

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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.

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: BURBANK HOUSING DEVELOPMENT CORPORATION
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address): 790 SONOMA AVENUE Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: SANTA ROSA, CA 95404

D Employer identification number: 94-2837785
E Telephone number: (707) 526-9782
G Gross receipts \$ 21,716,383

F Name and address of principal officer:
 LAWRANCE FLORIN
 790 SONOMA AVENUE
 SANTA ROSA, CA 95404

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)
H(c) Group exemption number ▶

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

J Website: ▶ BURBANKHOUSING.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1980 **M** State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 BURBANK HOUSING IS A LOCAL NON-PROFIT ORGANIZATION DEDICATED TO INCREASING THE SUPPLY OF HOUSING IN SONOMA COUNTY, SO THAT LOW-INCOME PEOPLE OF ALL AGES, BACKGROUNDS AND SPECIAL NEEDS WILL HAVE A BETTER OPPORTUNITY TO LIVE IN DECENT AND AFFORDABLE HOUSING. THE ORGANIZATION'S MOST SIGNIFICANT ACTIVITIES INCLUDE MANAGEMENT OF AFFORDABLE HOUSING, THE REHABILITATION OF EXISTING HOUSING AND THE DEVELOPMENT OF SELF-HELP HOMEOWNERSHIP HOUSING IN SONOMA COUNTY.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	29
6 Total number of volunteers (estimate if necessary)	6	13
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	10,586,514	944,897
9 Program service revenue (Part VIII, line 2g)	4,816,393	7,410,391
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	83,790	371,524
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	4,064,811
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,486,697	12,791,623
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	112,274	10,251
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	743,608	2,171,452
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 19,740		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,553,894	10,698,398
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,409,776	12,880,101
19 Revenue less expenses. Subtract line 18 from line 12	9,076,921	-88,478

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	56,729,050	83,348,147
21 Total liabilities (Part X, line 26)	27,493,030	54,036,573
22 Net assets or fund balances. Subtract line 21 from line 20	29,236,020	29,311,574

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.

 Signature of officer: _____ Date: 2020-11-13
 JEFFREY MOLINE CFO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00513747
Firm's name ▶ LINDQUIST VON HUSEN & JOYCE LLP			Firm's EIN ▶ 94-1250261	
Firm's address ▶ 301 HOWARD STREET SUITE 850 SAN FRANCISCO, CA 94105			Phone no. (415) 957-9999	

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:

BURBANