | 133,076.    | 15                 | 238,930.    |          |
| 16                                 | <b>Total assets.</b> Add lines 1 through 15 (must equal line 33)   | 759,293.  | 16          | 867,470.           |             |          |
| <b>Liabilities</b>                 | 17   | Accounts payable and accrued expenses   | 3,697.      | 17                 | 5,664.      |          |
|                                    | 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                 |             |          |
|                                    | 22   | 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  | 754,090.    | 23                 | 747,723.    |          |
|                                    | 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   | 2,612,312.  | 25                 | 2,623,271.  |          |
|                                    | 26   | <b>Total liabilities.</b> Add lines 17 through 25   | 3,370,099.  | 26                 | 3,376,658.  |          |
| <b>Net Assets or Fund Balances</b> | <b>Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.</b> <input checked="" type="checkbox"/> |   |             |                    |             |          |
|                                    | 27   | Net assets without donor restrictions   | -2,653,658. | 27                 | -2,509,188. |          |
|                                    | 28   | Net assets with donor restrictions  | 42,852.     | 28                 |             |          |
|                                    | <b>Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.</b> <input type="checkbox"/>          |   |             |                    |             |          |
|                                    | 29   | Capital stock or trust principal, or current funds  |             | 29                 |             |          |
|                                    | 30   | Paid-in or capital surplus, or land, building, or equipment fund  |             | 30                 |             |          |
|                                    | 31   | Retained earnings, endowment, accumulated income, or other funds  |             | 31                 |             |          |
| 32                                 | <b>Total net assets or fund balances.</b>  | -2,610,806.   | 32          | -2,509,188.        |             |          |
| 33                                 | <b>Total liabilities and net assets/fund balances.</b>   | 759,293.  | 33          | 867,470.           |             |          |

**Part XI Reconciliation of Net Assets**

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

|           |  |           |             |
|-----------|--|-----------|-------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b>  | 544,529.    |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b>  | 433,616.    |
| <b>3</b>  | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b>  | 110,913.    |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | <b>4</b>  | -2,610,806. |
| <b>5</b>  | Net unrealized gains (losses) on investments   | <b>5</b>  |             |
| <b>6</b>  | Donated services and use of facilities   | <b>6</b>  |             |
| <b>7</b>  | Investment expenses  | <b>7</b>  |             |
| <b>8</b>  | Prior period adjustments   | <b>8</b>  |             |
| <b>9</b>  | Other changes in net assets or fund balances (explain on Schedule O) SEE SCHEDULE O                            | <b>9</b>  | -9,295.     |
| <b>10</b> | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | <b>10</b> | -2,509,188. |

**Part XII Financial Statements and Reporting**

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

|   |  | Yes | No |
|---|--|-----|----|
| <b>1</b>  | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____   |     |    |
| If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   |  |     |    |
| <b>2a</b>   | Were the organization's financial statements compiled or reviewed by an independent accountant?  |     | X  |
| If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. |  |     |    |
| <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                 |  |     |    |
| <b>2b</b>   | Were the organization's financial statements audited by an independent accountant?   | X   |    |
| If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.              |  |     |    |
| <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis      |  |     |    |
| <b>2c</b>   | 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? |     | X  |
| If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   |  |     |    |
| <b>3a</b>   | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?  |     | X  |
| <b>3b</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 on Schedule O and describe any steps taken to undergo such audits     |     |    |

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2024**

**Open to Public Inspection**

|  |   |
|--|---|
| Name of the organization<br><b>CORTLAND HOUSING ASSISTANCE COUNCIL</b> | Employer identification number<br><b>16-1130177</b> |
|--|---|

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
|                                    |          |   | Yes   | No |   |   |
| (A)                                |          |   |   |    |   |   |
| (B)                                |          |   |   |    |   |   |
| (C)                                |          |   |   |    |   |   |
| (D)                                |          |   |   |    |   |   |
| (E)                                |          |   |   |    |   |   |
| <b>Total</b>                       |          |   |   |    |   |   |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person that exceeds 2%; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 14: Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)). Row 15: Public support percentage from 2023 Schedule A, Part II, line 14.

16a 33-1/3% support test—2024. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

b 33-1/3% support test—2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

17a 10%-facts-and-circumstances test—2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.

b 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)  | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total  |
|--|----------|----------|----------|----------|----------|------------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | 364,952. | 263,794. | 300,828. | 121,783. | 185,138. | 1,236,495. |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. | 271,936. | 270,027. | 227,821. | 226,265. | 263,832. | 1,259,881. |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513.   |          |          |          |          |          | 0.         |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  |          |          |          |          |          | 0.         |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge.  |          |          |          |          |          | 0.         |
| <b>6 Total.</b> Add lines 1 through 5.   | 636,888. | 533,821. | 528,649. | 348,048. | 448,970. | 2,496,376. |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons.  | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.           | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>c</b> Add lines 7a and 7b.  | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)   |          |          |          |          |          | 2,496,376. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)   | (a) 2020 | (b) 2021 | (c) 2022 | (d) 2023 | (e) 2024 | (f) Total  |
|---|----------|----------|----------|----------|----------|------------|
| <b>9</b> Amounts from line 6.   | 636,888. | 533,821. | 528,649. | 348,048. | 448,970. | 2,496,376. |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. |          |          |          |          |          | 0.         |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.                           |          |          |          |          |          | 0.         |
| <b>c</b> Add lines 10a and 10b.   | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.      |          |          |          |          |          | 0.         |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.) SEE PART VI                      | 14,469.  | 3,952.   | 7,478.   | 23,375.  | 95,557.  | 144,831.   |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)  | 651,357. | 537,773. | 536,127. | 371,423. | 544,527. | 2,641,207. |

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

|  |           |         |
|--|-----------|---------|
| <b>15</b> Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)). | <b>15</b> | 94.52 % |
| <b>16</b> Public support percentage from 2023 Schedule A, Part III, line 15.                       | <b>16</b> | 97.82 % |

**Section D. Computation of Investment Income Percentage**

|   |           |        |
|---|-----------|--------|
| <b>17</b> Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)). | <b>17</b> | 0.00 % |
| <b>18</b> Investment income percentage from 2023 Schedule A, Part III, line 17.                         | <b>18</b> | 0.00 % |

**19a 33-1/3% support tests—2024.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33-1/3% support tests—2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

|   | Yes | No |
|---|-----|----|
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.   |     |    |
| <b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).  |     |    |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.   |     |    |
| <b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.  |     |    |
| <b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.   |     |    |
| <b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.   |     |    |
| <b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.   |     |    |
| <b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.  |     |    |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). |     |    |
| <b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  |     |    |
| <b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?   |     |    |
| <b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .  |     |    |
| <b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).  |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).  |     |    |
| <b>9a</b> 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 <b>Part VI</b> .   |     |    |
| <b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .  |     |    |
| <b>c</b> Did a disqualified person (as defined on 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 <b>Part VI</b> .   |     |    |
| <b>10a</b> 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," answer line 10b below.  |     |    |
| <b>b</b> Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)   |     |    |

**Part IV Supporting Organizations** (continued)

|  | Yes        | No |
|--|------------|----|
| <b>11</b> Has the organization accepted a gift or contribution from any of the following persons?  |            |    |
| <b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? | <b>11a</b> |    |
| <b>b</b> A family member of a person described on line 11a above?  | <b>11b</b> |    |
| <b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>                              | <b>11c</b> |    |

**Section B. Type I Supporting Organizations**

|   | Yes      | No |
|---|----------|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> | <b>1</b> |    |
| <b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>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 organization.</i>   | <b>2</b> |    |

**Section C. Type II Supporting Organizations**

|  | Yes      | No |
|--|----------|----|
| <b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | <b>1</b> |    |

**Section D. All Type III Supporting Organizations**

|   | Yes      | No |
|---|----------|----|
| <b>1</b> 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? | <b>1</b> |    |
| <b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>  | <b>2</b> |    |
| <b>3</b> By reason of the relationship described on line 2, above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>  | <b>3</b> |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|   |           |     |    |
|---|-----------|-----|----|
| <b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ).   |           |     |    |
| <b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>   |           |     |    |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>  |           |     |    |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>  |           |     |    |
| <b>2</b> Activities Test. <b>Answer lines 2a and 2b below.</b>  |           | Yes | No |
| <b>a</b> 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? <i>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.</i> | <b>2a</b> |     |    |
| <b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>  | <b>2b</b> |     |    |
| <b>3</b> Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>  |           |     |    |
| <b>a</b> 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>If "Yes" or "No," provide details in Part VI.</i>  | <b>3a</b> |     |    |
| <b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>   | <b>3b</b> |     |    |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| <b>Section A – Adjusted Net Income</b> |  | (A) Prior Year | (B) Current Year (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                                      | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)  | 8              |                             |

| <b>Section B – Minimum Asset Amount</b> |   | (A) Prior Year | (B) Current Year (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): |                |                             |
| a                                       | Average monthly value of securities   | 1a             |                             |
| b                                       | Average monthly cash balances   | 1b             |                             |
| c                                       | Fair market value of other non-exempt-use assets  | 1c             |                             |
| d                                       | <b>Total</b> (add lines 1a, 1b, and 1c)   | 1d             |                             |
| e                                       | <b>Discount</b> 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 0.015 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 0.035.   | 6              |                             |
| 7                                       | Recoveries of prior-year distributions  | 7              |                             |
| 8                                       | <b>Minimum Asset Amount</b> (add line 7 to line 6)  | 8              |                             |

| <b>Section C – Distributable Amount</b> |   |   | Current Year |
|---|---|---|--------------|
| 1                                       | Adjusted net income for prior year (from Section A, line 8, column A)   | 1 |              |
| 2                                       | Enter 0.85 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                                       | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). | 6 |              |

7  Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

| <b>Section D – Distributions</b> |  | <b>Current Year</b> |
|----------------------------------|--|---------------------|
| <b>1</b>                         | Amounts paid to supported organizations to accomplish exempt purposes  | <b>1</b>            |
| <b>2</b>                         | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity              | <b>2</b>            |
| <b>3</b>                         | Administrative expenses paid to accomplish exempt purposes of supported organizations  | <b>3</b>            |
| <b>4</b>                         | Amounts paid to acquire exempt-use assets  | <b>4</b>            |
| <b>5</b>                         | Qualified set-aside amounts (prior IRS approval required – provide details in <b>Part VI</b> )   | <b>5</b>            |
| <b>6</b>                         | Other distributions (describe in <b>Part VI</b> ). See instructions.   | <b>6</b>            |
| <b>7</b>                         | <b>Total annual distributions.</b> Add lines 1 through 6.  | <b>7</b>            |
| <b>8</b>                         | Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions. | <b>8</b>            |
| <b>9</b>                         | Distributable amount for 2024 from Section C, line 6   | <b>9</b>            |
| <b>10</b>                        | Line 8 amount divided by line 9 amount   | <b>10</b>           |

| <b>Section E – Distribution Allocations (see instructions)</b>   | <b>(i)<br/>Excess<br/>Distributions</b> | <b>(ii)<br/>Underdistributions<br/>Pre-2024</b> | <b>(iii)<br/>Distributable<br/>Amount for 2024</b> |
|--|---|---|--|
| <b>1</b> Distributable amount for 2024 from Section C, line 6  |   |   |  |
| <b>2</b> Underdistributions, if any, for years prior to 2024 (reasonable cause required – explain in <b>Part VI</b> ). See instructions.   |   |   |  |
| <b>3</b> Excess distributions carryover, if any, to 2024   |   |   |  |
| <b>a</b> From 2019 . . . . .   |   |   |  |
| <b>b</b> From 2020 . . . . .   |   |   |  |
| <b>c</b> From 2021 . . . . .   |   |   |  |
| <b>d</b> From 2022 . . . . .   |   |   |  |
| <b>e</b> From 2023 . . . . .   |   |   |  |
| <b>f</b> Total of lines 3a through 3e  |   |   |  |
| <b>g</b> Applied to underdistributions of prior years  |   |   |  |
| <b>h</b> Applied to 2024 distributable amount  |   |   |  |
| <b>i</b> Carryover from 2019 not applied (see instructions)  |   |   |  |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |   |   |  |
| <b>4</b> Distributions for 2024 from Section D, line 7: \$   |   |   |  |
| <b>a</b> Applied to underdistributions of prior years  |   |   |  |
| <b>b</b> Applied to 2024 distributable amount  |   |   |  |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |   |   |  |
| <b>5</b> Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions. |   |   |  |
| <b>6</b> Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.                        |   |   |  |
| <b>7</b> Excess distributions carryover to 2025. Add lines 3j and 4c.  |   |   |  |
| <b>8</b> Breakdown of line 7:  |   |   |  |
| <b>a</b> Excess from 2020 . . . . .  |   |   |  |
| <b>b</b> Excess from 2021 . . . . .  |   |   |  |
| <b>c</b> Excess from 2022 . . . . .  |   |   |  |
| <b>d</b> Excess from 2023 . . . . .  |   |   |  |
| <b>e</b> Excess from 2024 . . . . .  |   |   |  |

BAA

Schedule A (Form 990) 2024

**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**PART III, LINE 12 - OTHER INCOME**

| <u>NATURE AND SOURCE</u> | <u>2024</u>       | <u>2023</u>       | <u>2022</u>      | <u>2021</u>      | <u>2020</u>       |
|--------------------------|-------------------|-------------------|------------------|------------------|-------------------|
| MISC INCOME              | \$ 12,266.        | \$ 23,375.        | \$ 7,478.        | \$ 3,952.        | \$ 14,469.        |
| ERT CREDIT               | 83,291.           |                   |                  |                  |                   |
| <b>TOTAL</b>             | <u>\$ 95,557.</u> | <u>\$ 23,375.</u> | <u>\$ 7,478.</u> | <u>\$ 3,952.</u> | <u>\$ 14,469.</u> |

SCHEDULE D (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number and aggregate values.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property...
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes...

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2a Preservation of land for public use...
2b Protection of natural habitat...
2c Preservation of open space...
2d Preservation of a historically important land area...
2e Preservation of a certified historic structure...

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows 2a-2d for conservation easement statistics.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.
(i) Revenue included on Form 990, Part VIII, line 1.
(ii) Assets included in Form 990, Part X.
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.
a Revenue included on Form 990, Part VIII, line 1.
b Assets included in Form 990, Part X.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table.
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Yes  No

**Part V Endowment Funds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

|  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment \_\_\_\_\_ %
  - b Permanent endowment \_\_\_\_\_ %
  - c Term endowment \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes    | No |
|--|--------|----|
| (i) Unrelated organizations?   | 3a(i)  |    |
| (ii) Related organizations?  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land  |                                      | 25,000.                         |                              | 25,000.        |
| b Buildings  |                                      | 862,172.                        | 662,561.                     | 199,611.       |
| c Leasehold improvements   |                                      | 299,584.                        | 84,184.                      | 215,400.       |
| d Equipment  |                                      | 46,445.                         | 29,908.                      | 16,537.        |
| e Other  |                                      | 20,770.                         | 20,770.                      | 0.             |
| <b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B).) |                                      |                                 |                              | 456,548.       |

**Part VII Investments – Other Securities** N/A  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security)        | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives   |                |   |
| (2) Closely held equity interests   |                |   |
| (3) Other   |                |   |
| (A) -----   |                |   |
| (B) -----   |                |   |
| (C) -----   |                |   |
| (D) -----   |                |   |
| (E) -----   |                |   |
| (F) -----   |                |   |
| (G) -----   |                |   |
| (H) -----   |                |   |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, column (B)) |                |   |

**Part VIII Investments – Program Related** N/A  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment   | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1)   |                |   |
| (2)   |                |   |
| (3)   |                |   |
| (4)   |                |   |
| (5)   |                |   |
| (6)   |                |   |
| (7)   |                |   |
| (8)   |                |   |
| (9)   |                |   |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, column (B)) |                |   |

**Part IX Other Assets**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description   | (b) Book value |
|---|----------------|
| (1) CONSTRUCTION IN PROGRESS  | 238,929.       |
| (2) ROUNDING  | 1.             |
| (3)   |                |
| (4)   |                |
| (5)   |                |
| (6)   |                |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, column (B)) | 238,930.       |

**Part X Other Liabilities**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability   | (b) Book value |
|---|----------------|
| (1) Federal income taxes  |                |
| (2) COMPENSATED ABSENCES  | 24,195.        |
| (3) INTERFUND PAYABLES  | 21,000.        |
| (4) INVESTMENT IN AFFILIATE   | 2,572,073.     |
| (5) OTHER CURRENT LIABILITIES   | 204.           |
| (6) TENANT'S SECURITY DEPOSITS  | 5,799.         |
| (7)   |                |
| (8)   |                |
| (9)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, column (B)) | 2,623,271.     |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. SEE PART XIII.

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** N/A

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

|          |  |           |           |  |
|----------|--|-----------|-----------|--|
| <b>1</b> | Total revenue, gains, and other support per audited financial statements                       |           | <b>1</b>  |  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                            |           |           |  |
|          | <b>a</b> Net unrealized gains (losses) on investments  | <b>2a</b> |           |  |
|          | <b>b</b> Donated services and use of facilities  | <b>2b</b> |           |  |
|          | <b>c</b> Recoveries of prior year grants   | <b>2c</b> |           |  |
|          | <b>d</b> Other (Describe in Part XIII.)  | <b>2d</b> |           |  |
|          | <b>e</b> Add lines <b>2a</b> through <b>2d</b>   |           | <b>2e</b> |  |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>   |           | <b>3</b>  |  |
| <b>4</b> | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                           |           |           |  |
|          | <b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b                      | <b>4a</b> |           |  |
|          | <b>b</b> Other (Describe in Part XIII.)  | <b>4b</b> |           |  |
|          | <b>c</b> Add lines <b>4a</b> and <b>4b</b>   |           | <b>4c</b> |  |
| <b>5</b> | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) |           | <b>5</b>  |  |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return** N/A

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

|          |   |           |           |  |
|----------|---|-----------|-----------|--|
| <b>1</b> | Total expenses and losses per audited financial statements                                      |           | <b>1</b>  |  |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part IX, line 25:                               |           |           |  |
|          | <b>a</b> Donated services and use of facilities   | <b>2a</b> |           |  |
|          | <b>b</b> Prior year adjustments   | <b>2b</b> |           |  |
|          | <b>c</b> Other losses   | <b>2c</b> |           |  |
|          | <b>d</b> Other (Describe in Part XIII.)   | <b>2d</b> |           |  |
|          | <b>e</b> Add lines <b>2a</b> through <b>2d</b>  |           | <b>2e</b> |  |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b>  |           | <b>3</b>  |  |
| <b>4</b> | Amounts included on Form 990, Part IX, line 25, but not on line 1:                              |           |           |  |
|          | <b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b                       | <b>4a</b> |           |  |
|          | <b>b</b> Other (Describe in Part XIII.)   | <b>4b</b> |           |  |
|          | <b>c</b> Add lines <b>4a</b> and <b>4b</b>  |           | <b>4c</b> |  |
| <b>5</b> | Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) |           | <b>5</b>  |  |

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X - FASB ASC 740 FOOTNOTE**

CHAC FOLLOWS THE PROVISIONS OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE CODIFICATION. THE CODIFICATION REQUIRES THE EVALUATION OF TAX POSITIONS, WHICH INCLUDES MAINTAINING ITS TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNRELATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT HAS TAKEN ANY TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD. CHAC'S INCOME TAX RETURNS ARE SUBJECT

**Part XIII** Supplemental Information *(continued)***PART X - FASB ASC 740 FOOTNOTE (CONTINUED)**

TO POSSIBLE FEDERAL EXAMINATION, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED.

SIGNIFICANT MANAGEMENT JUDGMENT IS REQUIRED IN DETERMINING UNCERTAIN TAX POSITIONS. WHILE THE COUNCIL BASES ITS ESTIMATES ON HISTORICAL EXPERIENCE AND VARIOUS OTHER ASSUMPTIONS THAT MANAGEMENT BELIEVES TO BE REASONABLE UNDER THE CIRCUMSTANCES, ACTUAL RESULTS MAY DIFFER FROM THESE ESTIMATES, AND, AS A RESULT, COULD HAVE A MATERIAL IMPACT ON THE FINANCIAL POSITION.

**SCHEDULE O  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Employer identification number

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

**FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.**

DJ VANGORDER & GARRY VANGORDER ARE BROTHERS.

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

A DRAFT COPY OF FORM 990 IS REVIEWED BY MANAGEMENT AND THE BOARD OF DIRECTORS PRIOR TO FILING.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THE ORGANIZATION'S GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST.

**FORM 990, PART XI, LINE 9  
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

|  |       |                   |
|--|-------|-------------------|
| ADJUSTMENT OF PARTNERSHIP INTEREST ..... | \$    | -9,295.           |
|  | TOTAL | \$ <u>-9,295.</u> |

**SCHEDULE R  
(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

Name of the organization

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

CORTLAND HOUSING ASSISTANCE COUNCIL

Employer identification number

16-1130177

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable) of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
| (1) -----<br>-----<br>-----   |                         |  |                     |                           |                                  |
| (2) -----<br>-----<br>-----   |                         |  |                     |                           |                                  |
| (3) -----<br>-----<br>-----   |                         |  |                     |                           |                                  |

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Sec 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------|---|----------------------------------|--|----|
|   |                         |  |                            |   |                                  | Yes                                      | No |
| (1) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |
| (2) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |
| (3) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |
| (4) -----<br>-----<br>-----                           |                         |  |                            |   |                                  |  |    |

**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.

| (a)<br>Name, address, and EIN of related organization                      | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disproportionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>General or managing partner? |    | (k)<br>Percentage ownership |
|--|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
|  |                         |  |                                  |  |                              |                                    | Yes                                  | No |  | Yes                                 | No |                             |
| SEE PART VII   |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |
| (1) POMEROY SCHOOL A<br>36 TAYLOR STREET<br>CORTLAND, NY 130<br>45-3249163 | RENTAL                  | NY   | N/A                              |  | 0.                           | 0.                                 |                                      | X  | N/A  | X                                   |    | 98.00                       |
| (2) -----<br>-----<br>-----  |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |
| (3) -----<br>-----<br>-----  |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |

**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)<br>Name, address, and EIN of related organization                                   | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Type of entity (C corp, S corp, or trust) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Percentage ownership | (i)<br>Sec 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|-----------------------------|--|----|
|   |                         |  |                                  |  |                              |                                    |                             | Yes                                      | No |
| (1) POMEROY SCHOOL PROJECT, INC<br>36 TAYLOR STREET<br>CORTLAND, NY 13045<br>16-1435592 | RENTALS                 | NY   | N/A                              | C CORP   | 0.                           | 0.                                 | 100.00                      |  | X  |
| (2) -----<br>-----<br>-----   |                         |  |                                  |  |                              |                                    |                             |  |    |
| (3) -----<br>-----<br>-----   |                         |  |                                  |  |                              |                                    |                             |  |    |

**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 |
|--|-----|----|
| <b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |     |    |
| <b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....                   |     | X  |
| <b>b</b> Gift, grant, or capital contribution to related organization(s) .....   |     | X  |
| <b>c</b> Gift, grant, or capital contribution from related organization(s) .....   |     | X  |
| <b>d</b> Loans or loan guarantees to or for related organization(s) .....  |     | X  |
| <b>e</b> Loans or loan guarantees by related organization(s) .....   |     | X  |
| <b>f</b> Dividends from related organization(s) .....  |     | X  |
| <b>g</b> Sale of assets to related organization(s) .....   |     | X  |
| <b>h</b> Purchase of assets from related organization(s) .....   |     | X  |
| <b>i</b> Exchange of assets with related organization(s) .....   |     | X  |
| <b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....  |     | X  |
| <b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....  |     | X  |
| <b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....  |     | X  |
| <b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....   |     | X  |
| <b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....   |     | X  |
| <b>o</b> Sharing of paid employees with related organization(s) .....  |     | X  |
| <b>p</b> Reimbursement paid to related organization(s) for expenses .....  |     | X  |
| <b>q</b> Reimbursement paid by related organization(s) for expenses .....  |     | X  |
| <b>r</b> Other transfer of cash or property to related organization(s) .....   |     | X  |
| <b>s</b> Other transfer of cash or property from related organization(s) .....   |     | X  |

**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.

|     | (a)<br>Name of related organization | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-----|-------------------------------------|-------------------------------|------------------------|--|
| (1) |                                     |                               |                        |  |
| (2) |                                     |                               |                        |  |
| (3) |                                     |                               |                        |  |
| (4) |                                     |                               |                        |  |
| (5) |                                     |                               |                        |  |
| (6) |                                     |                               |                        |  |

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

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

| (a)<br>Name, address, and EIN of entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e)<br>Are all partners section 501(c)(3) organizations? |    | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disproportionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>General or managing partner? |    | (k)<br>Percentage ownership |
|---|-------------------------|--|--|--|----|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
|   |                         |  |  | Yes  | No |                              |                                    | Yes                                  | No |  | Yes                                 | No |                             |
| (1) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (2) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (3) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (4) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (5) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (6) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (7) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (8) -----<br>-----<br>-----             |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

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**PART III - PARTNERSHIP FULL NAME, ADDRESS, FEIN**

POMEROY SCHOOL APARTMENTS, LP      45-3249163      36 TAYLOR STREET      CORTLAND, NY  
13045

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

| NO.                   | DESCRIPTION             | DATE ACQUIRED | DATE SOLD | COST/<br>BASIS | BUS.<br>PCT. | CUR<br>179<br>BONUS | SPECIAL<br>DEPR.<br>ALLOW. | PRIOR<br>179/<br>BONUS/<br>SP. DEPR. | PRIOR<br>DEC. BAL<br>DEPR. | SALVAG<br>/BASIS<br>REDUCT | DEPR.<br>BASIS | PRIOR<br>DEPR. | METHOD | LIFE | RATE | CURRENT<br>DEPR. |
|-----------------------|-------------------------|---------------|-----------|----------------|--------------|---------------------|----------------------------|--------------------------------------|----------------------------|----------------------------|----------------|----------------|--------|------|------|------------------|
| FORM 990/990-PF       |                         |               |           |                |              |                     |                            |                                      |                            |                            |                |                |        |      |      |                  |
| 18-20 MAPLE AVE       |                         |               |           |                |              |                     |                            |                                      |                            |                            |                |                |        |      |      |                  |
| 51                    | 18-20 MAPLE AVE         | 10/28/99      |           | 25,000         |              |                     |                            |                                      |                            |                            | 25,000         |                |        |      |      | 0                |
| 52                    | AQUISITION PRICE        | 10/28/99      |           | 117,344        |              |                     |                            |                                      |                            |                            | 117,344        | 98,141         | S/L    | 27.5 |      | 4,267            |
| 53                    | CAPITALIZED LEGAL COSTS | 6/30/00       |           | 3,987          |              |                     |                            |                                      |                            |                            | 3,987          | 3,335          | S/L    | 27.5 |      | 145              |
| 54                    | ENGINEERING             | 6/30/00       |           | 36,409         |              |                     |                            |                                      |                            |                            | 36,409         | 30,452         | S/L    | 27.5 |      | 1,324            |
| 55                    | IMPROVEMENTS            | 6/30/00       |           | 255,485        |              |                     |                            |                                      |                            |                            | 255,485        | 213,671        | S/L    | 27.5 |      | 9,290            |
| 56                    | BUILDING IMPROVEMENT    | 1/01/01       |           | 228,721        |              |                     |                            |                                      |                            |                            | 228,721        | 191,291        | S/L    | 27.5 |      | 8,317            |
| 58                    | BUILDING IMPROVEMENTS   | 1/01/02       |           | 45,291         |              |                     |                            |                                      |                            |                            | 45,291         | 37,881         | S/L    | 27.5 |      | 1,647            |
| 59                    | BUILDING IMPROVEMENTS   | 1/01/02       |           | 3,202          |              |                     |                            |                                      |                            |                            | 3,202          | 2,668          | S/L    | 27.5 |      | 116              |
| 60                    | FOUNDATION REPAIR       | 10/03/04      |           | 2,560          |              |                     |                            |                                      |                            |                            | 2,560          | 1,837          | S/L    | 27.5 |      | 93               |
| 64                    | CARPETING               | 7/18/07       | 7/26/24   | 377            |              |                     |                            |                                      |                            |                            | 377            | 377            | S/L    | 5    |      | 0                |
| 66                    | PARKING LOT REPAIR      | 9/25/09       |           | 1,000          |              |                     |                            |                                      |                            |                            | 1,000          | 988            | S/L    | 15   |      | 12               |
| 67                    | STAIR TOWER             | 5/28/10       |           | 1,000          |              |                     |                            |                                      |                            |                            | 1,000          | 507            | S/L    | 27.5 |      | 36               |
| 68                    | HOT WATER HEATER        | 3/24/11       |           | 3,450          |              |                     |                            |                                      |                            |                            | 3,450          | 3,450          | S/L    | 7    |      | 0                |
| 71                    | ROOF REPAIRS            | 12/20/16      |           | 4,448          |              |                     |                            |                                      |                            |                            | 4,448          | 1,215          | S/L    | 27.5 |      | 162              |
| 73                    | STAIR TOWER             | 3/26/18       |           | 12,249         |              |                     |                            |                                      |                            |                            | 12,249         | 2,781          | S/L    | 27.5 |      | 445              |
| 88                    | PARKING LOT             | 6/30/21       |           | 6,000          |              |                     |                            |                                      |                            |                            | 6,000          | 1,200          | S/L    | 15   |      | 400              |
| 92                    | WASHER & DRYERS         | 4/15/22       |           | 1,500          |              |                     |                            |                                      |                            |                            | 1,500          | 675            | S/L    | 5    |      | 300              |
| 93                    | WASHING MACHING         | 5/01/24       |           | 2,511          |              |                     |                            |                                      |                            |                            | 2,511          | 84             | S/L    | 5    |      | 502              |
| 94                    | CARPETING - APT 5       | 7/26/24       |           | 670            |              |                     |                            |                                      |                            |                            | 670            |                | S/L    | 5    |      | 123              |
| TOTAL 18-20 MAPLE AVE |                         |               |           | 751,204        |              | 0                   | 0                          | 0                                    | 0                          | 0                          | 751,204        | 590,553        |        |      |      | 27,179           |

DHCR

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

| NO. | DESCRIPTION          | DATE ACQUIRED | DATE SOLD | COST/<br>BASIS | BUS.<br>PCT. | CUR<br>179<br>BONUS | SPECIAL<br>DEPR.<br>ALLOW. | PRIOR<br>179/<br>BONUS/<br>SP. DEPR. | PRIOR<br>DEC. BAL<br>DEPR. | SALVAG<br>/BASIS<br>REDUCT | DEPR.<br>BASIS | PRIOR<br>DEPR. | METHOD   | LIFE | RATE | CURRENT<br>DEPR. |
|-----|----------------------|---------------|-----------|----------------|--------------|---------------------|----------------------------|--------------------------------------|----------------------------|----------------------------|----------------|----------------|----------|------|------|------------------|
| 46  | LUCENT PHONE SYSTEM  | 6/30/00       |           | 3,050          |              |                     |                            |                                      |                            |                            | 3,050          | 3,050          | S/L      | 5    |      | 0                |
|     | TOTAL DHCR           |               |           | 3,050          |              | 0                   | 0                          | 0                                    | 0                          | 0                          | 3,050          | 3,050          |          |      |      | 0                |
|     | GENERAL FUND         |               |           |                |              |                     |                            |                                      |                            |                            |                |                |          |      |      |                  |
| 2   | OFFICE EQUIPMENT     | 6/30/89       |           | 143            |              |                     |                            |                                      |                            |                            | 143            | 143            | S/L      | 7    |      | 0                |
| 6   | SHAWNA'S DESK        | 7/01/91       |           | 329            |              |                     |                            |                                      |                            |                            | 329            | 329            | S/L      | 7    |      | 0                |
| 7   | GARY'S DESK          | 12/14/93      |           | 625            |              |                     |                            |                                      |                            |                            | 625            | 625            | S/L      | 7    |      | 0                |
| 10  | FILE CABINETS        | 9/30/98       |           | 428            |              |                     |                            |                                      |                            |                            | 428            | 428            | S/L HY   | 7    |      | 0                |
| 12  | TOOLS                | 5/05/82       |           | 1,582          |              |                     |                            |                                      |                            |                            | 1,582          | 1,582          | PRE      | 5    |      | 0                |
| 13  | DRILL                | 10/10/84      | 1/01/25   | 133            |              |                     |                            |                                      |                            |                            | 133            | 133            | S/L      | 5    |      | 0                |
| 14  | TOOLS                | 5/13/87       | 1/01/25   | 291            |              |                     |                            |                                      |                            |                            | 291            | 291            | S/L      | 7    |      | 0                |
| 15  | TOOLS                | 5/13/87       | 1/01/25   | 218            |              |                     |                            |                                      |                            |                            | 218            | 218            | S/L      | 7    |      | 0                |
| 16  | TELEPHONE            | 6/02/82       | 1/01/25   | 561            |              |                     |                            |                                      |                            |                            | 561            | 561            | PRE      | 5    |      | 0                |
| 18  | EQUIPMENT            | 1/31/87       | 1/01/25   | 1,939          |              |                     |                            |                                      |                            |                            | 1,939          | 1,939          | S/L      | 5    |      | 0                |
| 19  | EQUIPMENT            | 1/31/88       | 1/01/25   | 356            |              |                     |                            |                                      |                            |                            | 356            | 356            | S/L      | 7    |      | 0                |
| 20  | EQUIPMENT            | 6/30/88       | 1/01/25   | 1,594          |              |                     |                            |                                      |                            |                            | 1,594          | 1,594          | S/L      | 7    |      | 0                |
| 21  | EQUIPMENT            | 6/30/89       | 1/01/25   | 1,693          |              |                     |                            |                                      |                            |                            | 1,693          | 1,693          | S/L      | 7    |      | 0                |
| 22  | TRIMMER              | 6/30/90       | 1/01/25   | 270            |              |                     |                            |                                      |                            |                            | 270            | 270            | S/L      | 7    |      | 0                |
| 26  | SNOW BLOWER          | 1/29/96       |           | 1,259          |              |                     |                            |                                      |                            |                            | 1,259          | 1,259          | 200DB HY | 7    |      | 0                |
| 28  | PUMP JACKS           | 8/31/96       |           | 125            |              |                     |                            |                                      |                            |                            | 125            | 125            | S/L HY   | 7    |      | 0                |
| 31  | WEEDEATER            | 7/31/97       |           | 343            |              |                     |                            |                                      |                            |                            | 343            | 343            | S/L HY   | 7    |      | 0                |
| 34  | COMPRESSOR NAIL GUN  | 1/31/98       |           | 572            |              |                     |                            |                                      |                            |                            | 572            | 572            | S/L HY   | 7    |      | 0                |
| 35  | FULL ROUND HEAD SAW  | 2/28/98       |           | 318            |              |                     |                            |                                      |                            |                            | 318            | 318            | S/L HY   | 7    |      | 0                |
| 36  | TOOL BOX FS CHEVY PU | 4/30/98       |           | 272            |              |                     |                            |                                      |                            |                            | 272            | 272            | S/L HY   | 7    |      | 0                |
| 39  | PLOW 98 FS PU        | 1/31/99       |           | 2,756          |              |                     |                            |                                      |                            |                            | 2,756          | 2,756          | S/L HY   | 7    |      | 0                |
| 42  | LAWN MOWER           | 4/30/01       | 1/01/25   | 1,316          |              |                     |                            |                                      |                            |                            | 1,316          | 1,316          | S/L HY   | 7    |      | 0                |

## CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

| NO. | DESCRIPTION                 | DATE ACQUIRED | DATE SOLD | COST/<br>BASIS | BUS.<br>PCT. | CUR<br>179<br>BONUS | SPECIAL<br>DEPR.<br>ALLOW. | PRIOR<br>179/<br>BONUS/<br>SP. DEPR. | PRIOR<br>DEC. BAL<br>DEPR. | SALVAG<br>/BASIS<br>REDUCT | DEPR.<br>BASIS | PRIOR<br>DEPR. | METHOD | LIFE | RATE | CURRENT<br>DEPR. |
|-----|-----------------------------|---------------|-----------|----------------|--------------|---------------------|----------------------------|--------------------------------------|----------------------------|----------------------------|----------------|----------------|--------|------|------|------------------|
| 43  | MOWER                       | 6/30/01       | 1/01/25   | 540            |              |                     |                            |                                      |                            |                            | 540            | 540            | S/L HY | 7    |      | 0                |
| 44  | MOWER                       | 6/30/01       | 1/01/25   | 449            |              |                     |                            |                                      |                            |                            | 449            | 449            | S/L HY | 7    |      | 0                |
| 57  | EMMIE'S DESK                | 3/15/02       |           | 552            |              |                     |                            |                                      |                            |                            | 552            | 552            | S/L    | 7    |      | 0                |
| 61  | PULL BEHIND TRAILER W/GEN   | 11/23/04      |           | 3,535          |              |                     |                            |                                      |                            |                            | 3,535          | 3,535          | S/L    | 5    |      | 0                |
| 62  | BUILDING-36 TAYLOR AVE      | 5/23/07       |           | 99,000         |              |                     |                            |                                      |                            |                            | 99,000         | 43,358         | S/L    | 39   |      | 2,538            |
| 63  | CLOSING COSTS               | 5/23/07       |           | 2,708          |              |                     |                            |                                      |                            |                            | 2,708          | 2,708          | S/L    | 5    |      | 0                |
| 65  | BUILDING RENOVATIONS        | 6/11/08       |           | 95,497         |              |                     |                            |                                      |                            |                            | 95,497         | 39,388         | S/L    | 39   |      | 2,449            |
| 69  | COPIER                      | 6/02/14       | 6/13/25   | 2,595          |              |                     |                            |                                      |                            |                            | 2,595          | 2,595          | S/L    | 7    |      | 0                |
| 70  | COMPUTERS                   | 12/01/15      | 4/11/25   | 3,645          |              |                     |                            |                                      |                            |                            | 3,645          | 3,645          | S/L    | 5    |      | 0                |
| 72  | LAWN MOWER                  | 4/04/17       |           | 3,345          |              |                     |                            |                                      |                            |                            | 3,345          | 3,345          | S/L    | 7    |      | 0                |
| 74  | ENGINEERING                 | 6/30/19       |           | 4,400          |              |                     |                            |                                      |                            |                            | 4,400          | 565            | S/L    | 39   |      | 113              |
| 75  | BUILDING IMPROVEMENTS       | 6/30/19       |           | 32,200         |              |                     |                            |                                      |                            |                            | 32,200         | 4,130          | S/L    | 39   |      | 826              |
| 76  | BUILDING IMPROVEMENTS       | 6/30/19       |           | 10,083         |              |                     |                            |                                      |                            |                            | 10,083         | 1,295          | S/L    | 39   |      | 259              |
| 77  | BUILDING IMPROVEMENTS-DOORS | 6/30/19       |           | 4,340          |              |                     |                            |                                      |                            |                            | 4,340          | 3,100          | S/L    | 7    |      | 620              |
| 78  | BUILDING IMPROVEMENTS       | 6/30/19       |           | 23,800         |              |                     |                            |                                      |                            |                            | 23,800         | 3,050          | S/L    | 39   |      | 610              |
| 79  | BUILDING IMPROVEMENTS-RAMP  | 7/16/19       |           | 15,050         |              |                     |                            |                                      |                            |                            | 15,050         | 1,898          | S/L    | 39   |      | 386              |
| 80  | BUILDING IMPROVEMENTS       | 7/23/19       |           | 26,500         |              |                     |                            |                                      |                            |                            | 26,500         | 3,339          | S/L    | 39   |      | 679              |
| 81  | BUILDING IMPROVEMENTS-ROOF  | 8/30/19       |           | 32,800         |              |                     |                            |                                      |                            |                            | 32,800         | 4,065          | S/L    | 39   |      | 841              |
| 82  | ENGINEERING                 | 8/21/19       |           | 12,400         |              |                     |                            |                                      |                            |                            | 12,400         | 1,537          | S/L    | 39   |      | 318              |
| 83  | BUILDING IMPROVEMENTS-MASO  | 11/15/19      |           | 35,000         |              |                     |                            |                                      |                            |                            | 35,000         | 4,186          | S/L    | 39   |      | 897              |
| 84  | BUILDING IMPROVEMENTS       | 10/01/19      |           | 3,500          |              |                     |                            |                                      |                            |                            | 3,500          | 427            | S/L    | 39   |      | 90               |
| 85  | SIGNS                       | 3/18/20       |           | 1,147          |              |                     |                            |                                      |                            |                            | 1,147          | 697            | S/L    | 7    |      | 164              |
| 86  | SOLAR                       | 6/30/20       |           | 15,510         |              |                     |                            |                                      |                            |                            | 15,510         | 4,136          | S/L    | 15   |      | 1,034            |
| 87  | 2018 CHEVY SILVERADO        | 8/01/19       |           | 31,791         |              |                     |                            |                                      |                            |                            | 31,791         | 22,331         | S/L    | 7    |      | 4,542            |
| 89  | SOLAR                       | 8/10/20       |           | 2,537          |              |                     |                            |                                      |                            |                            | 2,537          | 662            | S/L    | 15   |      | 169              |
| 90  | ENGINEERING                 | 8/11/20       |           | 10,700         |              |                     |                            |                                      |                            |                            | 10,700         | 1,073          | S/L    | 39   |      | 274              |
| 91  | BUILDING IMPROVEMENTS-MASO  | 8/18/20       |           | 14,000         |              |                     |                            |                                      |                            |                            | 14,000         | 1,376          | S/L    | 39   |      | 359              |

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

| NO. | DESCRIPTION              | DATE ACQUIRED | DATE SOLD | COST/<br>BASIS   | BUS.<br>PCT. | CUR<br>179<br>BONUS | SPECIAL<br>DEPR.<br>ALLOW. | PRIOR<br>179/<br>BONUS/<br>SP. DEPR. | PRIOR<br>DEC. BAL<br>DEPR. | SALVAG<br>/BASIS<br>REDUCT | DEPR.<br>BASIS   | PRIOR<br>DEPR. | METHOD | LIFE | RATE | CURRENT<br>DEPR. |
|-----|--------------------------|---------------|-----------|------------------|--------------|---------------------|----------------------------|--------------------------------------|----------------------------|----------------------------|------------------|----------------|--------|------|------|------------------|
| 95  | COMPUTERS                | 4/11/25       |           | 7,330            |              |                     |                            |                                      |                            |                            | 7,330            |                | S/L    | 3    |      | 611              |
| 96  | COPIER                   | 6/13/25       |           | 3,996            |              |                     |                            |                                      |                            |                            | 3,996            |                | S/L    | 3    |      | 111              |
|     | TOTAL GENERAL FUND       |               |           | 516,073          |              | 0                   | 0                          | 0                                    | 0                          | 0                          | 516,073          | 175,105        |        |      |      | 17,890           |
|     | TOTAL DEPRECIATION       |               |           | <u>1,270,327</u> |              | <u>0</u>            | <u>0</u>                   | <u>0</u>                             | <u>0</u>                   | <u>0</u>                   | <u>1,270,327</u> | <u>768,708</u> |        |      |      | <u>45,069</u>    |
|     | GRAND TOTAL DEPRECIATION |               |           | <u>1,270,327</u> |              | <u>0</u>            | <u>0</u>                   | <u>0</u>                             | <u>0</u>                   | <u>0</u>                   | <u>1,270,327</u> | <u>768,708</u> |        |      |      | <u>45,069</u>    |
|     | DEPRECIATION ASSETS SOLD |               |           | 15,977           |              | 0                   | 0                          | 0                                    | 0                          | 0                          | 15,977           | 15,977         |        |      |      | 0                |
|     | DEPR REMAINING ASSETS    |               |           | <u>1,254,350</u> |              | <u>0</u>            | <u>0</u>                   | <u>0</u>                             | <u>0</u>                   | <u>0</u>                   | <u>1,254,350</u> | <u>752,731</u> |        |      |      | <u>45,069</u>    |

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**  
**CONSOLIDATED FINANCIAL STATEMENTS**  
**JUNE 30, 2025**

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## **Independent Auditor's Report**

To the Board of Directors  
Cortland Housing Assistance Council, Inc.  
Cortland, NY

### ***Opinion***

We have audited the consolidated financial statements of Cortland Housing Assistance Council, Inc., which comprise the consolidated statement of financial position as of June 30, 2025, and the related consolidated statement of activities and changes in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Cortland Housing Assistance Council, Inc. as of June 30, 2025, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Basis for Opinion***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Cortland Housing Assistance Council, Inc. and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### ***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Cortland Housing Assistance Council, Inc.'s ability to continue as a going concern for one year after the date that the financial statements are issued.

### ***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

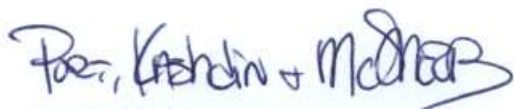
In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Cortland Housing Assistance Council, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Cortland Housing Assistance Council, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

### ***Report on Supplementary Information***

Our audit was made for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplementary information presented on pages 15 through 21 is presented for purposes of additional analysis and is not a required part of the basic financial statements. This information has been subjected to the auditing procedures applied in the audit of the basic financial statements. Our audit was conducted in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplemental financial information is fairly stated in all material respects in relation to the basic financial statements taken as a whole.



Certified Public Accountants  
Cortland, New York

October 20, 2025

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**CONSOLIDATED STATEMENT OF FINANCIAL POSITION**

**June 30, 2025**

**Assets**

**Current Assets**

|                      |    |         |
|----------------------|----|---------|
| Cash - Operating     | \$ | 209,835 |
| Cash - Restricted    |    | 173,096 |
| Accounts Receivable  |    | 6,941   |
|                      |    | <hr/>   |
| Total Current Assets |    | 389,872 |

**Property, Plant and Equipment**

|                                    |  |           |
|------------------------------------|--|-----------|
| Property, Plant and Equipment, Net |  | 1,436,230 |
|------------------------------------|--|-----------|

**Other Assets**

|                          |  |         |
|--------------------------|--|---------|
| Investments              |  | 183,838 |
| Construction-in-Progress |  | 238,929 |
|                          |  | <hr/>   |
| Total Other Assets       |  | 422,767 |

**Total Assets**

|  |    |             |
|--|----|-------------|
|  | \$ | 2,248,869   |
|  |    | <hr/> <hr/> |

**Liabilities and Net Assets**

**Current Liabilities**

|                                   |    |         |
|-----------------------------------|----|---------|
| Accounts Payable                  | \$ | 7,955   |
| Accrued Expenses                  |    | 44,820  |
| Other Current Liabilities         |    | 1,183   |
| Current Portion of Long-Term Debt |    | 591,224 |
|                                   |    | <hr/>   |
| Total CurrentLiabilities          |    | 645,182 |

**Non-Current Liabilities**

|  |  |           |
|--|--|-----------|
| Tenant Security Deposits               |  | 24,042    |
| Long-Term Debt, Net of Current Portion |  | 4,088,833 |
|  |  | <hr/>     |
| Total Liabilities                      |  | 4,758,057 |

**Net Assets**

|                            |  |             |
|----------------------------|--|-------------|
| Without Donor Restrictions |  | (2,509,188) |
| With Donor Restrictions    |  | -           |
|                            |  | <hr/>       |
| Total Net Assets           |  | (2,509,188) |

**Total Liabilities and Net Assets**

|  |    |             |
|--|----|-------------|
|  | \$ | 2,248,869   |
|  |    | <hr/> <hr/> |

The accompanying notes are an integral part of these financial statements.

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**CONSOLIDATED STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS**  
**For the Year Ended June 30, 2025**

|  | <u>Without</u><br><u>Donor Restrictions</u> | <u>With</u><br><u>Donor Restrictions</u> | <u>Total</u>          |
|--|---|--|-----------------------|
| <b>Revenue and Support</b>               |   |  |                       |
| <b>Grants and Contributions</b>          | \$ 154,138                                  | \$ 31,000                                | \$ 185,138            |
| <b>Revenue from Contracts</b>            |   |  |                       |
| Rental Revenue                           | 319,561                                     | -  | 319,561               |
| Program Services Revenue                 | 69,531                                      | -  | 69,531                |
| Total Revenue from Contracts             | 389,092                                     | -  | 389,092               |
| Investment Income                        | 3,241                                       | -  | 3,241                 |
| Other Income                             | 107,210                                     | -  | 107,210               |
| Gain (Loss) on Disposal of Assets        | -   | -  | -                     |
| Net Assets Released From<br>Restrictions | 31,000                                      | (31,000)                                 | -                     |
| Total Revenue and Support                | 684,681                                     | -  | 684,681               |
| <b>Expenses</b>                          |   |  |                       |
| Program Services                         | 410,229                                     | -  | 410,229               |
| General and Administrative               | 172,835                                     | -  | 172,835               |
| Development and Marketing                | -   | -  | -                     |
| Total Expenses                           | 583,064                                     | -  | 583,064               |
| <b>Change in Net Assets</b>              | 101,617                                     | -  | 101,617               |
| <b>Net Assets - Beginning of Year</b>    | (2,610,805)                                 | -  | (2,610,805)           |
| <b>Net Assets - End of Year</b>          | <u>\$ (2,509,188)</u>                       | <u>\$ -</u>                              | <u>\$ (2,509,188)</u> |

The accompanying notes are an integral part of these financial statements.

**CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES**  
**For the Year Ended June 30, 2025**

|                                     | <u>Program Services</u> |                              |                                       | <u>General and<br/>Administrative</u> | <u>Total</u>      |
|-------------------------------------|-------------------------|------------------------------|---------------------------------------|---------------------------------------|-------------------|
|                                     | <u>Preservation</u>     | <u>Rental<br/>Management</u> | <u>Program<br/>Services<br/>Total</u> |                                       |                   |
| Salaries                            | \$ 60,000               | \$ 67,272                    | \$ 127,272                            | \$ 53,979                             | \$ 181,251        |
| Payroll Taxes                       | -                       | 4,123                        | 4,123                                 | 9,621                                 | 13,744            |
| Employee Benefits                   | 40,000                  | -                            | 40,000                                | (3,893)                               | 36,107            |
| Advertising                         | -                       | -                            | -                                     | 312                                   | 312               |
| Insurance                           | 2,000                   | 20,870                       | 22,870                                | 10,753                                | 33,623            |
| Professional Fees                   | 4,000                   | 6,335                        | 10,335                                | 6,653                                 | 16,988            |
| Contractual Expenses                | -                       | -                            | -                                     | 34,569                                | 34,569            |
| Office Expense and Postage          | 3,500                   | -                            | 3,500                                 | 1,508                                 | 5,008             |
| Rent                                | 6,283                   | -                            | 6,283                                 | (6,283)                               | -                 |
| Repair, Maintenance & Trash Removal | -                       | 6,202                        | 6,202                                 | 35,549                                | 41,751            |
| Real Estate Taxes                   | -                       | 2,542                        | 2,542                                 | 1,167                                 | 3,709             |
| Travel                              | 3,000                   | -                            | 3,000                                 | 386                                   | 3,386             |
| Utilities and Telephone             | 3,000                   | 45,673                       | 48,673                                | 3,650                                 | 52,323            |
| Other Administrative                | -                       | 81                           | 81                                    | 5,534                                 | 5,615             |
| Depreciation and Amortization       | -                       | 94,647                       | 94,647                                | 17,890                                | 112,537           |
| Interest                            | -                       | 9,701                        | 9,701                                 | 1,156                                 | 10,857            |
| HomeBuyer Program Costs             | 31,000                  | -                            | 31,000                                | -                                     | 31,000            |
| Other Expense                       | -                       | -                            | -                                     | 284                                   | 284               |
| Bad Debt                            | -                       | -                            | -                                     | -                                     | -                 |
| <b>Total</b>                        | <b>\$ 152,783</b>       | <b>\$ 257,446</b>            | <b>\$ 410,229</b>                     | <b>\$ 172,835</b>                     | <b>\$ 583,064</b> |

The accompanying notes are an integral part of these financial statements.

**CONSOLIDATED STATEMENT OF CASH FLOWS**  
**For the Year Ended June 30, 2025**

**Cash Flows From Operating Activities:**

|   |    |           |
|---|----|-----------|
| Change in Net Assets  | \$ | 101,617   |
| Adjustments to Reconcile Change in Net Assets to Net Cash Provided by Operating Activities: |    |           |
| Depreciation and Amortization   |    | 112,537   |
| Forgiven Interest   |    | (10,819)  |
| Changes in Operating Assets and Liabilities   |    |           |
| (Increase) Decrease in Assets:  |    |           |
| Accounts Receivable   |    | (2,792)   |
| Construction-in-Progress  |    | (111,653) |
| Increase (Decrease) in Liabilities:   |    |           |
| Accounts Payable  |    | (62)      |
| Accrued Expenses  |    | 1,664     |
| Other Current Liabilities   |    | (6,956)   |
| Tenant Security Deposits  |    | 1,311     |
|   |    | 84,847    |
| Net Cash Provided By Operating Activities   |    | 84,847    |

**Cash Flows From Investing Activities:**

|                                       |  |          |
|---------------------------------------|--|----------|
| Purchase of Fixed Assets              |  | (12,374) |
| Reinvested Dividends and Interest     |  | (3,241)  |
| Purchase of Investments               |  | -        |
| Proceeds from Sale of Investments     |  | -        |
|                                       |  | (15,615) |
| Net Cash Used in Investing Activities |  | (15,615) |

**Cash Flows from Financing Activities:**

|                                       |  |         |
|---------------------------------------|--|---------|
| Repayment of Notes Payable            |  | (6,367) |
|                                       |  | (6,367) |
| Net Cash Used in Financing Activities |  | (6,367) |

**Net Increase In Cash and Cash Equivalents** 62,865

**Cash and Cash Equivalents - Beginning** 320,066

**Cash and Cash Equivalents - Ending** \$ 382,931

**Supplemental Disclosure of Cash flow Information:**

|                        |    |       |
|------------------------|----|-------|
| Cash Paid for Interest | \$ | 1,156 |
| Cash Paid for Taxes    |    | -     |

The accompanying notes are an integral part of these financial statements.

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NOTES TO FINANCIAL STATEMENTS

June 30, 2025

**NOTE 1 – NATURE OF ACTIVITIES**

Cortland Housing Assistance Council, Inc. is a not-for-profit corporation organized for the purpose of securing housing at low and moderate costs for the economically disadvantaged citizens of Cortland County, New York.

**NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES**

**Basis of Accounting** – The financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

**Principles of Consolidation** – The accompanying consolidated financial statements include the accounts of Cortland Housing Assistance Council, Inc. and Pomeroy School Apartments, L.P., collectively known as CHAC. Pomeroy School Apartments, L.P. is a wholly owned subsidiary of Cortland Assistance Council, Inc. All significant intercompany accounts and transactions have been eliminated in consolidation, including any potential intervening events as a result of differing financial reporting periods.

**Financial Statement Presentation** – Net assets and revenues are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of and changes therein are classified and reported as follows:

**Net Assets Without Donor Restrictions** – Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the Organization.

**Net Assets With Donor Restrictions** – Net assets subject to stipulations imposed by donors and grantors. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Organization or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the fund be maintained in perpetuity.

**Income Tax Status** – CHAC is exempt from income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code and is classified by the Internal Revenue Service as a not-for-profit organization that is not a private foundation. Entities that are classified under this section of the code are taxed on “unrelated business income” as defined by IRS regulations. CHAC had no unrelated business income for the years ended June 30, 2025. Accordingly, no provision for income taxes is made in the financial statements.

CHAC follows the provisions of Accounting for Uncertainty in Income Taxes under the Income Taxes Topic of the Codification. The Codification requires the evaluation of tax positions, which includes maintaining its tax-exempt status and the taxability of any unrelated business income, and does not allow recognition of tax positions which do not meet a “more-likely-than-not” threshold of being sustained by the applicable tax authority. Management does not believe it has taken any tax positions that would not meet this threshold. CHAC’s income tax returns are subject to possible federal examination, generally for three years after they are filed.

**Use of Estimates** – The preparation of financial statements, in conformity with generally accepted accounting principles in the United States of America, requires CHAC to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

**Promises to Give** – Unconditional promises to give are recorded as revenue and receivable in the year the promise is made. Conditional promises to give, that is, those with a measurable performance or other barriers and a right of return, are not recognized until the conditions on which they depend have been substantially met.

**NOTES TO FINANCIAL STATEMENTS**

**June 30, 2025**

**NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES (continued)**

**Accounts Receivable** – CHAC’s accounts receivable are initially recorded at the amount management expects to collect when revenue has been earned and are stated net of an allowance for credit losses, in line with ASC Topic 326, which represents estimated losses resulting from the inability of customers to pay these accounts. When determining the allowance for credit losses, CHAC takes several factors into consideration including the overall composition of accounts receivable aging, historical collection experience, current trends, reasonable and supportable forecasts, the type of customer and day-to-day knowledge of specific customers. There was no substantive change in the allowance for credit loss for the year ended June 30, 2025. Management believes all accounts receivable for the year ended June 30, 2025 are fully collectible.

**Compensated Absences** – Employees of CHAC are eligible to accumulate unused vacation days, up to a maximum of 35 days, which can be paid to the employees in cash upon termination. CHAC reports a liability for these vacation days and the change in related expense is charged against current operations. Accrued compensated absences at June 30, 2025 are \$19,925.

**Revenue** – CHAC has both contribution revenue and revenue from contracts which follow accounting practices as follows:

*Grant and Contribution Revenue*

Grants and contributions, including unconditional promises to give, are recognized as revenue in the period verifiably committed. Conditional grants are recorded as revenue when such amounts become unconditional which generally involves the meeting of a barrier to entitlement. This can include items like incurring specified allowable expenses in accordance with a framework of allowable costs or other barriers. Grants and contributions are reflected as with or without donor restrictions based on the existence or absence of donor restrictions. Amounts received with donor-imposed restrictions that are recorded as donor-restricted revenues are reclassified to without donor restriction net assets when the time or purpose restriction has been satisfied.

Grants and contributions received with donor-imposed restrictions that are met in the same year as received are reported as revenues of the without donor restrictions net assets class. Grants and contributions received for which donor-imposed restrictions will be met in future periods are recorded as donor restricted and are released from restrictions as restrictions are met.

*Revenue from Contracts*

Program service revenue from contracts follows a principles-based process to assess and determine revenue recognition. This includes that CHAC: 1) identify the contract with the customer; 2) identify the performance obligations in the contract; 3) determine the transaction price; 4) allocate the transaction price to the performance obligations; and 5) recognize revenue when or as performance obligations are satisfied.

Rental revenue represents rent charges for residential units under leases with durations of less than one year. CHAC believes that the rental stream is exempt from compliance with ASC 606 due to its inclusion under the current and future lease standards.

Additional revenue includes laundry revenue and damages. Such fees are ancillary to the lease process and are recognized as revenue at the point in time such fees are collected.

For the year ended June 30, 2025, CHAC recognized \$332,021 at a point in time in accordance with current accounting standards.

NOTES TO FINANCIAL STATEMENTS

June 30, 2025

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES (continued)

**Fixed Assets** – Land, buildings, improvements, vehicles and equipment are recorded at cost. Purchases of equipment of more than \$500 and with a useful life of more than two years are recorded as fixed assets. Donations of property and equipment are recorded as support at their estimated fair value. Depreciation is computed using the straight-line method and double-declining balance method over the estimated useful lives of the related assets. When items are retired, or otherwise disposed of, the related costs and accumulated depreciation are removed from the accounts and any gain or loss is recorded in the statement of activities. Expenditures for repairs and maintenance that are not considered to substantially lengthen property lives are charged to expense as incurred. Depreciation charged to expense for the year ended June 30, 2025 was \$109,522.

**Functional Expense Allocations** – The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is consistently applied. Expenses are allocated on the basis of estimates of time and effort or by specific identification.

**Leases** – The Organization records property held for lease as an asset. At June 30, 2025, the total amount of property held for lease was \$814,521 which was net of accumulated depreciation of \$4,031,107.

**Concentration of Credit Risk** – CHAC maintains its cash accounts at institutions with balances that may exceed \$250,000, which is the amount insured by the Federal Deposit Insurance Corporation. CHAC has not experienced any losses in such accounts. Management believes that the organization is not exposed to any significant credit risk with respect to its cash balances.

**Investments** – Investments are recorded at fair value based on market quotations.

**Cash and Cash Equivalents** – For purposes of reporting of cash flows, CHAC considers cash in operating bank accounts, savings accounts, money market accounts and securities with maturities of three months or less to be cash equivalents. At June 30, 2025, there were no cash equivalents.

The Organization receives funding from the New York State Division of Housing and Community Renewal (DHCR) and the New York State Housing Trust Fund Corporation. The funds received are restricted in use for eligible costs in accordance with the funding agreements. The amount of grant money that has not yet been expended is shown on the balance sheet as restricted cash. As required, the Organization maintains a separate bank account for each type of restricted cash.

The Organization is required by its mortgage loan agreement to establish and fund various reserve accounts. These reserve accounts are considered restricted by purpose per the related mortgage agreements.

The Organization collects and holds security deposits from tenants in accordance with regulations set forth by New York State.

**Advertising** – The Organization expenses advertising costs as they are incurred. Advertising expenses amounted to \$312 for the year ended June 30, 2025.

**Insurance Coverage** – CHAC maintains various insurance policies, including general liability, property and professional liability coverage. Insurance premiums are expensed ratably over the coverage period. Prepaid insurance represents the unexpired portion of premiums paid and is included in other current assets on the statement of net assets when applicable. For the year ended June 30, 2025, insurance expenses totaled \$33,623. Management has evaluated the terms of its insurance contracts and determined that they transfer significant insurance risk; therefore, the costs have been accounted for as expenses rather than deposits.

**NOTES TO FINANCIAL STATEMENTS**

**June 30, 2025**

**NOTE 3 – LINE OF CREDIT**

The Organization has a variable rate line-of-credit with NBT Bank. The rate was 10.00% with a borrowing limit of \$30,000 at June 30, 2025. The outstanding balance at June 30, 2025 was \$-0-. Interest paid during the fiscal year totaled \$-0-.

**NOTE 4 – RETIREMENT PLAN**

CHAC has a defined contribution pension plan which began in June 1999 covering employees with at least one year of service. Employees can contribute to the plan and the Organization will match 50% of these contributions, not to exceed 3% of the employee’s compensation. Retirement contribution expense for the fiscal year ended June 30, 2025 was \$4,370.

**NOTE 5 – INVESTMENTS**

FASB ASC 820, Fair Value Measurements, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). When available, CHAC measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. CHAC did not have any Level 2 or Level 3 investments as of June 30, 2025.

The following table sets forth by level within the fair value hierarchy, CHAC’s marketable securities as of June 30, 2023:

|                            | Level 1    | Level 2 | Total Fair Value |
|----------------------------|------------|---------|------------------|
| Money Market Funds         | \$ 170,272 | \$ -    | \$ 170,272       |
| Mortgage Backed Securities | 13,566     | -       | 13,566           |
| Total Investments          | \$ 183,838 | \$ -    | \$ 183,838       |

Income from investments for the year ended June 30, 2025 is comprised of:

|                               |          |
|-------------------------------|----------|
| Dividends and Interest        | \$ 3,241 |
| Net Realized Gain (Loss)      | -        |
| Net Unrealized Gain (Loss)    | -        |
| Total Income from Investments | \$ 3,241 |

**NOTES TO FINANCIAL STATEMENTS**

**June 30, 2025**

**NOTE 6 – FIXED ASSETS**

A summary of asset costs and accumulated depreciation and amortization at June 30, 2025 is as follows:

|  |                         |
|--|-------------------------|
| Land   | \$ 77,500               |
| Buildings and Improvements                         | 5,329,036               |
| Vehicles   | 31,791                  |
| Equipment  | 163,348                 |
| Closing Costs                                      | <u>139,999</u>          |
| <br>Less Accumulated Depreciation and Amortization | <br><u>(4,305,444)</u>  |
| <br>Net Book Value                                 | <br><u>\$ 1,436,230</u> |

**NOTE 7 – GRANTS AND CONTRACTS**

***First Time Homebuyer’s Program*** – The New York State Affordable Housing Corporation has awarded a grant to assist people in purchasing their first home. The Organization works jointly with the Empire Housing and Development Corporation on this program.

The program is for the benefit of people with low to moderate income who are purchasing a single or two-family home. Eligible buyers have to secure their own mortgage and make the down payment, but the program will furnish money to assist with closing costs, provide counseling services to the homebuyers, and provide money for rehabilitation of the home.

***Rural Preservation Program Grant*** – The Organization has contracted with the New York State Division of Housing and Community Renewal (DHCR) under the Rural Preservation Program (RPP) for funding totaling \$121,783 for the fiscal year ended June 30, 2025. The purpose of the grant is to cover the costs associated with providing rural preservation activities as described in the grant agreement.

Under the terms of the agreement, the Organization has secured in-kind and other administrative funds greater than one-third of DHCR’s funding. For the fiscal year ended June 30, 2025, the additional funding was provided by the Organization’s general fund.

**NOTES TO FINANCIAL STATEMENTS**

**June 30, 2025**

**NOTE 8 – LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS**

The following represents CHAC’s financial assets as of the statement of financial position date, reduced by amounts not available for general use because of contractual or donor-imposed restrictions. Financial Assets available within one year for general expenditure, are as follows:

|   |                          |
|---|--------------------------|
| Financial Assets at Year End:   |                          |
| Cash and Cash Equivalents   | \$ 382,931               |
| Accounts Receivable   | 6,941                    |
| Investments   | <u>183,838</u>           |
| Total Financial Assets at Year End  | 573,710                  |
|   |                          |
| Less Amounts with Limits on Usage:  |                          |
| Tenant Security Deposits  | 24,042                   |
| Enterprise Reimbursement  | 1,183                    |
| Net Assets with Donor Restrictions  | <u>-</u>                 |
| Financial Assets Not Available for Use Within one Year                        | <u>25,225</u>            |
|   |                          |
| Total Financial Assets Available to Meet General Expenditures Within One Year | <u><u>\$ 548,485</u></u> |

CHAC has \$548,485 of financial assets available within one year of the statement of financial position date to meet cash needs for general expenditures. None of this amount is subject to donor or other contractual restrictions that make them unavailable for general expenditures within one year of the statement of financial position date. The CHAC has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

**NOTE 9 – CONTINGENT LIABILITY**

The Organization received funding for the acquisition and renovation of residential housing units located at 18 and 20 Maple Avenue. An agreement between the Organization and the New York State Housing Trust Fund Corporation requires that the property be used as a residential rental unit for low income and very low-income tenants for 20 years from the date of the final disbursement for this project. The agreement is detailed in a regulatory agreement dated October 28, 1999. In the event of a default by the Organization, the Housing Trust Fund Corporation has an enforceable right to foreclose on the property to recover their award. At June 30, 2025, the Organization's management considered the possibility of a default extremely unlikely.

The regulatory agreement requires reserve accounts to be maintained and funded by monthly deposits. Withdrawals from these reserve accounts may only be made with the approval of the NYS Housing Trust Fund Corporation.

The Organization has received grants which are subject to audit by agencies of the State and Federal governments. Such audits may result in disallowances and a request for return of funds. Based on prior audits, the Organization's management believes disallowances, if any, will be immaterial.

**NOTES TO FINANCIAL STATEMENTS**

**June 30, 2025**

**NOTE 10 - LONG-TERM DEBT**

|   |                            |
|---|----------------------------|
| <p>Mortgage payable to City of Cortland's Office of Community Development. The loan repayment provisions call for annual principal payments of \$2,000 beginning in January 2003. However, principal payments can be deferred based upon the Organizations operating results. The loan agreement is for an interest free loan. The mortgage is secured by the property located at 18-20 Maple Avenue.</p> | <p>\$ 30,000</p>           |
| <p>Mortgage payable to City of Cortland's Office of Community Development. The loan repayment provisions call for monthly payments of \$667. However, principal payments can be deferred based upon the Organizations operating results. The loan agreement is for a 0% interest loan. The mortgage is secured by the property located at 18-20 Maple Avenue.</p>   | <p>120,000</p>             |
| <p>Mortgage payable to Housing Trust Fund Corporation originally due March 2022. An extension has been granted. CHAC is in the process of securing grant funding to make necessary repairs in order to refinance. Principal payments are not required unless there is excess income. The loan has an interest rate of 0% and is secured by the property located at 18-20 Maple Avenue.</p>                | <p>584,228</p>             |
| <p>Mortgage payable to Housing Trust Fund Corporation due July 2090. No principal or interest payment are required at this time. However, interest accrues at 1% but payments are not required unless there is excell income as defined by the loan agreement. The mortgage is secured by the property located on Pomeroy Street.</p>   | <p>2,062,534</p>           |
| <p>Mortgage payable to Housing Trust Fund Corporation due August 2043. No principal or interest payment are required at this time. The mortgage is secured by the property located on Pomeroy Street.</p>   | <p>1,869,800</p>           |
| <p>Mortgage payable to bank with monthly payments of \$611 including interest at 5.62% due May 2027. The loan is secured by property located at 36 Taylor Avenue.</p>   | <p>13,495</p>              |
| <p>Total</p>  | <p>4,680,057</p>           |
| <p>Less current portion</p>   | <p>(591,224)</p>           |
| <p>Total Long-Term Debt</p>   | <p><u>\$ 4,088,833</u></p> |

Future principal payments are as follows for the years ending June 30:

|             |    |                  |
|-------------|----|------------------|
| 2026        | \$ | 591,224          |
| 2027        |    | 6,499            |
| 2028        |    | -                |
| 2029        |    | -                |
| 2030        |    | -                |
| 2031 - 2093 |    | 4,082,334        |
| Total       | \$ | <u>4,680,057</u> |

**NOTES TO FINANCIAL STATEMENTS**

**June 30, 2025**

**NOTE 11 – EVALUATION OF SUBSEQUENT EVENTS**

Management has evaluated subsequent events through October 20, 2025, the day the financial statements were available to be issued and concluded that no subsequent events have occurred that would require recognition in the financial statements or disclosure in the notes to the financial statements.

**SUPPLEMENTARY INFORMATION**

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**CONSOLIDATING SCHEDULE OF FINANCIAL POSITION**

**June 30, 2025**

|   | <b>CORTLAND HOUSING<br/>ASSISTANCE<br/>COUNCIL, INC.</b> | <b>POMEROY<br/>SCHOOL<br/>APARTMENTS, LP</b> | <b>ELIMINATION<br/>ENTRIES</b> | <b>TOTAL</b>        |
|---|--|--|--------------------------------|---------------------|
| <b>Assets</b>                           |  |  |                                |                     |
| <b>Current Assets</b>                   |  |  |                                |                     |
| Cash - Operating                        | \$ 83,766  | \$ 126,069                                   | \$ -                           | \$ 209,835          |
| Cash - Restricted                       | 84,609   | 88,487                                       | -                              | 173,096             |
| Due From Other Funds                    | -  | 21,000                                       | (21,000)                       | -                   |
| Accounts Receivable                     | 3,617  | 3,324  | -                              | 6,941               |
| Total Current Assets                    | 171,992  | 238,880                                      | (21,000)                       | 389,872             |
| <b>Property, Plant and Equipment</b>    |  |  |                                |                     |
| Property, Plant and Equipment, Net      | 456,548  | 979,682                                      | -                              | 1,436,230           |
| <b>Other Assets</b>                     |  |  |                                |                     |
| Investments                             | (2,572,073)  | 183,838                                      | 2,572,073                      | 183,838             |
| Construction-in-Progress                | 238,929  | -  | -                              | 238,929             |
| Total Other Assets                      | (2,333,144)  | 183,838                                      | 2,572,073                      | 422,767             |
| <b>Total Assets</b>                     | <u>\$ (1,704,604)</u>                                    | <u>\$ 1,402,400</u>                          | <u>\$ 2,551,073</u>            | <u>\$ 2,248,869</u> |
| <b>Liabilities and Net Assets</b>       |  |  |                                |                     |
| <b>Current Liabilities</b>              |  |  |                                |                     |
| Accounts Payable                        | \$ 5,664   | \$ 2,291                                     | \$ -                           | \$ 7,955            |
| Accrued Expenses                        | 24,195   | 20,625                                       | -                              | 44,820              |
| Other Current Liabilities               | 204  | 979  | -                              | 1,183               |
| Due to Other Funds                      | 21,000   | -  | (21,000)                       | -                   |
| Current Portion of Long-Term Debt       | 591,224  | -  | -                              | 591,224             |
| Total Current Liabilities               | 642,287  | 23,895                                       | (21,000)                       | 645,182             |
| <b>Non-Current Liabilities</b>          |  |  |                                |                     |
| Tenant Security Deposits                | 5,799  | 18,243                                       | -                              | 24,042              |
| Long-Term Debt, Net of Current Portion  | 156,499  | 3,932,334                                    | -                              | 4,088,833           |
| Total Liabilities                       | 804,585  | 3,974,472                                    | (21,000)                       | 4,758,057           |
| <b>Net Assets</b>                       |  |  |                                |                     |
| Without Donor Restrictions              | (2,509,189)  | (2,572,072)                                  | 2,572,073                      | (2,509,188)         |
| With Donor Restrictions                 | -  | -  | -                              | -                   |
| Total Net Assets                        | (2,509,189)  | (2,572,072)                                  | 2,572,073                      | (2,509,188)         |
| <b>Total Liabilities and Net Assets</b> | <u>\$ (1,704,604)</u>                                    | <u>\$ 1,402,400</u>                          | <u>\$ 2,551,073</u>            | <u>\$ 2,248,869</u> |

See Independent Auditor's Report.

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**CONSOLIDATING SCHEDULE OF ACTIVITIES AND CHANGES IN NET ASSETS**  
**For the Year Ended June 30, 2025**

|                                       | <b>CORTLAND HOUSING<br/>ASSISTANCE<br/>COUNCIL, INC.</b> | <b>POMEROY<br/>SCHOOL<br/>APARTMENTS, LP</b> | <b>ELIMINATION<br/>ENTRIES</b> | <b>TOTAL</b>      |
|---------------------------------------|--|--|--------------------------------|-------------------|
| <b>Revenue and Support</b>            |  |  |                                |                   |
| <b>Grant and Contribution Revenue</b> |  |  |                                |                   |
| Without Donor Restrictions            | \$ 154,138   | \$ -   | \$ -                           | \$ 154,138        |
| With Donor Restrictions               | 31,000   | -  | -                              | 31,000            |
| Total Grant and Contribution Revenue  | 185,138  | -  | -                              | 185,138           |
| <b>Revenue from Contracts</b>         |  |  |                                |                   |
| Rental Revenue                        | 76,799   | 242,762                                      | -                              | 319,561           |
| Management Fees                       | 117,504  | -  | (117,504)                      | -                 |
| Program Services Revenue              | 69,531   | -  | -                              | 69,531            |
| Total Revenue from Contracts          | 263,834  | 242,762                                      | (117,504)                      | 389,092           |
| Investment Income                     | (9,294)  | 3,241  | 9,294                          | 3,241             |
| Other Income                          | 95,557   | 11,653                                       | -                              | 107,210           |
| Gain (Loss) on Disposal of Assets     | -  | -  | -                              | -                 |
| Total Revenue and Support             | 535,235  | 257,656                                      | (108,210)                      | 684,681           |
| <b>Expenses</b>                       |  |  |                                |                   |
| Program Services                      | 349,485  | 178,248                                      | (117,504)                      | 410,229           |
| General and Administrative            | 84,133   | 88,702                                       | -                              | 172,835           |
| Development and Marketing             | -  | -  | -                              | -                 |
| Total Expenses                        | 433,618  | 266,950                                      | (117,504)                      | 583,064           |
| <b>Change in Net Assets</b>           | <b>\$ 101,617</b>  | <b>\$ (9,294)</b>                            | <b>\$ 9,294</b>                | <b>\$ 101,617</b> |

See Independent Auditor's Report.

**CORTLAND HOUSING ASSISTANCE CENTER, INC.**

**SCHEDULE OF FINANCIAL POSITION - SPECIAL PROGRAM FUND**

**June 30, 2025**

|   | <b>Assets</b>                     |                                   |                             |
|---|-----------------------------------|-----------------------------------|-----------------------------|
|   | <b>DHCR-RPC<br/>GRANT</b>         | <b>FIRST-TIME<br/>HOMERBUYERS</b> | <b>TOTAL</b>                |
|   | <u>                    </u>       | <u>                    </u>       | <u>                    </u> |
| <b>Current Assets</b>                       |                                   |                                   |                             |
| Cash- Restricted                            | \$ 292                            | \$ 161                            | \$ 453                      |
| Due From Other Funds                        | 527                               | -                                 | 527                         |
| Other Receivable                            | -                                 | -                                 | -                           |
|   | <u>819</u>                        | <u>161</u>                        | <u>980</u>                  |
| <b>Total Current Assets</b>                 | 819                               | 161                               | 980                         |
| <br><b>Property, Plant and Equipment</b>    |                                   |                                   |                             |
| Property, Plant and Equipment, Net          | -                                 | -                                 | -                           |
|   | <u>-</u>                          | <u>-</u>                          | <u>-</u>                    |
| <b>Total Assets</b>                         | <u>\$ 819</u>                     | <u>\$ 161</u>                     | <u>\$ 980</u>               |
|   |                                   |                                   |                             |
|   | <b>Liabilities and Net Assets</b> |                                   |                             |
| <b>Current Liabilities</b>                  |                                   |                                   |                             |
| Accounts Payable                            | \$ -                              | \$ -                              | \$ -                        |
| Other Current Liabilities                   | -                                 | -                                 | -                           |
| Due to Other Funds                          | -                                 | 150                               | 150                         |
|   | <u>-</u>                          | <u>150</u>                        | <u>150</u>                  |
| <b>Total Current Liabilities</b>            | -                                 | 150                               | 150                         |
| <br><b>Net Assets</b>                       |                                   |                                   |                             |
| Without Donor Restrictions                  | 819                               | 11                                | 830                         |
| With Donor Restrictions                     | -                                 | -                                 | -                           |
|   | <u>819</u>                        | <u>11</u>                         | <u>830</u>                  |
| <b>Total Net Assets</b>                     | 819                               | 11                                | 830                         |
| <br><b>Total Liabilities and Net Assets</b> | <u>\$ 819</u>                     | <u>\$ 161</u>                     | <u>\$ 980</u>               |

See Independent Auditor's Report.

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**SCHEDULE OF ACTIVITIES AND CHANGES IN NET ASSETS -  
SPECIAL PROGRAM FUND  
For the Year Ended June 30, 2025**

|   | <b>DHCR-RPC<br/>GRANT</b> | <b>FIRST-TIME<br/>HOMERBUYERS</b> | <b>TOTAL</b>  |
|---|---------------------------|-----------------------------------|---------------|
| <b>Revenue and Support</b>              |                           |                                   |               |
| <b>Grant Revenue</b>                    |                           |                                   |               |
| Without Donor Restrictions              | \$ 121,783                | \$ -                              | \$ 121,783    |
| With Donor Restrictions                 | -                         | 31,000                            | 31,000        |
| Total Grant Revenue                     | 121,783                   | 31,000                            | 152,783       |
| Investment Income                       | -                         | -                                 | -             |
| Other Income                            | -                         | -                                 | -             |
| Gain (Loss) on Disposal of Assets       | -                         | -                                 | -             |
| Total Revenue and Support               | 121,783                   | 31,000                            | 152,783       |
| <b>Expenses</b>                         |                           |                                   |               |
| Program Services                        | 106,000                   | 31,000                            | 137,000       |
| General and Administrative              | 15,783                    | -                                 | 15,783        |
| Development and Marketing               | -                         | -                                 | -             |
| Total Expenses                          | 121,783                   | 31,000                            | 152,783       |
| <b>Change in Net Assets</b>             | -                         | -                                 | -             |
| <b>Net Assets - Beginning of Year</b>   |                           |                                   |               |
| Net Assets - Without Donor Restrictions | 819                       | 11                                | 830           |
| Net Assets - With Donor Restrictions    | -                         | -                                 | -             |
| Total Net Assets - Beginning of Year    | 819                       | 11                                | 830           |
| <b>Net Assets - End of Year</b>         |                           |                                   |               |
| Net Assets - Without Donor Restrictions | 819                       | 11                                | 830           |
| Net Assets - With Donor Restrictions    | -                         | -                                 | -             |
| <b>Total Net Assets</b>                 | <b>\$ 819</b>             | <b>\$ 11</b>                      | <b>\$ 830</b> |

See Independent Auditor's Report.

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**SCHEDULE OF FINANCIAL POSITION - RENTAL PROPERTIES FUND**

**June 30, 2025**

|   | <b>Assets</b>                     |  |                     |
|---|-----------------------------------|--|---------------------|
|   | <b>MAPLE<br/>AVENUE</b>           | <b>POMEROY<br/>SCHOOL<br/>APARTMENTS</b> | <b>TOTAL</b>        |
| <b>Current Assets</b>                   |                                   |  |                     |
| Cash- Operating                         | \$ 12,042                         | \$ 126,069                               | \$ 138,111          |
| Cash- Restricted                        | 84,157                            | 88,487                                   | 172,644             |
| Due From Other Funds                    | -                                 | 21,000                                   | 21,000              |
| Investments                             | -                                 | 183,838                                  | 183,838             |
| Rents Receivable                        | 249                               | 3,324                                    | 3,573               |
| <b>Total Current Assets</b>             | <b>96,448</b>                     | <b>422,718</b>                           | <b>519,166</b>      |
| <b>Property, Plant and Equipment</b>    |                                   |  |                     |
| Property, Plant and Equipment, Net      | 133,472                           | 979,682                                  | 1,113,154           |
| <b>Total Assets</b>                     | <b>\$ 229,920</b>                 | <b>\$ 1,402,400</b>                      | <b>\$ 1,632,320</b> |
|   |                                   |  |                     |
|   | <b>Liabilities and Net Assets</b> |  |                     |
| <b>Current Liabilities</b>              |                                   |  |                     |
| Accounts Payable                        | \$ 906                            | \$ 2,291                                 | \$ 3,197            |
| Other Current Liabilities               | 204                               | 979                                      | 1,183               |
| Due to Other Funds                      | 7,392                             | -  | 7,392               |
| Accrued Interest                        | -                                 | 20,625                                   | 20,625              |
| Current Portion of Long-Term Debt       | 284,228                           | -  | 284,228             |
| <b>Total Current Liabilities</b>        | <b>292,730</b>                    | <b>23,895</b>                            | <b>316,625</b>      |
| <b>Non-Current Liabilities</b>          |                                   |  |                     |
| Tenant Security Deposits                | 5,799                             | 18,243                                   | 24,042              |
| Long-Term Debt, Net of Current Portion  | 450,000                           | 3,932,334                                | 4,382,334           |
| <b>Total Liabilities</b>                | <b>748,529</b>                    | <b>3,974,472</b>                         | <b>4,723,001</b>    |
| <b>Net Assets</b>                       |                                   |  |                     |
| Without Donor Restrictions              | (518,609)                         | (2,572,072)                              | (3,090,681)         |
| With Donor Restrictions                 | -                                 | -  | -                   |
| <b>Total Net Assets</b>                 | <b>(518,609)</b>                  | <b>(2,572,072)</b>                       | <b>(3,090,681)</b>  |
| <b>Total Liabilities and Net Assets</b> | <b>\$ 229,920</b>                 | <b>\$ 1,402,400</b>                      | <b>\$ 1,632,320</b> |

See Independent Auditor's Report.

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

**SCHEDULE OF ACTIVITIES AND CHANGES IN NET ASSETS -  
RENTAL PROPERTIES FUND  
For the Year Ended June 30, 2025**

|   | <b>MAPLE<br/>AVENUE</b> | <b>POMEROY<br/>SCHOOL<br/>APARTMENTS</b> | <b>TOTAL</b>          |
|---|-------------------------|--|-----------------------|
| <b>Revenue and Support</b>                  |                         |  |                       |
| <b>Contract Revenue</b>                     |                         |  |                       |
| Rental Revenue                              | \$ 76,298               | \$ 242,762                               | \$ 319,060            |
| Total Grant Revenue                         | 76,298                  | 242,762                                  | 319,060               |
| Investment Income                           | 2                       | 3,241                                    | 3,243                 |
| Other Income                                | 1,520                   | 11,653                                   | 13,173                |
| Gain (Loss) on Disposal of Assets           | -                       | -  | -                     |
| Net Assets Released From Restrictions       | -                       | -  | -                     |
| <b>Total Revenue and Support</b>            | <b>77,820</b>           | <b>257,656</b>                           | <b>335,476</b>        |
| <b>Expenses</b>                             |                         |  |                       |
| Program Services                            | 38,541                  | 178,248                                  | 216,789               |
| General and Administrative                  | 41,004                  | 88,702                                   | 129,706               |
| Development and Marketing                   | -                       | -  | -                     |
| <b>Total Expenses</b>                       | <b>79,545</b>           | <b>266,950</b>                           | <b>346,495</b>        |
| <b>Change in Net Assets</b>                 | <b>(1,725)</b>          | <b>(9,294)</b>                           | <b>(11,019)</b>       |
| <b>Net Assets - Beginning of Year</b>       |                         |  |                       |
| Net Assets - Without Donor Restrictions     | (558,906)               | (2,645,302)                              | (3,204,208)           |
| Net Assets - With Donor Restrictions        | 42,022                  | 82,524                                   | 124,546               |
| <b>Total Net Assets - Beginning of Year</b> | <b>(516,884)</b>        | <b>(2,562,778)</b>                       | <b>(3,079,662)</b>    |
| <b>Net Assets - End of Year</b>             |                         |  |                       |
| Net Assets - Without Donor Restrictions     | (518,609)               | (2,572,072)                              | (3,090,681)           |
| Net Assets - With Donor Restrictions        | -                       | -  | -                     |
| <b>Total Net Assets</b>                     | <b>\$ (518,609)</b>     | <b>\$ (2,572,072)</b>                    | <b>\$ (3,090,681)</b> |

See Independent Auditor's Report.

**CORTLAND HOUSING ASSISTANCE COUNCIL, INC.**

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**SCHEDULE OF EXCESS INCOME ANALYSIS - MAPLE AVE**  
**For the Year Ended June 30, 2025**

|  |    |               |
|--|----|---------------|
| Net Income (Loss) per Schedule                   | \$ | (1,725)       |
| Add Non-Cash Expenses:                           |    |               |
| Depreciation                                     |    | 27,179        |
| Amortization                                     |    | -             |
| Interest Expense                                 |    | -             |
| Deduct Non-Cash Income                           |    |               |
| Forgiven Interest                                |    | -             |
| Add Approved Reserve Withdrawals:                |    |               |
| Replacement Reserve                              |    | 670           |
| Operating Reserve                                |    | -             |
| Deduct Required Reserve Deposits                 |    |               |
| Replacement Reserve                              |    | (4,836)       |
| Operating Reserve                                |    | (2,982)       |
| Deduct Capital Expenditures                      |    | -             |
|  |    | <hr/>         |
| Total Current Obligations                        |    | 20,031        |
|  |    | <hr/>         |
| Excess Income (Expense) Before HTFC Debt Service | \$ | <u>18,306</u> |

See Independent Auditor's Report.

**PORT, KASHDIN & MCSHERRY, CPAS  
3535 WEST RD  
CORTLAND, NY 13045  
(607) 756-5681**

January 17, 2025

CORTLAND HOUSING ASSISTANCE COUNCIL  
36 TAYLOR AVENUE  
CORTLAND, NY 13045

Dear Shawna:

Your 2023 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-TE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Please be sure to call us if you have any questions.

Sincerely,

*Christopher J. Guay, CPA*

CHRISTOPHER GUAY

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2023

Department of the Treasury Internal Revenue Service

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 For the 2023 calendar year, or tax year beginning 7/01, 2023, and ending 6/30, 2024

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C CORTLAND HOUSING ASSISTANCE COUNCIL, 36 TAYLOR AVENUE, CORTLAND, NY 13045. D Employer identification number 16-1130177. E Telephone number (607) 753-8271. G Gross receipts \$ 371,424.

F Name and address of principal officer: SAME AS C ABOVE. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No.

I Tax-exempt status: X 501(c)(3), 501(c) ( ) (insert no.), 4947(a)(1) or 527.

J Website: N/A. H(c) Group exemption number.

K Form of organization: X Corporation, Trust, Association, Other. L Year of formation: 1978. M State of legal domicile: NY.

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO SECURE HOUSING AT LOW AND MODERATE COST FOR THE ECONOMICALLY DISADVANTAGED CITIZENS OF CORTLAND COUNTY, NEW YORK

Table with 2 columns: Description and Amount. Rows include: 2 Check this box if the organization discontinued its operations... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue - add lines 8 through 11.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 13 Grants and similar amounts paid... 14 Benefits paid to or for members... 15 Salaries, other compensation... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer SHAWNA GRINNELL, Date, EXECUTIVE DIRECTOR.

Paid Preparer Use Only: Print/Type preparer's name CHRISTOPHER GUAY, Preparer's signature Christopher J. Guay, Date 1/17/25, Check self-employed, PTIN P01346366, Firm's name PORT, KASHDIN & MCSHERRY, CPAS, Firm's address 3535 WEST RD, CORTLAND, NY 13045, Firm's EIN 16-1013595, Phone no. (607) 756-5681.

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO SECURE HOUSING AT LOW AND MODERATE COST FOR THE ECONOMICALLY DISADVANTAGED CITIZENS OF CORTLAND COUNTY, NEW YORK

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 153,873. including grants of \$ ) (Revenue \$ 202,840.)

TO PROVIDE HOUSING REHABILITATION AND OTHER HOUSING RELATED SERVICES TO LOW INCOME RESIDENTS OF CORTLAND COUNTY

4b (Code: ) (Expenses \$ 116,162. including grants of \$ ) (Revenue \$ 113,958.)

TO PURCHASE AND RESTORE RESIDENTIAL UNITS FOR RENTAL TO LOW INCOME FAMILIES AT REDUCED RATES

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 270,035.

**Part IV Checklist of Required Schedules**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> .....   | X   |    |
| <b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....   |     | X  |
| <b>3</b> 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> .....  |     | X  |
| <b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i> .....  |     | X  |
| <b>5</b> 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> .....   |     | X  |
| <b>6</b> 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? <i>If "Yes," complete Schedule D, Part I.</i> .....  |     | X  |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> .....  |     | X  |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> .....   |     | X  |
| <b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV.</i> .....            |     | X  |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> .....   |     | X  |
| <b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.   |     |    |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> .....   | X   |    |
| <b>b</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? <i>If "Yes," complete Schedule D, Part VII.</i> .....  |     | X  |
| <b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII.</i> .....  |     | X  |
| <b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX.</i> .....   | X   |    |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> .....   | X   |    |
| <b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X.</i> .....  | X   |    |
| <b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i> .....  |     | X  |
| <b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i> .....   | X   |    |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> .....  |     | X  |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....   |     | X  |
| <b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV.</i> ..... |     | X  |
| <b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i> .....   |     | X  |
| <b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i> .....   |     | X  |
| <b>17</b> 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions .....  |     | X  |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i> .....   |     | X  |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> .....   |     | X  |
| <b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i> .....   |     | X  |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....  |     |    |
| <b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II.</i> .....  |     | X  |

**Part IV Checklist of Required Schedules** (continued)

|  | Yes | No |
|--|-----|----|
| <b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III.</i> .....  |     | X  |
| <b>23</b> 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> .....  |     | X  |
| <b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i> .....  |     | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.....  |     |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?.....   |     |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?.....  |     |    |
| <b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> .....  |     | X  |
| <b>b</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? <i>If "Yes," complete Schedule L, Part I.</i> .....   |     | X  |
| <b>26</b> 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> .....   |     | X  |
| <b>27</b> 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, Part III.</i> ..... |     | X  |
| <b>28</b> Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).  |     |    |
| <b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i> .....  |     | X  |
| <b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i> .....   |     | X  |
| <b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i> .....  |     | X  |
| <b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i> .....  |     | X  |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> .....   |     | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> .....   |     | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> .....   |     | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> .....   |     | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i> .....   | X   |    |
| <b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?.....  |     | X  |
| <b>b</b> 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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> .....   |     |    |
| <b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> .....   |     | X  |
| <b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI.</i> .....  |     | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?<br><b>Note:</b> All Form 990 filers are required to complete Schedule O. ....   | X   |    |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

|  | Yes | No |
|--|-----|----|
| <b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable. ....   |     |    |
| <b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable. ....   |     |    |
| <b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?..... | X   |    |

**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

|            |  | Yes        | No |
|------------|--|------------|----|
| <b>2a</b>  | 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>2a</b> 5  |            |    |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .   | X          |    |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .  |            | X  |
| <b>b</b>   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O. . . . .   |            |    |
| <b>4a</b>  | 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)? . . . . .     |            | X  |
| <b>b</b>   | If "Yes," enter the name of the foreign country<br>See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).   |            |    |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .  |            | X  |
| <b>b</b>   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .   |            | X  |
| <b>c</b>   | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .   |            |    |
| <b>6a</b>  | 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? . . . . .  |            | X  |
| <b>b</b>   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .  |            |    |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   |            |    |
| <b>a</b>   | 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? . . . . .  |            | X  |
| <b>b</b>   | If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .  |            |    |
| <b>c</b>   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .   |            | X  |
| <b>d</b>   | If "Yes," indicate the number of Forms 8282 filed during the year. . . . .   | <b>7d</b>  |    |
| <b>e</b>   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .  | <b>7e</b>  | X  |
| <b>f</b>   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .   | <b>7f</b>  | X  |
| <b>g</b>   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .   | <b>7g</b>  |    |
| <b>h</b>   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .   | <b>7h</b>  |    |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .   | <b>8</b>   |    |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>   |            |    |
| <b>a</b>   | Did the sponsoring organization make any taxable distributions under section 4966? . . . . .   | <b>9a</b>  |    |
| <b>b</b>   | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .  | <b>9b</b>  |    |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter:   |            |    |
| <b>a</b>   | Initiation fees and capital contributions included on Part VIII, line 12. . . . .  | <b>10a</b> |    |
| <b>b</b>   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. . . . .   | <b>10b</b> |    |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter:  |            |    |
| <b>a</b>   | Gross income from members or shareholders. . . . .   | <b>11a</b> |    |
| <b>b</b>   | Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .  | <b>11b</b> |    |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .  | <b>12a</b> |    |
| <b>b</b>   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. . . . .   | <b>12b</b> |    |
| <b>13</b>  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>  |            |    |
| <b>a</b>   | Is the organization licensed to issue qualified health plans in more than one state? . . . . .   | <b>13a</b> |    |
|            | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.   |            |    |
| <b>b</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. . . . .   | <b>13b</b> |    |
| <b>c</b>   | Enter the amount of reserves on hand. . . . .  | <b>13c</b> |    |
| <b>14a</b> | Did the organization receive any payments for indoor tanning services during the tax year? . . . . .   | <b>14a</b> | X  |
| <b>b</b>   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. . . . .   | <b>14b</b> |    |
| <b>15</b>  | 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? . . . . .<br>If "Yes," see the instructions and file Form 4720, Schedule N.                   | <b>15</b>  | X  |
| <b>16</b>  | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . .<br>If "Yes," complete Form 4720, Schedule O.   | <b>16</b>  | X  |
| <b>17</b>  | <b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . . . .<br>If "Yes," complete Form 6069. | <b>17</b>  |    |

**Part VI Governance, Management, and Disclosure.** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.  
 Check if Schedule O contains a response or note to any line in this Part VI.

**Section A. Governing Body and Management**

|           |   | Yes | No |
|-----------|---|-----|----|
| <b>1a</b> | Enter the number of voting members of the governing body at the end of the tax year. . . . .<br>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 on Schedule O. |     |    |
| <b>1b</b> | Enter the number of voting members included on line 1a, above, who are independent. . . . .   |     |    |
| <b>2</b>  | 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? . . . . . <b>SEE SCHEDULE O</b>   | X   |    |
| <b>3</b>  | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . .   |     | X  |
| <b>4</b>  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .  |     | X  |
| <b>5</b>  | Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .  |     | X  |
| <b>6</b>  | Did the organization have members or stockholders? . . . . .  |     | X  |
| <b>7a</b> | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .  |     | X  |
| <b>7b</b> | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .   |     | X  |
| <b>8</b>  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:   |     |    |
| <b>a</b>  | The governing body? . . . . .   | X   |    |
| <b>b</b>  | Each committee with authority to act on behalf of the governing body? . . . . .   |     | X  |
| <b>9</b>  | 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 on Schedule O . . . . .  |     | X  |

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

|            |  | Yes | No |
|------------|--|-----|----|
| <b>10a</b> | Did the organization have local chapters, branches, or affiliates? . . . . .   |     | X  |
| <b>10b</b> | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .   |     |    |
| <b>11a</b> | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .  | X   |    |
| <b>11b</b> | Describe on Schedule O the process, if any, used by the organization to review this Form 990. <b>SEE SCHEDULE O</b>  |     |    |
| <b>12a</b> | Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .  | X   |    |
| <b>12b</b> | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .  | X   |    |
| <b>12c</b> | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done . . . . .   | X   |    |
| <b>13</b>  | Did the organization have a written whistleblower policy? . . . . .  |     | X  |
| <b>14</b>  | Did the organization have a written document retention and destruction policy? . . . . .   | X   |    |
| <b>15</b>  | 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?   |     |    |
| <b>15a</b> | The organization's CEO, Executive Director, or top management official . . . . .   |     | X  |
| <b>15b</b> | Other officers or key employees of the organization . . . . .  |     | X  |
|            | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.   |     |    |
| <b>16a</b> | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .  |     | X  |
| <b>16b</b> | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . |     |    |

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed NY
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. **SEE SCHEDULE O**
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records.  
**EMMA DIPPOLITO 36 TAYLOR AVE. CORTLAND NY 13045 607-753-8271**

**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 VII.

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A)<br>Name and title                 | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |         | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|---------------------------------------|--|---|-----------------------|---------|--------------|------------------------------|---------|---|--|---|
|                                       |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former  |   |  |   |
| (1) SHAWNA GRINNELL<br>EXECUTIVE DIR. | 40<br>0  |   |                       | X       |              |                              | 51,796. | 0.  | 0.   |   |
| (2) CARRIE KNIGHT<br>MEMBER           | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (3) DJ VANGORDER<br>VICE PRESIDENT    | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (4) AMBER GIAMEI<br>MEMBER            | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (5) PAUL SLOWEY<br>SECRETARY          | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (6) STEVEN BROWN<br>TREASURER         | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (7) KRIS BUCHAN<br>MEMBER             | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (8) MACHELL PHELPS<br>MEMBER          | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (9) JERRY HARTNETT<br>PRESIDENT       | 1<br>0   | X   |                       | X       |              |                              | 0.      | 0.  | 0.   |   |
| (10) GARRY VANGORDER<br>MEMBER        | 1<br>0   | X   |                       |         |              |                              | 0.      | 0.  | 0.   |   |
| (11)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (12)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (13)                                  |  |   |                       |         |              |                              |         |   |  |   |
| (14)                                  |  |   |                       |         |              |                              |         |   |  |   |

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A)<br>Name and title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC/1099-NEC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------|--|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
|                       |  | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |   |  |   |
| (15) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (16) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (17) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (18) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (19) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (20) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (21) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (22) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (23) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (24) -----            | -----  |   |                       |         |              |                              |        |   |  |   |
| (25) -----            | -----  |   |                       |         |              |                              |        |   |  |   |

|  |         |    |    |
|--|---------|----|----|
| <b>1b Subtotal</b> .....   | 51,796. | 0. | 0. |
| <b>c Total from continuation sheets to Part VII, Section A</b> ..... | 0.      | 0. | 0. |
| <b>d Total (add lines 1b and 1c)</b> .....                           | 51,796. | 0. | 0. |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

|  | Yes      | No |
|--|----------|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....  | <b>3</b> | X  |
| <b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> ..... | <b>4</b> | X  |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....                       | <b>5</b> | X  |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**Part VIII Statement of Revenue**

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

|   |   |   | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |  |
|---|---|---|----------------------|--|---|--|--|
| <b>Contributions, Gifts, Grants,<br/>and Other Similar Amounts</b>                      | <b>1a</b> Federated campaigns . . . . .   | <b>1a</b>   |                      |  |   |  |  |
|   | <b>b</b> Membership dues . . . . .  | <b>1b</b>   |                      |  |   |  |  |
|   | <b>c</b> Fundraising events . . . . .   | <b>1c</b>   |                      |  |   |  |  |
|   | <b>d</b> Related organizations . . . . .  | <b>1d</b>   |                      |  |   |  |  |
|   | <b>e</b> Government grants (contributions) . . . . .  | <b>1e</b>   | 121,783.             |  |   |  |  |
|   | <b>f</b> All other contributions, gifts, grants, and<br>similar amounts not included above . . . . .  | <b>1f</b>   |                      |  |   |  |  |
|   | <b>g</b> Noncash contributions included in<br>lines 1a-1f . . . . .   | <b>1g</b>   |                      |  |   |  |  |
|   | <b>h Total.</b> Add lines 1a-1f . . . . .   |   | 121,783.             |  |   |  |  |
| <b>Program Service Revenue</b>  | <b>Business Code</b>  |   |                      |  |   |  |  |
|   | <b>2a</b> PROPERTY MANAGEMENT FEES  |   | 113,958.             | 113,958.   |   |  |  |
|   | <b>b</b> LOW INCOME RENTALS   |   | 81,057.              | 81,057.  |   |  |  |
|   | <b>c</b> RAMP PROGRAM   |   | 11,883.              | 11,883.  |   |  |  |
|   | <b>d</b> OTHER HOUSING PROGRAMS   |   | 7,301.               | 7,301.   |   |  |  |
|   | <b>e</b> HOUSING COUNCIL  |   | 7,000.               | 7,000.   |   |  |  |
|   | <b>f</b> All other program service revenue . . . . .  |   | 5,066.               | 5,066.   |   |  |  |
| <b>g Total.</b> Add lines 2a-2f . . . . .   |   | 226,265.  |                      |  |   |  |  |
| <b>Miscellaneous Revenue</b>  | <b>3</b> Investment income (including dividends, interest, and<br>other similar amounts) . . . . .  |   | 1.                   |  |   | 1.   |  |
|   | <b>4</b> Income from investment of tax-exempt bond proceeds   |   |                      |  |   |  |  |
|   | <b>5</b> Royalties . . . . .  |   |                      |  |   |  |  |
|   | <b>6a</b> Gross rents . . . . .   | <b>6a</b>   | (i) Real             |  |   |  |  |
|   |   |   | (ii) Personal        |  |   |  |  |
|   |   |   |                      |  |   |  |  |
|   | <b>b</b> Less: rental expenses  | <b>6b</b>   |                      |  |   |  |  |
|   | <b>c</b> Rental income or (loss)  | <b>6c</b>   |                      |  |   |  |  |
|   | <b>d</b> Net rental income or (loss) . . . . .  |   |                      |  |   |  |  |
|   | <b>7a</b> Gross amount from<br>sales of assets<br>other than inventory  | <b>7a</b>   | (i) Securities       |  |   |  |  |
|   |   |   | (ii) Other           |  |   |  |  |
|   |   |   |                      |  |   |  |  |
|   | <b>b</b> Less: cost or other basis<br>and sales expenses  | <b>7b</b>   |                      |  |   |  |  |
|   | <b>c</b> Gain or (loss) . . . . .   | <b>7c</b>   |                      |  |   |  |  |
| <b>d</b> Net gain or (loss) . . . . .   |   |   |                      |  |   |  |  |
| <b>Other Revenue</b>  | <b>8a</b> Gross income from fundraising events<br>(not including \$ _____<br>of contributions reported on line 1c).<br>See Part IV, line 18 . . . . . | <b>8a</b>   |                      |  |   |  |  |
|   | <b>b</b> Less: direct expenses . . . . .  | <b>8b</b>   |                      |  |   |  |  |
|   | <b>c</b> Net income or (loss) from fundraising events . . . . .   |   |                      |  |   |  |  |
|   | <b>9a</b> Gross income from gaming activities.<br>See Part IV, line 19 . . . . .  | <b>9a</b>   |                      |  |   |  |  |
|   | <b>b</b> Less: direct expenses . . . . .  | <b>9b</b>   |                      |  |   |  |  |
|   | <b>c</b> Net income or (loss) from gaming activities . . . . .  |   |                      |  |   |  |  |
| <b>10a</b> Gross sales of inventory, less . . . . .<br>returns and allowances . . . . . | <b>10a</b>  |   |                      |  |   |  |  |
|   |   | <b>b</b> Less: cost of goods sold . . . . .                     | <b>10b</b>           |  |   |  |  |
|   |   | <b>c</b> Net income or (loss) from sales of inventory . . . . . |                      |  |   |  |  |
| <b>Miscellaneous Revenue</b>  | <b>Business Code</b>  |   |                      |  |   |  |  |
|   | <b>11a</b> OTHER INCOME   |   | 23,375.              | 23,375.  |   |  |  |
|   | <b>b</b> _____  |   |                      |  |   |  |  |
|   | <b>c</b> _____  |   |                      |  |   |  |  |
|   | <b>d</b> All other revenue . . . . .  |   |                      |  |   |  |  |
| <b>e Total.</b> Add lines 11a-11d . . . . .   |   | 23,375.   |                      |  |   |  |  |
| <b>12 Total revenue.</b> See instructions . . . . .                                     |   | 371,424.  | 249,640.             | 0.   | 1.                                      |  |  |

**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).

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

| <b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>  | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service expenses | <b>(C)</b><br>Management and general expenses | <b>(D)</b><br>Fundraising expenses |
|--|------------------------------|--|---|------------------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.  |                              |  |   |                                    |
| 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.  | 52,803.                      | 42,242.                                | 10,561.                                       | 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).  | 0.                           | 0.                                     | 0.  | 0.                                 |
| 7 Other salaries and wages.  | 119,341.                     | 95,473.                                | 23,868.                                       |                                    |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).  | 4,202.                       | 3,362.                                 | 840.  |                                    |
| 9 Other employee benefits.   | 27,225.                      | 21,780.                                | 5,445.  |                                    |
| 10 Payroll taxes.  | 13,123.                      | 10,499.                                | 2,624.  |                                    |
| 11 Fees for services (nonemployees):   |                              |  |   |                                    |
| a Management.  | 4,343.                       | 3,475.                                 | 868.  |                                    |
| b Legal.   | 4,854.                       | 3,883.                                 | 971.  |                                    |
| c Accounting.  | 2,000.                       | 1,600.                                 | 400.  |                                    |
| d Lobbying.  |                              |  |   |                                    |
| 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.)  |                              |  |   |                                    |
| 12 Advertising and promotion.  | 122.                         |  | 122.  |                                    |
| 13 Office expenses.  | 4,559.                       | 2,279.                                 | 2,280.  |                                    |
| 14 Information technology.   |                              |  |   |                                    |
| 15 Royalties.  |                              |  |   |                                    |
| 16 Occupancy.  |                              |  |   |                                    |
| 17 Travel.   | 3,539.                       | 2,832.                                 | 707.  |                                    |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials.   |                              |  |   |                                    |
| 19 Conferences, conventions, and meetings.   |                              |  |   |                                    |
| 20 Interest.   | 1,570.                       |  | 1,570.  |                                    |
| 21 Payments to affiliates.   |                              |  |   |                                    |
| 22 Depreciation, depletion, and amortization.  | 44,219.                      | 26,690.                                | 17,529.                                       |                                    |
| 23 Insurance.  | 13,817.                      | 11,054.                                | 2,763.  |                                    |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)                                     |                              |  |   |                                    |
| a <u>REPAIR AND MAINTENANCE</u>  | 30,042.                      | 24,478.                                | 5,564.  |                                    |
| b <u>UTILITIES AND TELEPHONE</u>   | 17,569.                      | 14,056.                                | 3,513.  |                                    |
| c <u>OTHER ADMINISTRATIVE</u>  | 7,607.                       | 1,000.                                 | 6,607.  |                                    |
| d <u>BAD DEBTS</u>   | 5,338.                       |  | 5,338.  |                                    |
| e All other expenses.  | 6,517.                       | 5,332.                                 | 1,185.  |                                    |
| 25 Total functional expenses. Add lines 1 through 24e.   | 362,790.                     | 270,035.                               | 92,755.                                       | 0.                                 |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). |                              |  |   |                                    |

**Part X Balance Sheet**

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

|                                    |  | (A)<br>Beginning of year  |             | (B)<br>End of year |             |          |
|------------------------------------|--|---|-------------|--------------------|-------------|----------|
| <b>Assets</b>                      | 1  | Cash — non-interest-bearing   | 124,794.    | 1                  | 135,036.    |          |
|                                    | 2  | Savings and temporary cash investments  |             | 2                  |             |          |
|                                    | 3  | Pledges and grants receivable, net  |             | 3                  |             |          |
|                                    | 4  | Accounts receivable, net  | 2,085.      | 4                  | 1,560.      |          |
|                                    | 5  | Loans and other receivables from 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 |             | 5                  |             |          |
|                                    | 6  | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)   |             | 6                  |             |          |
|                                    | 7  | Notes and loans receivable, net   |             | 7                  |             |          |
|                                    | 8  | Inventories for sale or use   |             | 8                  |             |          |
|                                    | 9  | Prepaid expenses and deferred charges   |             | 9                  |             |          |
|                                    | 10a  | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   | 10a         | 1,258,329.         |             |          |
|                                    | b  | Less: accumulated depreciation  | 10b         | 768,708.           | 10c         | 489,621. |
|                                    | 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  | 116,242.    | 15                 | 133,076.    |          |
| 16                                 | <b>Total assets.</b> Add lines 1 through 15 (must equal line 33)   | 774,452.  | 16          | 759,293.           |             |          |
| <b>Liabilities</b>                 | 17   | Accounts payable and accrued expenses   | 6,409.      | 17                 | 3,697.      |          |
|                                    | 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                 |             |          |
|                                    | 22   | 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  | 760,043.    | 23                 | 754,090.    |          |
|                                    | 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   | 2,583,517.  | 25                 | 2,612,312.  |          |
|                                    | 26   | <b>Total liabilities.</b> Add lines 17 through 25   | 3,349,969.  | 26                 | 3,370,099.  |          |
| <b>Net Assets or Fund Balances</b> | <b>Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.</b> <input checked="" type="checkbox"/> |   |             |                    |             |          |
|                                    | 27   | Net assets without donor restrictions   | -2,617,369. | 27                 | -2,653,658. |          |
|                                    | 28   | Net assets with donor restrictions  | 41,852.     | 28                 | 42,852.     |          |
|                                    | <b>Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.</b> <input type="checkbox"/>          |   |             |                    |             |          |
|                                    | 29   | Capital stock or trust principal, or current funds  |             | 29                 |             |          |
|                                    | 30   | Paid-in or capital surplus, or land, building, or equipment fund  |             | 30                 |             |          |
|                                    | 31   | Retained earnings, endowment, accumulated income, or other funds  |             | 31                 |             |          |
|                                    | 32   | <b>Total net assets or fund balances.</b>   | -2,575,517. | 32                 | -2,610,806. |          |
| 33                                 | <b>Total liabilities and net assets/fund balances.</b>   | 774,452.  | 33          | 759,293.           |             |          |

**Part XI Reconciliation 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  | 371,424.    |
| 2  | Total expenses (must equal Part IX, column (A), line 25)   | 2  | 362,790.    |
| 3  | Revenue less expenses. Subtract line 2 from line 1   | 3  | 8,634.      |
| 4  | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                      | 4  | -2,575,517. |
| 5  | Net unrealized gains (losses) on investments   | 5  |             |
| 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 on Schedule O) SEE SCHEDULE O                            | 9  | -43,923.    |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) | 10 | -2,610,806. |

**Part XII Financial Statements and Reporting**

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

|   |  | Yes | No |
|---|--|-----|----|
| 1   | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other   |     |    |
| If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.   |  |     |    |
| 2a  | Were the organization's financial statements compiled or reviewed by an independent accountant?  |     | X  |
| If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. |  |     |    |
| <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                 |  |     |    |
| 2b  | Were the organization's financial statements audited by an independent accountant?   | X   |    |
| If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.              |  |     |    |
| <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis      |  |     |    |
| 2c  | 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? |     | X  |
| If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.   |  |     |    |
| 3a  | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?  |     | X  |
| 3b  | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits     |     |    |

**SCHEDULE A**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public Inspection**

|  |   |
|--|---|
| Name of the organization<br><b>CORTLAND HOUSING ASSISTANCE COUNCIL</b> | Employer identification number<br><b>16-1130177</b> |
|--|---|

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations: \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? |    | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
|                                    |          |   | Yes   | No |   |   |
| (A)                                |          |   |   |    |   |   |
| (B)                                |          |   |   |    |   |   |
| (C)                                |          |   |   |    |   |   |
| (D)                                |          |   |   |    |   |   |
| (E)                                |          |   |   |    |   |   |
| <b>Total</b>                       |          |   |   |    |   |   |

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)  | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   |          |          |          |          |          |           |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.   |          |          |          |          |          |           |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge.   |          |          |          |          |          |           |
| 4 <b>Total.</b> 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 <b>Public support.</b> Subtract line 5 from line 4.  |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)  | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total                |
|--|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4.   |          |          |          |          |          |                          |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.   |          |          |          |          |          |                          |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on.  |          |          |          |          |          |                          |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)   |          |          |          |          |          |                          |
| 11 <b>Total support.</b> Add lines 7 through 10.   |          |          |          |          |          |                          |
| 12 Gross receipts from related activities, etc. (see instructions)   |          |          |          |          | 12       |                          |
| 13 <b>First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here.</b> |          |          |          |          |          | <input type="checkbox"/> |

**Section C. Computation of Public Support Percentage**

|   |    |                          |
|---|----|--------------------------|
| 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)).   | 14 | %                        |
| 15 Public support percentage from 2022 Schedule A, Part II, line 14.  | 15 | %                        |
| 16a <b>33-1/3% support test—2023.</b> If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization.   |    | <input type="checkbox"/> |
| b <b>33-1/3% support test—2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization.  |    | <input type="checkbox"/> |
| 17a <b>10%-facts-and-circumstances test—2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.    |    | <input type="checkbox"/> |
| b <b>10%-facts-and-circumstances test—2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. |    | <input type="checkbox"/> |
| 18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.   |    | <input type="checkbox"/> |

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in)   | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total  |
|---|----------|----------|----------|----------|----------|------------|
| <b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   | 408,844. | 364,952. | 263,794. | 300,828. | 121,783. | 1,460,201. |
| <b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 267,789. | 271,936. | 270,027. | 227,821. | 226,265. | 1,263,838. |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513.  |          |          |          |          |          | 0.         |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.   |          |          |          |          |          | 0.         |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge.   |          |          |          |          |          | 0.         |
| <b>6 Total.</b> Add lines 1 through 5.  | 676,633. | 636,888. | 533,821. | 528,649. | 348,048. | 2,724,039. |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons.   | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.          | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>c</b> Add lines 7a and 7b.   | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>8 Public support.</b> (Subtract line 7c from line 6.)  |          |          |          |          |          | 2,724,039. |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in)   | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total  |
|---|----------|----------|----------|----------|----------|------------|
| <b>9</b> Amounts from line 6.   | 676,633. | 636,888. | 533,821. | 528,649. | 348,048. | 2,724,039. |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. |          |          |          |          |          | 0.         |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.                           |          |          |          |          |          | 0.         |
| <b>c</b> Add lines 10a and 10b.   | 0.       | 0.       | 0.       | 0.       | 0.       | 0.         |
| <b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.      |          |          |          |          |          | 0.         |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part VI.)                                  | 11,566.  | 14,469.  | 3,952.   | 7,478.   | 23,375.  | 60,840.    |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)  | 688,199. | 651,357. | 537,773. | 536,127. | 371,423. | 2,784,879. |

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

**Section C. Computation of Public Support Percentage**

|  |           |         |
|--|-----------|---------|
| <b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)). | <b>15</b> | 97.82 % |
| <b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15.                       | <b>16</b> | 0.00 %  |

**Section D. Computation of Investment Income Percentage**

|   |           |        |
|---|-----------|--------|
| <b>17</b> Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)). | <b>17</b> | 0.00 % |
| <b>18</b> Investment income percentage from 2022 Schedule A, Part III, line 17.                         | <b>18</b> | 0.00 % |

**19a 33-1/3% support tests—2023.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

**b 33-1/3% support tests—2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

|  | Yes | No |
|--|-----|----|
| <b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>  |     |    |
| <b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>   |     |    |
| <b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>   |     |    |
| <b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>   |     |    |
| <b>3c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>   |     |    |
| <b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>   |     |    |
| <b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>  |     |    |
| <b>c</b> 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)? <i>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.</i>   |     |    |
| <b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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 amendment to the organizing document).</i> |     |    |
| <b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   |     |    |
| <b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?  |     |    |
| <b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>  |     |    |
| <b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>  |     |    |
| <b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
| <b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
| <b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
| <b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>  |     |    |
| <b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>   |     |    |

**Part IV Supporting Organizations** (continued)

|  | Yes        | No |
|--|------------|----|
| <b>11</b> Has the organization accepted a gift or contribution from any of the following persons?  |            |    |
| <b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? | <b>11a</b> |    |
| <b>b</b> A family member of a person described on line 11a above?  | <b>11b</b> |    |
| <b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>                              | <b>11c</b> |    |

**Section B. Type I Supporting Organizations**

|   | Yes      | No |
|---|----------|----|
| <b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> | <b>1</b> |    |
| <b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>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 organization.</i>   | <b>2</b> |    |

**Section C. Type II Supporting Organizations**

|  | Yes      | No |
|--|----------|----|
| <b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | <b>1</b> |    |

**Section D. All Type III Supporting Organizations**

|   | Yes      | No |
|---|----------|----|
| <b>1</b> 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? | <b>1</b> |    |
| <b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>  | <b>2</b> |    |
| <b>3</b> By reason of the relationship described on line 2, above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>  | <b>3</b> |    |

**Section E. Type III Functionally Integrated Supporting Organizations**

|   |           |  |  |
|---|-----------|--|--|
| <b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ).   |           |  |  |
| <b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>   |           |  |  |
| <b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>  |           |  |  |
| <b>c</b> <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>  |           |  |  |
| <b>2</b> Activities Test. <b>Answer lines 2a and 2b below.</b>  |           |  |  |
| <b>a</b> 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? <i>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.</i> | <b>2a</b> |  |  |
| <b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>  | <b>2b</b> |  |  |
| <b>3</b> Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>  |           |  |  |
| <b>a</b> 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>If "Yes" or "No," provide details in Part VI.</i>  | <b>3a</b> |  |  |
| <b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>   | <b>3b</b> |  |  |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| <b>Section A – Adjusted Net Income</b> |  | (A) Prior Year | (B) Current Year (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                                      | <b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)  | 8              |                             |

| <b>Section B – Minimum Asset Amount</b> |   | (A) Prior Year | (B) Current Year (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): |                |                             |
| a                                       | Average monthly value of securities   | 1a             |                             |
| b                                       | Average monthly cash balances   | 1b             |                             |
| c                                       | Fair market value of other non-exempt-use assets  | 1c             |                             |
| d                                       | <b>Total</b> (add lines 1a, 1b, and 1c)   | 1d             |                             |
| e                                       | <b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):                                   |                |                             |
| 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 0.015 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 0.035.   | 6              |                             |
| 7                                       | Recoveries of prior-year distributions  | 7              |                             |
| 8                                       | <b>Minimum Asset Amount</b> (add line 7 to line 6)  | 8              |                             |

| <b>Section C – Distributable Amount</b> |   |   | Current Year |
|---|---|---|--------------|
| 1                                       | Adjusted net income for prior year (from Section A, line 8, column A)   | 1 |              |
| 2                                       | Enter 0.85 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                                       | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).   | 6 |              |
| 7                                       | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). |   |              |

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Schedule A (Form 990) 2023

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

| <b>Section D – Distributions</b> |  | <b>Current Year</b> |
|----------------------------------|--|---------------------|
| <b>1</b>                         | Amounts paid to supported organizations to accomplish exempt purposes  | <b>1</b>            |
| <b>2</b>                         | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity              | <b>2</b>            |
| <b>3</b>                         | Administrative expenses paid to accomplish exempt purposes of supported organizations  | <b>3</b>            |
| <b>4</b>                         | Amounts paid to acquire exempt-use assets  | <b>4</b>            |
| <b>5</b>                         | Qualified set-aside amounts (prior IRS approval required – provide details in <b>Part VI</b> )   | <b>5</b>            |
| <b>6</b>                         | Other distributions (describe in <b>Part VI</b> ). See instructions.   | <b>6</b>            |
| <b>7</b>                         | <b>Total annual distributions.</b> Add lines 1 through 6.  | <b>7</b>            |
| <b>8</b>                         | Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions. | <b>8</b>            |
| <b>9</b>                         | Distributable amount for 2023 from Section C, line 6   | <b>9</b>            |
| <b>10</b>                        | Line 8 amount divided by line 9 amount   | <b>10</b>           |

| <b>Section E – Distribution Allocations (see instructions)</b>   | <b>(i)<br/>Excess<br/>Distributions</b> | <b>(ii)<br/>Underdistributions<br/>Pre-2023</b> | <b>(iii)<br/>Distributable<br/>Amount for 2023</b> |
|--|---|---|--|
| <b>1</b> Distributable amount for 2023 from Section C, line 6  |   |   |  |
| <b>2</b> Underdistributions, if any, for years prior to 2023 (reasonable cause required – explain in <b>Part VI</b> ). See instructions.   |   |   |  |
| <b>3</b> Excess distributions carryover, if any, to 2023   |   |   |  |
| <b>a</b> From 2018 . . . . .   |   |   |  |
| <b>b</b> From 2019 . . . . .   |   |   |  |
| <b>c</b> From 2020 . . . . .   |   |   |  |
| <b>d</b> From 2021 . . . . .   |   |   |  |
| <b>e</b> From 2022 . . . . .   |   |   |  |
| <b>f Total</b> of lines 3a through 3e  |   |   |  |
| <b>g</b> Applied to underdistributions of prior years  |   |   |  |
| <b>h</b> Applied to 2023 distributable amount  |   |   |  |
| <b>i</b> Carryover from 2018 not applied (see instructions)  |   |   |  |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.  |   |   |  |
| <b>4</b> Distributions for 2023 from Section D, line 7: \$   |   |   |  |
| <b>a</b> Applied to underdistributions of prior years  |   |   |  |
| <b>b</b> Applied to 2023 distributable amount  |   |   |  |
| <b>c</b> Remainder. Subtract lines 4a and 4b from line 4.  |   |   |  |
| <b>5</b> Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions. |   |   |  |
| <b>6</b> Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.                        |   |   |  |
| <b>7 Excess distributions carryover to 2024.</b> Add lines 3j and 4c.  |   |   |  |
| <b>8</b> Breakdown of line 7:  |   |   |  |
| <b>a</b> Excess from 2019 . . . . .  |   |   |  |
| <b>b</b> Excess from 2020 . . . . .  |   |   |  |
| <b>c</b> Excess from 2021 . . . . .  |   |   |  |
| <b>d</b> Excess from 2022 . . . . .  |   |   |  |
| <b>e</b> Excess from 2023 . . . . .  |   |   |  |

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Schedule A (Form 990) 2023

**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**PART III, LINE 12 - OTHER INCOME**

| <u>NATURE AND SOURCE</u> | <u>2023</u>       | <u>2022</u>      | <u>2021</u>      | <u>2020</u>       | <u>2019</u>       |
|--------------------------|-------------------|------------------|------------------|-------------------|-------------------|
| MISC INCOME              | \$ 23,375.        | \$ 7,478.        | \$ 3,952.        | \$ 14,469.        | \$ 11,566.        |
| TOTAL                    | <u>\$ 23,375.</u> | <u>\$ 7,478.</u> | <u>\$ 3,952.</u> | <u>\$ 14,469.</u> | <u>\$ 11,566.</u> |

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate value of contributions, aggregate value of grants, and aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2a Preservation of land for public use (for example, recreation or education)
2b Protection of natural habitat
2c Preservation of open space
2d Preservation of a historically important land area
2e Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows 2a-2d for total number, total acreage, number of easements on certified historic structure, and number of easements on historic structure.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.
(i) Revenue included on Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.
a Revenue included on Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange program
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

|                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

**Part V Endowment Funds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

|  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment \_\_\_\_\_ %
- b Permanent endowment \_\_\_\_\_ %
- c Term endowment \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

|  | Yes    | No |
|--|--------|----|
| (i) Unrelated organizations?   | 3a(i)  |    |
| (ii) Related organizations?  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property  | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land                  |                                      | 25,000.                         |                              | 25,000.        |
| b Buildings              |                                      | 862,172.                        | 630,092.                     | 232,080.       |
| c Leasehold improvements |                                      | 299,584.                        | 76,503.                      | 223,081.       |
| d Equipment              |                                      | 50,803.                         | 41,343.                      | 9,460.         |
| e Other                  |                                      | 20,770.                         | 20,770.                      | 0.             |

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 489,621.

**Part VII Investments – Other Securities** N/A  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security)               | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|--|----------------|---|
| (1) Financial derivatives  |                |   |
| (2) Closely held equity interests  |                |   |
| (3) Other  |                |   |
| (A)  |                |   |
| (B)  |                |   |
| (C)  |                |   |
| (D)  |                |   |
| (E)  |                |   |
| (F)  |                |   |
| (G)  |                |   |
| (H)  |                |   |
| (I)  |                |   |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 12, column (B)). . . . |                |   |

**Part VIII Investments – Program Related** N/A  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment  | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|--|----------------|---|
| (1)  |                |   |
| (2)  |                |   |
| (3)  |                |   |
| (4)  |                |   |
| (5)  |                |   |
| (6)  |                |   |
| (7)  |                |   |
| (8)  |                |   |
| (9)  |                |   |
| (10)   |                |   |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 13, column (B)). . . . |                |   |

**Part IX Other Assets**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description  | (b) Book value |
|--|----------------|
| (1) CONSTRUCTION IN PROGRESS   | 133,076.       |
| (2) DUE FROM OTHER FUNDS   |                |
| (3)  |                |
| (4)  |                |
| (5)  |                |
| (6)  |                |
| (7)  |                |
| (8)  |                |
| (9)  |                |
| (10)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, column (B)). . . . . | 133,076.       |

**Part X Other Liabilities**  
 Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability  | (b) Book value |
|--|----------------|
| (1) Federal income taxes   |                |
| (2) COMPENSATED ABSENCES   | 22,530.        |
| (3) INTERFUND PAYABLES   | 22,000.        |
| (4) INVESTMENT IN AFFILIATE  | 2,562,778.     |
| (5) OTHER CURRENT LIABILITIES  | 204.           |
| (6) TENANT'S SECURITY DEPOSITS   | 4,800.         |
| (7)  |                |
| (8)  |                |
| (9)  |                |
| (10)   |                |
| (11)   |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, column (B)). . . . . | 2,612,312.     |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. . . . . **SEE PART XIII**

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** N/A

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

|   |   |           |  |           |  |
|---|---|-----------|--|-----------|--|
| 1 | Total revenue, gains, and other support per audited financial statements.....                       |           |  | <b>1</b>  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                                 |           |  |           |  |
|   | a Net unrealized gains (losses) on investments.....   | <b>2a</b> |  |           |  |
|   | b Donated services and use of facilities.....   | <b>2b</b> |  |           |  |
|   | c Recoveries of prior year grants.....  | <b>2c</b> |  |           |  |
|   | d Other (Describe in Part XIII.).....   | <b>2d</b> |  |           |  |
|   | e Add lines <b>2a</b> through <b>2d</b> .....   |           |  | <b>2e</b> |  |
| 3 | Subtract line <b>2e</b> from line 1.....  |           |  | <b>3</b>  |  |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                                |           |  |           |  |
|   | a Investment expenses not included on Form 990, Part VIII, line 7b.....                             | <b>4a</b> |  |           |  |
|   | b Other (Describe in Part XIII.).....   | <b>4b</b> |  |           |  |
|   | c Add lines <b>4a</b> and <b>4b</b> .....   |           |  | <b>4c</b> |  |
| 5 | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)..... |           |  | <b>5</b>  |  |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return** N/A

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

|   |  |           |  |           |  |
|---|--|-----------|--|-----------|--|
| 1 | Total expenses and losses per audited financial statements.....                                      |           |  | <b>1</b>  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25:                                    |           |  |           |  |
|   | a Donated services and use of facilities.....  | <b>2a</b> |  |           |  |
|   | b Prior year adjustments.....  | <b>2b</b> |  |           |  |
|   | c Other losses.....  | <b>2c</b> |  |           |  |
|   | d Other (Describe in Part XIII.).....  | <b>2d</b> |  |           |  |
|   | e Add lines <b>2a</b> through <b>2d</b> .....  |           |  | <b>2e</b> |  |
| 3 | Subtract line <b>2e</b> from line 1.....   |           |  | <b>3</b>  |  |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1:                                   |           |  |           |  |
|   | a Investment expenses not included on Form 990, Part VIII, line 7b.....                              | <b>4a</b> |  |           |  |
|   | b Other (Describe in Part XIII.).....  | <b>4b</b> |  |           |  |
|   | c Add lines <b>4a</b> and <b>4b</b> .....  |           |  | <b>4c</b> |  |
| 5 | Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)..... |           |  | <b>5</b>  |  |

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X - FASB ASC 740 FOOTNOTE**

CHAC FOLLOWS THE PROVISIONS OF ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE CODIFICATION. THE CODIFICATION REQUIRES THE EVALUATION OF TAX POSITIONS, WHICH INCLUDES MAINTAINING ITS TAX-EXEMPT STATUS AND THE TAXABILITY OF ANY UNRELATED BUSINESS INCOME, AND DOES NOT ALLOW RECOGNITION OF TAX POSITIONS WHICH DO NOT MEET A "MORE-LIKELY-THAN-NOT" THRESHOLD OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. MANAGEMENT DOES NOT BELIEVE IT HAS TAKEN ANY TAX POSITIONS THAT WOULD NOT MEET THIS THRESHOLD. CHAC'S INCOME TAX RETURNS ARE SUBJECT

**Part XIII** Supplemental Information *(continued)***PART X - FASB ASC 740 FOOTNOTE (CONTINUED)**

TO POSSIBLE FEDERAL EXAMINATION, GENERALLY FOR THREE YEARS AFTER THEY ARE FILED.

SIGNIFICANT MANAGEMENT JUDGMENT IS REQUIRED IN DETERMINING UNCERTAIN TAX POSITIONS. WHILE THE COUNCIL BASES ITS ESTIMATES ON HISTORICAL EXPERIENCE AND VARIOUS OTHER ASSUMPTIONS THAT MANAGEMENT BELIEVES TO BE REASONABLE UNDER THE CIRCUMSTANCES, ACTUAL RESULTS MAY DIFFER FROM THESE ESTIMATES, AND, AS A RESULT, COULD HAVE A MATERIAL IMPACT ON THE FINANCIAL POSITION.

**SCHEDULE O  
(Form 990)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.

**2023**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

Employer identification number

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

**FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.**

DJ VANGORDER & GARRY VANGORDER ARE BROTHERS.

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

A DRAFT COPY OF FORM 990 IS REVIEWED BY MANAGEMENT AND THE BOARD OF DIRECTORS PRIOR TO FILING.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THE ORGANIZATION'S GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST.

**FORM 990, PART XI, LINE 9  
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

|   |    |                 |
|---|----|-----------------|
| ADJUSTMENT OF PARTNERSHIP INTEREST..... | \$ | -43,923.        |
| TOTAL                                   | \$ | <u>-43,923.</u> |

**SCHEDULE R**  
**(Form 990)**

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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public Inspection**

Name of the organization

CORTLAND HOUSING ASSISTANCE COUNCIL

Employer identification number

16-1130177

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a)<br>Name, address, and EIN (if applicable) of disregarded entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling entity |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
| (1) -----<br>-----<br>-----<br>-----<br>-----                       |                         |  |                     |                           |                                  |
| (2) -----<br>-----<br>-----<br>-----<br>-----                       |                         |  |                     |                           |                                  |
| (3) -----<br>-----<br>-----<br>-----<br>-----                       |                         |  |                     |                           |                                  |

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Sec 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------|---|----------------------------------|--|----|
|   |                         |  |                            |   |                                  | Yes                                      | No |
| (1) -----<br>-----<br>-----<br>-----<br>-----         |                         |  |                            |   |                                  |  |    |
| (2) -----<br>-----<br>-----<br>-----<br>-----         |                         |  |                            |   |                                  |  |    |
| (3) -----<br>-----<br>-----<br>-----<br>-----         |                         |  |                            |   |                                  |  |    |
| (4) -----<br>-----<br>-----<br>-----<br>-----         |                         |  |                            |   |                                  |  |    |

**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.

| (a)<br>Name, address, and EIN of related organization                                      | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disproportionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>General or managing partner? |    | (k)<br>Percentage ownership |
|--|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
|  |                         |  |                                  |  |                              |                                    | Yes                                  | No |  | Yes                                 | No |                             |
| SEE PART VII<br>(1) POMEROY SCHOOL A<br>36 TAYLOR STREET<br>CORTLAND, NY 130<br>45-3249163 | RENTAL                  | NY   | N/A                              | 0.   | 0.                           |                                    |                                      | X  | N/A  | X                                   |    | 98.00                       |
| (2) -----  |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |
| (3) -----  |                         |  |                                  |  |                              |                                    |                                      |    |  |                                     |    |                             |

**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)<br>Name, address, and EIN of related organization                                   | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Direct controlling entity | (e)<br>Type of entity (C corp, S corp, or trust) | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Percentage ownership | (i)<br>Sec 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------------|--|------------------------------|------------------------------------|-----------------------------|--|----|
|   |                         |  |                                  |  |                              |                                    |                             | Yes                                      | No |
| (1) POMEROY SCHOOL PROJECT, INC<br>36 TAYLOR AVENUE<br>CORTLAND, NY 13045<br>16-1435592 | RENTALS                 | NY   | N/A                              | C CORP   | 0.                           | 0.                                 | 100.00                      |  | X  |
| (2) -----   |                         |  |                                  |  |                              |                                    |                             |  |    |
| (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.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity.....
- b** Gift, grant, or capital contribution to related organization(s).....
- c** Gift, grant, or capital contribution from related organization(s).....
- d** Loans or loan guarantees to or for related organization(s).....
- e** Loans or loan guarantees by related organization(s).....
- f** Dividends from related organization(s).....
- g** Sale of assets to related organization(s).....
- h** Purchase of assets from related organization(s).....
- i** Exchange of assets with related organization(s).....
- j** Lease of facilities, equipment, or other assets to related organization(s).....
- k** Lease of facilities, equipment, or other assets from related organization(s).....
- l** Performance of services or membership or fundraising solicitations for related organization(s).....
- m** Performance of services or membership or fundraising solicitations by related organization(s).....
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).....
- o** Sharing of paid employees with related organization(s).....
- p** Reimbursement paid to related organization(s) for expenses.....
- q** Reimbursement paid by related organization(s) for expenses.....
- r** Other transfer of cash or property to related organization(s).....
- s** Other transfer of cash or property from related organization(s).....

|            | Yes | No |
|------------|-----|----|
| <b>1 a</b> |     | X  |
| <b>1 b</b> |     | X  |
| <b>1 c</b> |     | X  |
| <b>1 d</b> |     | X  |
| <b>1 e</b> |     | X  |
| <b>1 f</b> |     | X  |
| <b>1 g</b> |     | X  |
| <b>1 h</b> |     | X  |
| <b>1 i</b> |     | X  |
| <b>1 j</b> |     | X  |
| <b>1 k</b> |     | X  |
| <b>1 l</b> |     | X  |
| <b>1 m</b> |     | X  |
| <b>1 n</b> |     | X  |
| <b>1 o</b> |     | X  |
| <b>1 p</b> |     | X  |
| <b>1 q</b> |     | X  |
| <b>1 r</b> |     | X  |
| <b>1 s</b> |     | X  |

**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.

|     | (a)<br>Name of related organization | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-----|-------------------------------------|-------------------------------|------------------------|--|
| (1) |                                     |                               |                        |  |
| (2) |                                     |                               |                        |  |
| (3) |                                     |                               |                        |  |
| (4) |                                     |                               |                        |  |
| (5) |                                     |                               |                        |  |
| (6) |                                     |                               |                        |  |

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

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

| (a)<br>Name, address, and EIN of entity | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e)<br>Are all partners section 501(c)(3) organizations? |    | (f)<br>Share of total income | (g)<br>Share of end-of-year assets | (h)<br>Disproportionate allocations? |    | (i)<br>Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j)<br>General or managing partner? |    | (k)<br>Percentage ownership |
|---|-------------------------|--|--|--|----|------------------------------|------------------------------------|--------------------------------------|----|--|-------------------------------------|----|-----------------------------|
|   |                         |  |  | Yes  | No |                              |                                    | Yes                                  | No |  | Yes                                 | No |                             |
| (1) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (2) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (3) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (4) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (5) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (6) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (7) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |
| (8) -----<br>-----<br>-----<br>-----    |                         |  |  |  |    |                              |                                    |                                      |    |  |                                     |    |                             |

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

---

**PART III - PARTNERSHIP FULL NAME, ADDRESS, FEIN**

POMEROY SCHOOL APARTMENTS, LP      45-3249163      36 TAYLOR STREET      CORTLAND, NY  
13045

**BALANCE SHEET  
MORTGAGES AND OTHER NOTES PAYABLE [O]**

|                    |          |                 |
|--------------------|----------|-----------------|
| MAPLE AVENUE ..... | \$       | 150,000.        |
| TAYLOR ST.....     |          | 19,862.         |
| MAPLE AVENUE ..... |          | 584,228.        |
|                    | TOTAL \$ | <u>754,090.</u> |

CORTLAND HOUSING ASSISTANCE COUNCIL

| NO.                   | DESCRIPTION             | DATE ACQUIRED | DATE SOLD | COST/<br>BASIS | BUS.<br>PCT. | CUR<br>179<br>BONUS | SPECIAL<br>DEPR.<br>ALLOW. | PRIOR<br>179/<br>BONUS/<br>SP. DEPR. | PRIOR<br>DEC. BAL<br>DEPR. | SALVAG<br>/BASIS<br>REDUCT. | DEPR.<br>BASIS | PRIOR<br>DEPR. | METHOD | LIFE | RATE | CURRENT<br>DEPR. |         |         |        |
|-----------------------|-------------------------|---------------|-----------|----------------|--------------|---------------------|----------------------------|--------------------------------------|----------------------------|-----------------------------|----------------|----------------|--------|------|------|------------------|---------|---------|--------|
| FORM 990/990-PF       |                         |               |           |                |              |                     |                            |                                      |                            |                             |                |                |        |      |      |                  |         |         |        |
| 18-20 MAPLE AVE       |                         |               |           |                |              |                     |                            |                                      |                            |                             |                |                |        |      |      |                  |         |         |        |
| 51                    | 18-20 MAPLE AVE         | 10/28/99      |           | 25,000         |              |                     |                            |                                      |                            |                             | 25,000         |                |        |      |      | 0                |         |         |        |
| 52                    | AQUISITION PRICE        | 10/28/99      |           | 117,344        |              |                     |                            |                                      |                            |                             | 117,344        | 93,874         | S/L    | 27.5 |      | 4,267            |         |         |        |
| 53                    | CAPITALIZED LEGAL COSTS | 6/30/00       |           | 3,987          |              |                     |                            |                                      |                            |                             | 3,987          | 3,190          | S/L    | 27.5 |      | 145              |         |         |        |
| 54                    | ENGINEERING             | 6/30/00       |           | 36,409         |              |                     |                            |                                      |                            |                             | 36,409         | 29,128         | S/L    | 27.5 |      | 1,324            |         |         |        |
| 55                    | IMPROVEMENTS            | 6/30/00       |           | 255,485        |              |                     |                            |                                      |                            |                             | 255,485        | 204,381        | S/L    | 27.5 |      | 9,290            |         |         |        |
| 56                    | BUILDING IMPROVEMENT    | 1/01/01       |           | 228,721        |              |                     |                            |                                      |                            |                             | 228,721        | 182,974        | S/L    | 27.5 |      | 8,317            |         |         |        |
| 58                    | BUILDING IMPROVEMENTS   | 1/01/02       |           | 45,291         |              |                     |                            |                                      |                            |                             | 45,291         | 36,234         | S/L    | 27.5 |      | 1,647            |         |         |        |
| 59                    | BUILDING IMPROVEMENTS   | 1/01/02       |           | 3,202          |              |                     |                            |                                      |                            |                             | 3,202          | 2,552          | S/L    | 27.5 |      | 116              |         |         |        |
| 60                    | FOUNDATION REPAIR       | 10/03/04      |           | 2,560          |              |                     |                            |                                      |                            |                             | 2,560          | 1,744          | S/L    | 27.5 |      | 93               |         |         |        |
| 64                    | CARPETING               | 7/18/07       |           | 377            |              |                     |                            |                                      |                            |                             | 377            | 377            | S/L    | 5    |      | 0                |         |         |        |
| 66                    | PARKING LOT REPAIR      | 9/25/09       |           | 1,000          |              |                     |                            |                                      |                            |                             | 1,000          | 921            | S/L    | 15   |      | 67               |         |         |        |
| 67                    | STAIR TOWER             | 5/28/10       |           | 1,000          |              |                     |                            |                                      |                            |                             | 1,000          | 471            | S/L    | 27.5 |      | 36               |         |         |        |
| 68                    | HOT WATER HEATER        | 3/24/11       |           | 3,450          |              |                     |                            |                                      |                            |                             | 3,450          | 3,450          | S/L    | 7    |      | 0                |         |         |        |
| 71                    | ROOF REPAIRS            | 12/20/16      |           | 4,448          |              |                     |                            |                                      |                            |                             | 4,448          | 1,053          | S/L    | 27.5 |      | 162              |         |         |        |
| 73                    | STAIR TOWER             | 3/26/18       |           | 12,249         |              |                     |                            |                                      |                            |                             | 12,249         | 2,336          | S/L    | 27.5 |      | 445              |         |         |        |
| 88                    | PARKING LOT             | 6/30/21       |           | 6,000          |              |                     |                            |                                      |                            |                             | 6,000          | 800            | S/L    | 15   |      | 400              |         |         |        |
| 92                    | WASHER & DRYERS         | 4/15/22       |           | 1,500          |              |                     |                            |                                      |                            |                             | 1,500          | 375            | S/L    | 5    |      | 300              |         |         |        |
| 93                    | WASHING MACHING         | 5/01/24       |           | 2,511          |              |                     |                            |                                      |                            |                             | 2,511          |                | S/L    | 5    |      | 84               |         |         |        |
| TOTAL 18-20 MAPLE AVE |                         |               |           |                |              |                     |                            |                                      |                            |                             | 750,534        | 0              | 0      | 0    | 0    | 0                | 750,534 | 563,860 | 26,693 |

DHCR

CORTLAND HOUSING ASSISTANCE COUNCIL

16-1130177

| NO.          | DESCRIPTION              | DATE ACQUIRED | DATE SOLD | BUS. PCT. | CUR 179 BONUS | SPECIAL DEPR. ALLOW. | PRIOR 179 BONUS/SP. DEPR. | PRIOR DEC. BAL DEPR. | SALVAG /BASIS REDUCT. | DEPR. BASIS | PRIOR DEPR. | METHOD | LIFE | RATE | CURRENT DEPR. |
|--------------|--------------------------|---------------|-----------|-----------|---------------|----------------------|---------------------------|----------------------|-----------------------|-------------|-------------|--------|------|------|---------------|
| 45           | IBM TYPEWRITER           | 10/01/85      | 7/01/23   |           | 916           |                      |                           |                      |                       | 916         | 916         | S/L    | 5    |      | 0             |
| 46           | LUCENT PHONE SYSTEM      | 6/30/00       |           |           | 3,050         |                      |                           |                      |                       | 3,050       | 3,050       | S/L    | 5    |      | 0             |
| 47           | DIGITAL CAMERA           | 6/30/00       | 7/01/23   |           | 903           |                      |                           |                      |                       | 903         | 903         | S/L    | 5    |      | 0             |
| 48           | NEXTELL CELL PHONE       | 6/30/00       | 7/01/23   |           | 351           |                      |                           |                      |                       | 351         | 351         | S/L    | 5    |      | 0             |
| 49           | SOFTWARE                 | 6/30/00       | 7/01/23   |           | 310           |                      |                           |                      |                       | 310         | 310         | S/L    | 5    |      | 0             |
| 50           | TRANSCRIBER AND RECORDER | 6/30/00       | 7/01/23   |           | 287           |                      |                           |                      |                       | 287         | 287         | S/L    | 7    |      | 0             |
| TOTAL DHCR   |                          |               |           |           |               |                      |                           |                      |                       |             |             |        |      |      |               |
| GENERAL FUND |                          |               |           |           |               |                      |                           |                      |                       |             |             |        |      |      |               |
| -----        |                          |               |           |           |               |                      |                           |                      |                       |             |             |        |      |      |               |
| 1            | COPIER @ PSA             | 6/30/88       | 7/01/23   |           | 3,283         |                      |                           |                      |                       | 3,283       | 3,283       | S/L    | 7    |      | 0             |
| 2            | OFFICE EQUIPMENT         | 6/30/89       |           |           | 143           |                      |                           |                      |                       | 143         | 143         | S/L    | 7    |      | 0             |
| 3            | FAX MACHINE              | 3/01/91       | 7/01/23   |           | 960           |                      |                           |                      |                       | 960         | 960         | S/L    | 7    |      | 0             |
| 4            | SMC TYPEWRITER @PSA      | 10/01/90      | 7/01/23   |           | 86            |                      |                           |                      |                       | 86          | 86          | S/L    | 7    |      | 0             |
| 5            | MARILYN'S COMPUTER       | 4/01/91       | 7/01/23   |           | 3,857         |                      |                           |                      |                       | 3,857       | 3,857       | S/L    | 7    |      | 0             |
| 6            | SHAWNA'S DESK            | 7/01/91       |           |           | 329           |                      |                           |                      |                       | 329         | 329         | S/L    | 7    |      | 0             |
| 7            | GARY'S DESK              | 12/14/93      |           |           | 625           |                      |                           |                      |                       | 625         | 625         | S/L    | 7    |      | 0             |
| 8            | 2 COMP / 3 PRINTERS      | 4/30/99       | 7/01/23   |           | 4,125         |                      |                           |                      |                       | 4,125       | 4,125       | S/L HY | 5    |      | 0             |
| 9            | LAPTOP COMP: CHDO\$      | 4/30/99       | 7/01/23   |           | 1,500         |                      |                           |                      |                       | 1,500       | 1,500       | S/L HY | 5    |      | 0             |
| 10           | FILE CABINETS            | 9/30/98       |           |           | 428           |                      |                           |                      |                       | 428         | 428         | S/L HY | 7    |      | 0             |
| 11           | COPIER                   | 8/31/00       | 7/01/23   |           | 4,882         |                      |                           |                      |                       | 4,882       | 4,882       | S/L HY | 7    |      | 0             |
| 12           | TOOLS                    | 5/05/82       |           |           | 1,582         |                      |                           |                      |                       | 1,582       | 1,582       | PRE    | 5    |      | 0             |
| 13           | DRILL                    | 10/10/84      |           |           | 133           |                      |                           |                      |                       | 133         | 133         | S/L    | 5    |      | 0             |
| 14           | TOOLS                    | 5/13/87       |           |           | 291           |                      |                           |                      |                       | 291         | 291         | S/L    | 7    |      | 0             |
| 15           | TOOLS                    | 5/13/87       |           |           | 218           |                      |                           |                      |                       | 218         | 218         | S/L    | 7    |      | 0             |
| 16           | TELEPHONE                | 6/02/82       |           |           | 561           |                      |                           |                      |                       | 561         | 561         | PRE    | 5    |      | 0             |
| 17           | VACUUM                   | 11/03/82      | 7/01/23   |           | 100           |                      |                           |                      |                       | 100         | 100         | PRE    | 5    |      | 0             |

CORTLAND HOUSING ASSISTANCE COUNCIL

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|-----|----------------------|---------------|-----------|----------------|--------------|----------------------|----------------------------|--------------------------------------|----------------------------|-----------------------------|----------------|----------------|--------|------|------|------------------|
| 18  | EQUIPMENT            | 1/31/87       |           | 1,939          |              |                      |                            |                                      |                            |                             | 1,939          | 1,939          | S/L    | 5    |      | 0                |
| 19  | EQUIPMENT            | 1/31/88       |           | 356            |              |                      |                            |                                      |                            |                             | 356            | 356            | S/L    | 7    |      | 0                |
| 20  | EQUIPMENT            | 6/30/88       |           | 1,594          |              |                      |                            |                                      |                            |                             | 1,594          | 1,594          | S/L    | 7    |      | 0                |
| 21  | EQUIPMENT            | 6/30/89       |           | 1,693          |              |                      |                            |                                      |                            |                             | 1,693          | 1,693          | S/L    | 7    |      | 0                |
| 22  | TRIMMER              | 6/30/90       |           | 270            |              |                      |                            |                                      |                            |                             | 270            | 270            | S/L    | 7    |      | 0                |
| 23  | LAWN TRIMMER         | 6/30/92       | 7/01/23   | 488            |              |                      |                            |                                      |                            |                             | 488            | 488            | S/L    | 7    |      | 0                |
| 24  | CARPET SHAMPOO MACH  | 8/06/93       | 7/01/23   | 1,599          |              |                      |                            |                                      |                            |                             | 1,599          | 1,599          | S/L    | 7    |      | 0                |
| 25  | EDGER                | 8/18/95       | 7/01/23   | 253            |              |                      |                            |                                      |                            |                             | 253            | 253            | 200DB  | HY   | 7    | 0                |
| 26  | SNOW BLOWER          | 1/29/96       |           | 1,259          |              |                      |                            |                                      |                            |                             | 1,259          | 1,259          | 200DB  | HY   | 7    | 0                |
| 27  | LAWN MOWER           | 7/31/96       | 7/01/23   | 140            |              |                      |                            |                                      |                            |                             | 140            | 140            | S/L    | HY   | 7    | 0                |
| 28  | PUMP JACKS           | 8/31/96       |           | 125            |              |                      |                            |                                      |                            |                             | 125            | 125            | S/L    | HY   | 7    | 0                |
| 29  | SICKLEBAR MOWER      | 6/30/97       | 7/01/23   | 1,500          |              |                      |                            |                                      |                            |                             | 1,500          | 1,500          | S/L    | HY   | 7    | 0                |
| 30  | LAWN MOWER           | 7/31/97       | 7/01/23   | 150            |              |                      |                            |                                      |                            |                             | 150            | 150            | S/L    | HY   | 7    | 0                |
| 31  | WEDEATER             | 7/31/97       |           | 343            |              |                      |                            |                                      |                            |                             | 343            | 343            | S/L    | HY   | 7    | 0                |
| 32  | GAS WASHER           | 7/31/97       | 7/01/23   | 382            |              |                      |                            |                                      |                            |                             | 382            | 382            | S/L    | HY   | 7    | 0                |
| 33  | LAWN MOWER           | 8/31/97       | 7/01/23   | 140            |              |                      |                            |                                      |                            |                             | 140            | 140            | S/L    | HY   | 7    | 0                |
| 34  | COMPRESSOR NAIL GUN  | 1/31/98       |           | 572            |              |                      |                            |                                      |                            |                             | 572            | 572            | S/L    | HY   | 7    | 0                |
| 35  | FULL ROUND HEAD SAW  | 2/28/98       |           | 318            |              |                      |                            |                                      |                            |                             | 318            | 318            | S/L    | HY   | 7    | 0                |
| 36  | TOOL BOX FS CHEVY PU | 4/30/98       |           | 272            |              |                      |                            |                                      |                            |                             | 272            | 272            | S/L    | HY   | 7    | 0                |
| 37  | BEDLINER 98 CHEVY PU | 5/30/98       | 7/01/23   | 214            |              |                      |                            |                                      |                            |                             | 214            | 214            | S/L    | HY   | 7    | 0                |
| 38  | TRUCK BED LINER      | 9/30/98       | 7/01/23   | 430            |              |                      |                            |                                      |                            |                             | 430            | 430            | S/L    | HY   | 7    | 0                |
| 39  | PLOW 98 FS PU        | 1/31/99       |           | 2,756          |              |                      |                            |                                      |                            |                             | 2,756          | 2,756          | S/L    | HY   | 7    | 0                |
| 40  | SOFTWARE             | 7/31/99       | 7/01/23   | 764            |              |                      |                            |                                      |                            |                             | 764            | 764            | S/L    | 5    |      | 0                |
| 41  | CELL PHONES          | 8/31/99       | 7/01/23   | 340            |              |                      |                            |                                      |                            |                             | 340            | 340            | S/L    | 5    |      | 0                |
| 42  | LAWN MOWER           | 4/30/01       |           | 1,316          |              |                      |                            |                                      |                            |                             | 1,316          | 1,316          | S/L    | HY   | 7    | 0                |
| 43  | MOWER                | 6/30/01       |           | 540            |              |                      |                            |                                      |                            |                             | 540            | 540            | S/L    | HY   | 7    | 0                |
| 44  | MOWER                | 6/30/01       |           | 449            |              |                      |                            |                                      |                            |                             | 449            | 449            | S/L    | HY   | 7    | 0                |

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|--------------------|-----------------------------|---------------|-----------|----------------|--------------|----------------------|----------------------------|--------------------------------------|----------------------------|------------------------------|----------------|----------------|--------|------|------|------------------|---|---|---|---|---|---------|---------|--|--|--------|
| 57                 | EMMIE'S DESK                | 3/15/02       |           | 552            |              |                      |                            |                                      |                            |                              | 552            |                | S/L    | 7    |      | 0                |   |   |   |   |   |         |         |  |  |        |
| 61                 | PULL BEHIND TRAILER W/GEN   | 11/23/04      |           | 3,535          |              |                      |                            |                                      |                            |                              | 3,535          |                | S/L    | 5    |      | 0                |   |   |   |   |   |         |         |  |  |        |
| 62                 | BUILDING-36 TAYLOR AVE      | 5/23/07       |           | 99,000         |              |                      |                            |                                      |                            |                              | 99,000         |                | S/L    | 39   |      | 2,538            |   |   |   |   |   |         |         |  |  |        |
| 63                 | CLOSING COSTS               | 5/23/07       |           | 2,708          |              |                      |                            |                                      |                            |                              | 2,708          |                | S/L    | 5    |      | 0                |   |   |   |   |   |         |         |  |  |        |
| 65                 | BUILDING RENOVATIONS        | 6/11/08       |           | 95,497         |              |                      |                            |                                      |                            |                              | 95,497         |                | S/L    | 39   |      | 2,449            |   |   |   |   |   |         |         |  |  |        |
| 69                 | COPIER                      | 6/02/14       |           | 2,595          |              |                      |                            |                                      |                            |                              | 2,595          |                | S/L    | 7    |      | 0                |   |   |   |   |   |         |         |  |  |        |
| 70                 | COMPUTERS                   | 12/01/15      |           | 3,645          |              |                      |                            |                                      |                            |                              | 3,645          |                | S/L    | 5    |      | 0                |   |   |   |   |   |         |         |  |  |        |
| 72                 | LAWN MOWER                  | 4/04/17       |           | 3,345          |              |                      |                            |                                      |                            |                              | 3,345          |                | S/L    | 7    |      | 358              |   |   |   |   |   |         |         |  |  |        |
| 74                 | ENGINEERING                 | 6/30/19       |           | 4,400          |              |                      |                            |                                      |                            |                              | 4,400          |                | S/L    | 39   |      | 113              |   |   |   |   |   |         |         |  |  |        |
| 75                 | BUILDING IMPROVEMENTS       | 6/30/19       |           | 32,200         |              |                      |                            |                                      |                            |                              | 32,200         |                | S/L    | 39   |      | 826              |   |   |   |   |   |         |         |  |  |        |
| 76                 | BUILDING IMPROVEMENTS       | 6/30/19       |           | 10,083         |              |                      |                            |                                      |                            |                              | 10,083         |                | S/L    | 39   |      | 259              |   |   |   |   |   |         |         |  |  |        |
| 77                 | BUILDING IMPROVEMENTS-DOORS | 6/30/19       |           | 4,340          |              |                      |                            |                                      |                            |                              | 4,340          |                | S/L    | 7    |      | 620              |   |   |   |   |   |         |         |  |  |        |
| 78                 | BUILDING IMPROVEMENTS       | 6/30/19       |           | 23,800         |              |                      |                            |                                      |                            |                              | 23,800         |                | S/L    | 39   |      | 610              |   |   |   |   |   |         |         |  |  |        |
| 79                 | BUILDING IMPROVEMENTS-RAMP  | 7/16/19       |           | 15,050         |              |                      |                            |                                      |                            |                              | 15,050         |                | S/L    | 39   |      | 386              |   |   |   |   |   |         |         |  |  |        |
| 80                 | BUILDING IMPROVEMENTS       | 7/23/19       |           | 26,500         |              |                      |                            |                                      |                            |                              | 26,500         |                | S/L    | 39   |      | 679              |   |   |   |   |   |         |         |  |  |        |
| 81                 | BUILDING IMPROVEMENTS-ROOF  | 8/30/19       |           | 32,800         |              |                      |                            |                                      |                            |                              | 32,800         |                | S/L    | 39   |      | 841              |   |   |   |   |   |         |         |  |  |        |
| 82                 | ENGINEERING                 | 8/21/19       |           | 12,400         |              |                      |                            |                                      |                            |                              | 12,400         |                | S/L    | 39   |      | 318              |   |   |   |   |   |         |         |  |  |        |
| 83                 | BUILDING IMPROVEMENTS-MASO  | 11/15/19      |           | 35,000         |              |                      |                            |                                      |                            |                              | 35,000         |                | S/L    | 39   |      | 897              |   |   |   |   |   |         |         |  |  |        |
| 84                 | BUILDING IMPROVEMENTS       | 10/01/19      |           | 3,500          |              |                      |                            |                                      |                            |                              | 3,500          |                | S/L    | 39   |      | 90               |   |   |   |   |   |         |         |  |  |        |
| 85                 | SIGNS                       | 3/18/20       |           | 1,147          |              |                      |                            |                                      |                            |                              | 1,147          |                | S/L    | 7    |      | 164              |   |   |   |   |   |         |         |  |  |        |
| 86                 | SOLAR                       | 6/30/20       |           | 15,510         |              |                      |                            |                                      |                            |                              | 15,510         |                | S/L    | 15   |      | 1,034            |   |   |   |   |   |         |         |  |  |        |
| 87                 | 2018 CHEVY SILVERADO        | 8/01/19       |           | 31,791         |              |                      |                            |                                      |                            |                              | 31,791         |                | S/L    | 7    |      | 4,542            |   |   |   |   |   |         |         |  |  |        |
| 89                 | SOLAR                       | 8/10/20       |           | 2,537          |              |                      |                            |                                      |                            |                              | 2,537          |                | S/L    | 15   |      | 169              |   |   |   |   |   |         |         |  |  |        |
| 90                 | ENGINEERING                 | 8/11/20       |           | 10,700         |              |                      |                            |                                      |                            |                              | 10,700         |                | S/L    | 39   |      | 274              |   |   |   |   |   |         |         |  |  |        |
| 91                 | BUILDING IMPROVEMENTS-MASO  | 8/18/20       |           | 14,000         |              |                      |                            |                                      |                            |                              | 14,000         |                | S/L    | 39   |      | 359              |   |   |   |   |   |         |         |  |  |        |
| TOTAL GENERAL FUND |                             |               |           |                |              |                      |                            |                                      |                            |                              |                | 529,940        | 0      | 0    | 0    | 0                | 0 | 0 | 0 | 0 | 0 | 529,940 | 182,772 |  |  | 17,526 |

CORTLAND HOUSING ASSISTANCE COUNCIL

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|-----|--------------------------|---------------|-----------|-----------|---------------|----------------------|---------------------------|----------------------|------------------------|-------------|-------------|--------|------|------|---------------|
|     | TOTAL DEPRECIATION       |               |           |           | 0             | 0                    | 0                         | 0                    | 0                      | 1,286,291   | 752,449     |        |      |      | 44,219        |
|     | GRAND TOTAL DEPRECIATION |               |           |           | 0             | 0                    | 0                         | 0                    | 0                      | 1,286,291   | 752,449     |        |      |      | 44,219        |
|     | DEPRECIATION ASSETS SOLD |               |           |           | 0             | 0                    | 0                         | 0                    | 0                      | 27,960      | 27,960      |        |      |      | 0             |
|     | DEPR REMAINING ASSETS    |               |           |           | 0             | 0                    | 0                         | 0                    | 0                      | 1,258,331   | 724,489     |        |      |      | 44,219        |



## Homes and Community Renewal

KATHY HOCHUL  
Governor

RUTHANNE VISNAUSKAS  
Commissioner/CEO

March 18, 2025

Shawna Grinnell  
Cortland Housing Assistance Council Inc.  
36 Taylor St  
Cortland, NY 13045

Project ID: 20240329  
Project Name: River Street Senior Apartments

Dear Shawna:

New York State Homes & Community Renewal (HCR) has reviewed your application submitted under the HCR 2024 Multifamily Finance 9% Request for Proposals issued in July 2024.

Subject to authorization by the Housing Trust Fund Corporation (HTFC) Board of Directors, HCR has approved awards of up to \$1,022,830 of Low-Income Housing Tax Credit (9% LIHTC), \$301,106 of NYS Low-Income Housing Tax Credit (SLIHC), \$6,535,000 of Senior Housing Program (SENR) to assist 53 affordable residential units.

A LIHTC and SLIHC Reservation Letter and a HTFC Funding Commitment Letter will be issued to you outlining all the terms, conditions and requirements necessary to complete your project. Please be advised that activities funded under this proposal are subject to availability of State and/or federal appropriations and may not be initiated until an environmental review has been conducted.

An HCR project manager will contact you shortly to arrange a Project Development meeting to review specific issues concerning your project and to finalize a development timetable.

As a condition of your award, be advised that your project is subject to the provisions set forth in the attached HCR Media Guidance. Please contact your HCR project manager if you have any questions regarding this guidance.

On behalf of HCR, I commend you for your efforts in revitalizing our communities and providing affordable housing opportunities for our fellow New Yorkers. We look forward to working with you on the successful implementation of your proposal.

Sincerely,

RuthAnne Visnauskas  
Commissioner/CEO

Cc: Alexa Sewell, Office of Multifamily Finance and Development  
Patrick Love, Office of Multifamily Finance and Development



## Office of Temporary and Disability Assistance

KATHY HOCHUL  
Governor

BARBARA C. GUINN  
Acting Commissioner

April 11, 2024

Shawna Grinnell  
Executive Director  
Cortland Housing Assistance Council  
36 Taylor St.  
Cortland, NY 13045

Re: HHAP# 2023-030

Dear Shawna Grinnell:

I am pleased to inform you that the Homeless Housing and Assistance Corporation (the "Corporation") has reserved up to \$2,016,423 for the development of the project proposed in your recent application for funding under the Homeless Housing and Assistance Program.

Please note that the reservation of this award does not constitute final approval of the proposed project design, the development and operating budgets, or any other aspect of your application. You may be requested to modify these items based on a review by staff of the Bureau of Housing and Support Services and the members of the Corporation. The disbursement of funds under this award will be contingent upon the execution of a contract between your organization and the Corporation. If the project is determined to be feasible at a cost lower than the amount reserved, the Corporation may reduce the award accordingly.

You will be receiving additional information regarding the contract development process from Michael Washburn of the Bureau of Housing and Support Services. You may be required to satisfy certain conditions before proceeding with contract negotiations. In the interim, should you have any questions, please feel free to contact Michael Washburn at (518) 408-6434.

Thank you for your efforts and commitment on behalf of New York's homeless. We look forward to working with you in this important endeavor.

Sincerely,

Barbara C. Guinn  
Acting Commissioner

## AFFORDABLE HOUSING PROGRAM DIRECT SUBSIDY AGREEMENT

This Affordable Housing Program ("AHP") Direct Subsidy Agreement ("AHP Agreement"), dated **August 27, 2025**, is between the Federal Home Loan Bank of New York ("FHLBNY"), NBT Bank, N.A. ("FHLBNY Member Financial Institution"), and **Cortland Housing Assistance Council** ("Sponsor").

WHEREAS, the parties are entering into this AHP Agreement in connection with **River Street Senior Apartments** ("Project"), as fully described in the AHP Application (defined below) submitted to the FHLBNY on **March 20, 2025** ("AHP Application Date").

WHEREAS, the FHLBNY has committed to issuing the FHLBNY Member Financial Institution a direct Subsidy in the amount of **\$1,300,000** ("AHP Subsidy") for the Project, which was approved by the Board of Directors of the FHLBNY on **August 21, 2025**, the effective date of this AHP Agreement.

The parties hereby agree as follows:

1. **AHP Application:** The FHLBNY Member Financial Institution and Sponsor shall comply with the terms and conditions governing the approval and funding of the AHP Application, including any and all representations in the AHP Application and any approved modifications to the Application.
2. **Regulations and Requirements:** The FHLBNY Member Financial Institution and Sponsor hereby acknowledge notice of and shall comply with the terms of:
  - A. The Federal Home Loan Bank Act, as may be amended (12 U.S.C. 1421 et seq.).
  - B. The AHP Regulations (12 C.F.R. Part 1291) and any other directives of the Federal Housing Finance Agency ("FHFA"), including, but not limited to, Advisory Bulletins, Regulatory Interpretations, etc., as may be amended, or the regulations in effect of any successor in interest to the FHFA. To the extent the AHP Regulations are inconsistent with any term or provision of this AHP Agreement, the AHP regulations shall control and govern the conduct and obligations of the parties.
  - C. The FHLBNY's AHP Implementation Plan ("Plan") and related policies, procedures, guidelines, and instructions, as may be amended ("FHLBNY AHP Requirements," and together with the Bank Act, the AHP Regulations, and the FHLBNY AHP Requirements, the "AHP Requirements").
3. **Standard of Conduct:** The Sponsor shall comply with the following standard of conduct:
  - A. The Sponsor shall ensure that the AHP Subsidy is used solely for the purposes set forth in the approved AHP Application and in accordance with this Agreement and the AHP Requirements. The Sponsor shall manage and utilize the Subsidy in an accountable and honest manner. The AHP Subsidy shall not be misappropriated, embezzled, misdirected, misused, lost or unaccounted for in any manner.
  - B. With respect to the Project, the Sponsor shall not, directly or indirectly, including through an agent or other intermediary, engage in corrupt, fraudulent, illegal practices or in covered misconduct, as that term is defined in 12 C.F.R. Part 1227.
  - C. The Sponsor shall comply with all applicable laws, regulations, and rules, including all civil and criminal laws, and the AHP Requirements.



January 20, 2026

Ms. Shawna Grinnell  
Cortland Housing Assistance Council, Inc.  
36 Taylor Avenue  
Cortland, NY 13045

Mr. Jason Sackett  
PathStone Development Corporation  
400 East Avenue  
Rochester, NY 14607

**Re: River Street Senior Apartments (the "Property")  
River Street Senior Apartments LLC (the "Company")**

Ms. Grinnell and Mr. Sackett:

This letter of intent (this "Letter of Intent") summarizes the principal business terms under which a CREA, LLC ("CREA") entity (sometimes referred to herein as the "Investor Member") will acquire an interest in the Company that will develop and operate the Property. The terms and conditions of the Investor Member's investment in the Property is subject to the execution of a mutually agreed upon Amended and Restated Operating Agreement (the "Operating Agreement") of the Company, and CREA's Capital Committee approval. Capitalized terms not otherwise defined herein will have the meanings set forth in the Operating Agreement.

**1) Property Information and Assumptions**

The Investor Member's willingness to acquire an interest in the Company is based upon the following information and assumptions. CREA reserves the right to update and adjust this Letter of Intent to reflect any changes in the following information and assumptions discovered during the due diligence and underwriting review.

- a) The Property is located at River Street, Cortland, New York, Cortland County, and will be rented to Seniors.

| UNITS |            |                 |             |        |
|-------|------------|-----------------|-------------|--------|
| Total | Affordable | Rental Assisted | Market Rate | Common |
| 53    | 53         | 12              | 0           | 0      |

**b) Participants**

|                        |  |
|------------------------|--|
| Managing Member:       | River Street Apartments Holding Company, LLC (0.0100%)   |
| Managing Member Owner: | Cortland Housing Assistance Council, Inc. (51.00%)<br>PathStone Development Corporation (49.00%) |
| Investor Member:       | CREA River Street Senior Apartments, LLC (99.9890%)  |

|                                |   |
|--------------------------------|---|
| Special Member:                | CREA SLP, LLC (0.001%)  |
| Developer:                     | Cortland Housing Assistance Council, Inc.   |
| Co-Developer:                  | PathStone Development Corporation   |
| General Contractor:            | Hueber-Breuer Construction Company  |
| Property Manager: <sup>1</sup> | Cortland Housing Assistance Council, Inc.   |
| LIHTC Compliance Consultant    | AJ Johnson  |
| LIHTC Consultant               | Edgemere Development, Inc.  |
|                                | Cortland Housing Assistance Council, Inc., and PathStone Development Corporation <sup>2</sup>   |
|                                | Edgemere Development, Inc. will provide guarantees from Closing through Receipt of 8609, subject to Section 6(a)  |
| Guarantors:                    | PathStone Housing Action Corporation will be added as a guarantor upon Receipt of 8609 through the duration of the Compliance Period, subject to Section 6(a) and Special Member approval |

c) Property Timeframe

|                               |              |
|-------------------------------|--------------|
| Closing Date:                 | April 2026   |
| Construction Completion Date: | April 2027   |
| Qualified Occupancy Date:     | October 2027 |
| Stabilized Operations Date:   | January 2028 |
| Receipt of 8609 Date:         | January 2028 |

d) Tax Credit Delivery and Pricing

The terms and conditions set forth in this Letter of Intent are based upon a financial model initially submitted to CREA. Prior to closing, CREA will underwrite your financial assumptions and prepare a final financial model which, if acceptable to the Managing Member, will be attached to the fully executed Operating Agreement (the "Financial Forecasts").

"Projected Tax Credits" means Tax Credits allocated by the Agency or generated by the Property.

The Financial Forecasts will reflect Capital Contributions calculated as follows:

<sup>1</sup> PathStone Management Corporation shall be responsible for initial lease-up of the Property

<sup>2</sup> Subject to Special Member review and approval, PathStone Housing Action Corporation may be added as a guarantor at Closing

**Federal LIHTC Equity**

**2025 Federal LIHTC Reservation** **\$10,227,175**

Investor Member Interest: 99.9890%

Credit Price: \$0.8000

|                                   |                    |
|-----------------------------------|--------------------|
| <b>Total Federal LIHTC Equity</b> | <b>\$8,181,740</b> |
|-----------------------------------|--------------------|

Total Federal Investor Member Capital Contributions \$8,181,740

CREA SLP, LLC Capital Contribution: \$100

**State Credit Proceeds**

**2025 State LIHTC Reservation** **\$3,011,060**

State Credit Purchaser Interest: 100%

Credit Price: \$0.7000

|                                   |                    |
|-----------------------------------|--------------------|
| <b>Total State LIHTC Proceeds</b> | <b>\$2,107,742</b> |
|-----------------------------------|--------------------|

The total Investor Member Equity assumes a fixed applicable percentage of 9.00% for the new construction Tax Credits. The Property qualifies for a 130.00% basis boost.

| <b>Federal Capital Contributions and Cash Developer Fee Payment Schedule</b> |                 |               |                              |                              |
|--|-----------------|---------------|------------------------------|------------------------------|
| Installment  | Date            | Condition     | Amount - %                   | Developer Fee - %            |
| <b>First</b>   | April 1, 2026   | Admission     | \$818,174 (10.00%)           | \$367,777 (19.02%)           |
| <b>Second</b>  | October 1, 2026 | 50% Complete  | \$818,174 (10.00%)           | \$0 (0.00%)                  |
| <b>Third</b>   | April 1, 2027   | 95% Complete  | \$818,174 (10.00%)           | \$0 (0.00%)                  |
| <b>Fourth</b>  | April 1, 2027   | Completion    | \$245,184 (3.00%)            | \$245,184 (12.68%)           |
| <b>Fifth</b>   | January 1, 2028 | Stabilization | \$5,236,582 (64.00%)         | \$1,075,318 (55.61%)         |
| <b>Sixth</b>   | January 1, 2028 | 8609 Receipt  | \$245,452 (3.00%)            | \$245,452 (12.69%)           |
| <b>Totals</b>  |                 |               | <b>\$8,181,740 (100.00%)</b> | <b>\$1,933,730 (100.00%)</b> |

| <b>Certificated State Credit Payment Schedule</b> |                 |               |                              |                            |
|---|-----------------|---------------|------------------------------|----------------------------|
| Installment                                       | Date            | Condition     | Amount - %                   | Developer Fee - %          |
| <b>First</b>                                      | January 1, 2028 | Stabilization | \$2,044,510 (97.00%)         | \$419,834 (86.91%)         |
| <b>Second</b>                                     | January 1, 2028 | Other         | \$63,232 (3.00%)             | \$63,232 (13.09%)          |
| <b>Totals</b>                                     |                 |               | <b>\$2,107,742 (100.00%)</b> | <b>\$483,067 (100.00%)</b> |

**Tax Credit Delivery**

| Year | Federal LIHTC         | Year | Federal LIHTC         | Year | Federal LIHTC      |
|------|-----------------------|------|-----------------------|------|--------------------|
| 2027 | \$521,007 (50.94%)    | 2032 | \$1,022,717 (100.00%) | 2037 | \$501,710 (49.06%) |
| 2028 | \$1,022,717 (100.00%) | 2033 | \$1,022,717 (100.00%) |      |                    |
| 2029 | \$1,022,717 (100.00%) | 2034 | \$1,022,717 (100.00%) |      |                    |
| 2030 | \$1,022,717 (100.00%) | 2035 | \$1,022,717 (100.00%) |      |                    |
| 2031 | \$1,022,717 (100.00%) | 2036 | \$1,022,717 (100.00%) |      |                    |

| Year | State LIHTC         | Year | State LIHTC         |
|------|---------------------|------|---------------------|
| 2028 | \$301,106 (100.00%) | 2033 | \$301,106 (100.00%) |
| 2029 | \$301,106 (100.00%) | 2034 | \$301,106 (100.00%) |
| 2030 | \$301,106 (100.00%) | 2035 | \$301,106 (100.00%) |
| 2031 | \$301,106 (100.00%) | 2036 | \$301,106 (100.00%) |
| 2032 | \$301,106 (100.00%) | 2037 | \$301,106 (100.00%) |

e) Upward Adjusters:

- 1) **Upward Timing Adjuster.** For each Tax Credit type, if the Actual Tax Credits are more than Projected Tax Credits prior to achievement of the full projected annual credit delivery, as modified by the Capital Adjuster(s), then the Investor Member's Capital Contribution will be increased by the amount of the Accelerated Tax Amount multiplied by the Tax Credit Adjuster Price below by credit type. The "Accelerated Credit Amount" will mean the amount of credits that are due in one year but accelerated to an earlier year. Such amounts will be payable from the Final Installment, and the maximum amount of the Upward Timing Adjuster is \$217,068.

| State LIHTC | Federal LIHTC |
|-------------|---------------|
| \$0.54      | \$0.69        |
| \$40,649    | \$176,419     |

Notwithstanding the foregoing, the Investor Member is not required to make additional Capital Contributions pursuant to this Section in excess of 5.00% of the total Investor Member Capital Contributions but may elect to contribute in excess of such amount in the Investor Member's sole discretion. For the sake of clarity, the Upward Adjust Cap applies to limit the additional Capital Contribution for each of the Tax Credit types individually and in the aggregate so that in no event will the Investor Member be required to contribute more than 5.00% of the total Capital Contributions unless it elects to do so in its sole discretion.

2) **Investor Member's Capital Contribution**

- a) The Investor Member will make Capital Contributions ("Capital Contributions") to the Company, in installments (each, an "Installment"), pursuant to the terms and conditions of the Operating Agreement. Each Installment is subject to CREA's receipt of: (i) a satisfactory AIA forms and general contractor lien waivers (during construction), (ii) a title continuation or title update, (iii) satisfactory evidence that the Property is In Balance, (iv) evidence that the conditions of all prior Installments have been satisfied and (iv) the Managing Member's certification that the representations and warranties contained in the Operating Agreement are true and correct as of the date of the Installment. Each Installment will be made within 10 business days of the receipt and satisfaction of all items listed below.

1:40 PM

04/08/26

Accrual Basis

**CHAC General Fund**  
**Balance Sheet/UnAudited**  
**As of March 31, 2026**

|  | Mar 31, 26           |
|--|----------------------|
| <b>ASSETS</b>                          |                      |
| <b>Current Assets</b>                  |                      |
| Checking/Savings                       |                      |
| 101-2 · NBT Bank General Fund          | 30,531.88            |
| 101 - Tompkins Trust GF                | 3,688.58             |
| <b>Total Checking/Savings</b>          | 34,220.46            |
| Accounts Receivable                    |                      |
| Due From Maple                         | 7,392.00             |
| 1200 · Accounts Receivable             | 1,132.48             |
| <b>Total Accounts Receivable</b>       | 8,524.48             |
| Other Current Assets                   |                      |
| 102 - Petty Cash                       | 50.00                |
| <b>Total Other Current Assets</b>      | 50.00                |
| <b>Total Current Assets</b>            | 42,794.94            |
| <b>Fixed Assets</b>                    |                      |
| Construction in Progress               | 115,714.51           |
| Building                               | 99,000.00            |
| Improvements                           | 339,463.38           |
| Closing Costs                          | 2,707.67             |
| -156 · -Equipment                      | 34,231.23            |
| 157 - AID Equipment                    | -164,199.33          |
| 158 - Vehicles                         | 31,791.00            |
| 165 - Office Equipment                 | 34,229.11            |
| 166 - AID Office Equipment             | -18,572.67           |
| <b>Total Fixed Assets</b>              | 474,364.90           |
| <b>Other Assets</b>                    |                      |
| 196 · Investment in Pomeroy            | -1,700,252.10        |
| 195 - Investment in Affiliate          | -818,603.00          |
| <b>Total Other Assets</b>              | -2,518,855.10        |
| <b>TOTAL ASSETS</b>                    | <b>-2,001,695.26</b> |
| <b>LIABILITIES &amp; EQUITY</b>        |                      |
| <b>Liabilities</b>                     |                      |
| <b>Current Liabilities</b>             |                      |
| Credit Cards                           |                      |
| Due to NBT Visa Card                   | 520.18               |
| <b>Total Credit Cards</b>              | 520.18               |
| Other Current Liabilities              |                      |
| 244 · River Street Line of Credit      | -6,423.43            |
| Accrued Vacation                       | 18,485.60            |
| due to DHCR                            | 527.36               |
| Due to 1st THB                         | -200.00              |
| Due to Pomeroy                         | 32,904.33            |
| 219 - Medicare Payable                 | 7,469.47             |
| 220 - Federal w/h                      | 39,480.75            |
| 221 - FICA payable                     | 31,945.94            |
| 222 - NYS w/h payable                  | 19,219.10            |
| <b>Total Other Current Liabilities</b> | 143,409.12           |
| <b>Total Current Liabilities</b>       | 143,929.30           |

1:40 PM  
04/08/26  
Accrual Basis

**CHAC General Fund**  
**Balance Sheet/UnAudited**  
**As of March 31, 2026**

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|                                       | <u>Mar 31, 26</u>           |
|---------------------------------------|-----------------------------|
| <b>Long Term Liabilities</b>          |                             |
| 242 · Alliance Bank Refinance         | 8,527.82                    |
| <b>Total Long Term Liabilities</b>    | <u>8,527.82</u>             |
| <b>Total Liabilities</b>              | 152,457.12                  |
| <b>Equity</b>                         |                             |
| 3500 · Pomeroy School Apts            | -2,476,089.39               |
| 105 · Net Assets-Unrest.              | -48,833.48                  |
| 3000 · Opening Bal Equity             | 13,000.00                   |
| 3900 · Retained Earnings              | 404,369.78                  |
| Net Income                            | -46,599.29                  |
| <b>Total Equity</b>                   | <u>-2,154,152.38</u>        |
| <b>TOTAL LIABILITIES &amp; EQUITY</b> | <u><u>-2,001,695.26</u></u> |

**SOURCES AND USES**

River Street Senior Housing  
3/17/2026

|                                |                  |            |                   |
|--------------------------------|------------------|------------|-------------------|
| 1 SITE ACQUISITION             |                  | 99,000     |                   |
| 2 CONSTRUCTION COST            |                  |            |                   |
| A. Residential                 | 15,996,519       |            |                   |
| B. Commercial/civic            | -                |            |                   |
|                                | Subtotal         | 15,996,519 |                   |
| 3 PROFESSIONAL SERVICES        |                  |            |                   |
| A. Architecture                | 700,000          |            |                   |
| B. Engineering                 | 166,850          |            |                   |
| C. Survey & soils              | 35,000           |            |                   |
| D. Legal fees                  | 80,000           |            |                   |
| E. Accounting                  | 30,000           |            |                   |
| F. Appraisal                   | 5,000            |            |                   |
| G. Market Study                | 15,000           |            |                   |
| H. Environmental               | 6,000            |            |                   |
| I. Miscellaneous               | 54,000           |            |                   |
|                                | Subtotal         | 1,091,850  |                   |
| 4 CARRYING & FINANCING CHARGES |                  |            |                   |
| A. Real estate tax             | 5,500            |            |                   |
| B. Financing fees              | 522,860          |            |                   |
| C. Construction interest       | 1,519,228        |            |                   |
| D. Title & recording           | 100,000          |            |                   |
| E. Insurance                   | 100,000          |            |                   |
| F. Administrative fees         | -                |            |                   |
| G. Miscellaneous               | 177,678          |            |                   |
|                                | Subtotal         | 2,425,266  |                   |
| 5 ESTIMATED DEVELOPMENT COST   |                  |            | <b>19,612,635</b> |
| 6 CONSTRUCTION CONTINGENCY     |                  | 799,826    |                   |
| 7 DEVELOPMENT FEE              |                  | 2,451,844  |                   |
| 8 WORKING CAPITAL              |                  | 85,250     |                   |
| 9 REPLACEMENT RESERVE          |                  | -          |                   |
| 10 OPERATING RESERVE           |                  | 212,817    |                   |
| 11 P&I RESERVE                 |                  | -          |                   |
| 12 ESCROWS                     |                  | -          |                   |
| 13 TOTAL PROJECT COST          |                  |            | <b>23,162,371</b> |
| <b>CONSTRUCTION SOURCES</b>    |                  |            |                   |
| Construction Loan              | 16,394,542       |            |                   |
| Misc                           | -                |            |                   |
| NYSHCR SENR                    | -                |            |                   |
| NYSERDA Solar Incentives       | -                |            |                   |
| NYSOTDA HHAP                   | 2,016,423        |            |                   |
| FUNDING GAP                    | -                |            |                   |
| FHLBNY                         | -                |            |                   |
| Misc                           | -                |            |                   |
| Misc                           | -                |            |                   |
| Misc                           | -                |            |                   |
| Misc                           | -                |            |                   |
| Misc                           | -                |            |                   |
| Misc                           | -                |            |                   |
| L.P. Equity                    | 2,454,522        |            |                   |
| Deferred Expenses              | 212,817          |            |                   |
| Deferred Development Fee       | 2,084,066        |            |                   |
| Total                          |                  |            | <b>23,162,370</b> |
| <b>PERMANENT SOURCES</b>       |                  |            |                   |
| Misc                           | -                |            |                   |
| NYSHCR SENR                    | 6,535,000        |            |                   |
| NYSERDA Solar Incentives       | 25,220           |            |                   |
| NYSOTDA HHAP                   | 2,016,423        |            |                   |
| <b>FUNDING GAP</b>             | <b>2,800,000</b> |            |                   |
| FHLBNY                         | 1,300,000        |            |                   |
| SLIHC Proceeds                 | 2,107,742        |            |                   |
| L.P. Equity                    | 8,181,740        |            |                   |
| Deferred Development Fee       | 196,246          |            |                   |
| Total                          |                  |            | <b>23,162,371</b> |

# 15 Year Operating Pro Forma (Residential)

Project Name: *River At Lemmon Apt*

## INSTRUCTIONS

Annual % Increase

YEAR OF OPERATION: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

| RESIDENTIAL INCOME         | 1         | 2         | 3         | 4         | 5         | 6         | 7         | 8         | 9         | 10        | 11        | 12        | 13        | 14        | 15        |
|----------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Tenant Rents               | 373,896   | 381,374   | 389,001   | 396,781   | 404,717   | 412,811   | 421,068   | 429,489   | 438,079   | 446,840   | 455,777   | 464,893   | 474,191   | 483,674   | 493,348   |
| Subtenant Rents            | 94,608    | 96,500    | 98,430    | 100,399   | 102,407   | 104,445   | 106,514   | 108,615   | 110,748   | 112,905   | 115,087   | 117,295   | 119,528   | 121,786   | 124,068   |
| Vacancy and Arrests        | -23,425   | -23,894   | -24,374   | -24,859   | -25,356   | -25,864   | -26,383   | -26,912   | -27,450   | -27,998   | -28,555   | -29,122   | -29,703   | -30,299   | -30,909   |
| Net Residential Income     | 445,079   | 453,080   | 461,060   | 469,060   | 477,124   | 485,253   | 493,446   | 501,703   | 510,025   | 518,413   | 526,866   | 535,384   | 543,966   | 552,612   | 561,322   |
| Architect Income (Specify) | 3,776     | 3,852     | 3,929     | 4,007     | 4,088     | 4,169     | 4,253     | 4,338     | 4,424     | 4,511     | 4,600     | 4,690     | 4,781     | 4,873     | 4,966     |
| Sublet Income (Specify)    | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Total Effective Income     | \$448,855 | \$457,932 | \$466,989 | \$476,067 | \$485,152 | \$494,253 | \$503,386 | \$512,550 | \$521,745 | \$530,972 | \$540,232 | \$549,526 | \$558,854 | \$568,217 | \$577,615 |

| ESTIMATE OF ANNUAL EXPENSE       | 1         | 2         | 3         | 4         | 5         | 6         | 7         | 8         | 9         | 10        | 11        | 12        | 13        | 14        | 15        |
|----------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Administration                   | 40,000    | 41,200    | 42,436    | 43,709    | 45,020    | 46,371    | 47,762    | 49,195    | 50,671    | 52,181    | 53,727    | 55,309    | 57,030    | 58,791    | 60,594    |
| Manager Fee                      | 35,000    | 36,310    | 37,646    | 39,017    | 40,424    | 41,867    | 43,346    | 44,861    | 46,402    | 47,979    | 49,592    | 51,241    | 52,926    | 54,647    | 56,404    |
| Management Fee                   | 13,000    | 13,380    | 13,782    | 14,205    | 14,649    | 15,114    | 15,599    | 16,104    | 16,629    | 17,174    | 17,749    | 18,344    | 18,959    | 19,594    | 20,249    |
| Accounting and Audit             | 1,000     | 1,040     | 1,081     | 1,123     | 1,166     | 1,210     | 1,255     | 1,301     | 1,348     | 1,395     | 1,443     | 1,491     | 1,540     | 1,589     | 1,639     |
| Legal                            | 1,500     | 1,545     | 1,591     | 1,638     | 1,686     | 1,735     | 1,784     | 1,834     | 1,884     | 1,935     | 1,986     | 2,037     | 2,089     | 2,141     | 2,194     |
| Advertising                      | 1,607     | 1,655     | 1,703     | 1,752     | 1,801     | 1,851     | 1,901     | 1,951     | 1,999     | 2,049     | 2,099     | 2,149     | 2,199     | 2,249     | 2,299     |
| Office Supplies & Equipment      | 5,755     | 5,929     | 6,107     | 6,289     | 6,474     | 6,662     | 6,853     | 7,047     | 7,243     | 7,441     | 7,641     | 7,843     | 8,047     | 8,253     | 8,461     |
| Other (Specify)                  | 11,797    | 12,151    | 12,515    | 12,891    | 13,277    | 13,674    | 14,082    | 14,501    | 14,931    | 15,372    | 15,824    | 16,287    | 16,761    | 17,246    | 17,741    |
| Total Administration             | \$109,297 | \$112,189 | \$115,191 | \$118,216 | \$121,267 | \$124,347 | \$127,456 | \$130,593 | \$133,760 | \$136,957 | \$140,184 | \$143,441 | \$146,728 | \$150,045 | \$153,392 |
| Maintenance and Operations       | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Junior and Cleaning Payroll      | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Janitor and Cleaning Supplies    | 4,020     | 4,141     | 4,265     | 4,393     | 4,526     | 4,660     | 4,800     | 4,944     | 5,092     | 5,246     | 5,403     | 5,565     | 5,732     | 5,904     | 6,081     |
| Exterminating                    | 6,583     | 6,781     | 6,984     | 7,194     | 7,409     | 7,632     | 7,861     | 8,097     | 8,339     | 8,587     | 8,841     | 9,099     | 9,362     | 9,630     | 9,899     |
| Garbage and Trash Removal        | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Security                         | 3,713     | 3,824     | 3,939     | 4,057     | 4,178     | 4,304     | 4,434     | 4,567     | 4,704     | 4,845     | 4,990     | 5,140     | 5,294     | 5,453     | 5,618     |
| Ground Expenses                  | 38,686    | 39,847    | 41,042    | 42,273    | 43,541    | 44,848    | 46,193    | 47,579    | 49,006    | 50,476    | 51,991    | 53,550    | 55,153    | 56,801    | 58,494    |
| Maintenance and Repair Payroll   | 33,000    | 34,050    | 35,130    | 36,240    | 37,380    | 38,550    | 39,750    | 41,000    | 42,280    | 43,590    | 44,930    | 46,300    | 47,700    | 49,130    | 50,590    |
| Maintenance and Repair Materials | 38,000    | 39,146    | 40,320    | 41,530    | 42,770    | 44,040    | 45,340    | 46,670    | 48,030    | 49,420    | 50,840    | 52,290    | 53,770    | 55,280    | 56,810    |
| Maintenance and Repair Contracts | 3,000     | 3,090     | 3,183     | 3,278     | 3,377     | 3,478     | 3,582     | 3,689     | 3,798     | 3,909     | 4,022     | 4,138     | 4,257     | 4,378     | 4,500     |
| Elevator                         | 3,000     | 3,060     | 3,123     | 3,188     | 3,255     | 3,324     | 3,395     | 3,468     | 3,543     | 3,619     | 3,697     | 3,776     | 3,857     | 3,939     | 4,022     |
| Snow Removal                     | 9,600     | 10,162    | 10,747    | 11,356    | 11,989    | 12,646    | 13,327    | 14,032    | 14,761    | 15,514    | 16,291    | 17,092    | 17,917    | 18,766    | 19,639    |
| Painting & Decorating            | 3,000     | 3,075     | 3,152     | 3,231     | 3,311     | 3,393     | 3,476     | 3,561     | 3,647     | 3,734     | 3,822     | 3,911     | 4,001     | 4,092     | 4,184     |
| Other (Specify)                  | 138,934   | 141,042   | 143,173   | 145,327   | 147,504   | 149,704   | 151,926   | 154,170   | 156,436   | 158,724   | 161,034   | 163,366   | 165,720   | 168,096   | 170,494   |
| Total M&O                        | \$138,934 | \$141,042 | \$143,173 | \$145,327 | \$147,504 | \$149,704 | \$151,926 | \$154,170 | \$156,436 | \$158,724 | \$161,034 | \$163,366 | \$165,720 | \$168,096 | \$170,494 |

| YEAR OF OPERATION:                      | 1         | 2         | 3         | 4         | 5         | 6         | 7         | 8         | 9         | 10        | 11        | 12        | 13        | 14        | 15        |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Utilities                               | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Fuel Oil                                | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Light/Electricity                       | 12,503    | 12,878    | 13,254    | 13,632    | 14,012    | 14,394    | 14,779    | 15,167    | 15,558    | 15,951    | 16,347    | 16,745    | 17,146    | 17,549    | 17,954    |
| Water and Sewer                         | 20,000    | 20,800    | 21,610    | 22,430    | 23,260    | 24,100    | 24,950    | 25,810    | 26,680    | 27,560    | 28,450    | 29,350    | 30,260    | 31,180    | 32,110    |
| Gas                                     | 2,940     | 2,719     | 2,801     | 2,885     | 2,971     | 3,059     | 3,152     | 3,247     | 3,344     | 3,445     | 3,548     | 3,654     | 3,764     | 3,877     | 3,993     |
| Other (Specify)                         | 535,143   | 536,187   | 537,233   | 538,281   | 539,331   | 540,383   | 541,437   | 542,493   | 543,551   | 544,611   | 545,673   | 546,737   | 547,803   | 548,871   | 549,941   |
| Total Utilities                         | 535,143   | 536,187   | 537,233   | 538,281   | 539,331   | 540,383   | 541,437   | 542,493   | 543,551   | 544,611   | 545,673   | 546,737   | 547,803   | 548,871   | 549,941   |
| Real Estate Taxes                       | 40,082    | 40,884    | 41,701    | 42,535    | 43,386    | 44,254    | 45,139    | 46,042    | 46,962    | 47,897    | 48,847    | 49,812    | 50,792    | 51,787    | 52,797    |
| Property Taxes (Specify)                | 23,608    | 24,314    | 25,043    | 25,795    | 26,569    | 27,365    | 28,183    | 29,022    | 29,882    | 30,763    | 31,665    | 32,588    | 33,531    | 34,494    | 35,466    |
| Other Taxes (Specify)                   | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Property and Liability Insurance        | 25,000    | 25,750    | 26,523    | 27,318    | 28,138    | 28,982    | 29,851    | 30,744    | 31,661    | 32,592    | 33,537    | 34,506    | 35,499    | 36,516    | 37,556    |
| Fidelity Bond Insurance                 | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Other Insurance (Specify)               | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Total Taxes and Insurance               | \$88,688  | \$90,948  | \$93,267  | \$95,648  | \$98,092  | \$100,601 | \$103,177 | \$105,821 | \$108,535 | \$111,321 | \$114,182 | \$117,119 | \$120,134 | \$123,229 | \$126,408 |
| Operating Reserve                       | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Replacement Reserve                     | 13,250    | 13,646    | 14,057    | 14,479    | 14,913    | 15,360    | 15,821    | 16,296    | 16,785    | 17,288    | 17,804    | 18,334    | 18,878    | 19,436    | 20,008    |
| Total Reserves                          | \$383,281 | \$394,023 | \$405,071 | \$416,438 | \$428,126 | \$440,139 | \$452,474 | \$465,133 | \$478,116 | \$491,424 | \$505,059 | \$519,021 | \$533,312 | \$547,931 | \$562,879 |
| Net Operating Income                    | \$65,574  | \$63,809  | \$62,117  | \$60,498  | \$58,954  | \$57,485  | \$56,091  | \$54,771  | \$53,524  | \$52,350  | \$51,248  | \$50,218  | \$49,260  | \$48,274  | \$47,261  |
| Debt Service                            | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    | 23,175    |
| Mandatory                               | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Percentage of Cash Flow                 | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Soft / Accrues                          | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Miscellaneous Debt (Specify)            | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Total Debt Service                      | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  | \$23,175  |
| Debt: Total                             | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      |
| Debt: Mandatory                         | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      | 2,60      |
| Debt: Other                             | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Net Cash Flow to Operating Reserve:     | \$40,399  | \$38,634  | \$36,942  | \$35,325  | \$33,746  | \$32,200  | \$30,685  | \$29,200  | \$27,744  | \$26,317  | \$24,928  | \$23,574  | \$22,254  | \$20,967  | \$19,716  |
| Other Cash Flow                         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         | 0         |
| Net Cash Flow                           | \$40,399  | \$38,634  | \$36,942  | \$35,325  | \$33,746  | \$32,200  | \$30,685  | \$29,200  | \$27,744  | \$26,317  | \$24,928  | \$23,574  | \$22,254  | \$20,967  | \$19,716  |
| 140X DSCR                               | \$28,656  | \$27,596  | \$26,544  | \$25,498  | \$24,457  | \$23,420  | \$22,388  | \$21,360  | \$20,336  | \$19,316  | \$18,300  | \$17,288  | \$16,280  | \$15,276  | \$14,276  |
| PV with a discount rate of 1.50%        | \$28,640  | \$28,786  | \$28,936  | \$29,090  | \$29,247  | \$29,407  | \$29,569  | \$29,733  | \$29,899  | \$30,067  | \$30,237  | \$30,409  | \$30,583  | \$30,759  | \$30,936  |
| Loan Size - using an LTV ratio of 82.5% | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  | \$11,641  |
| Operating Reserve                       | \$304,228 | \$306,270 | \$308,333 | \$310,416 | \$312,521 | \$314,646 | \$316,792 | \$318,960 | \$321,150 | \$323,361 | \$325,595 | \$327,851 | \$330,129 | \$332,431 | \$334,766 |
| Beginning Balance                       | \$2,042   | \$2,042   | \$2,042   |           |           |           |           |           |           |           |           |           |           |           |           |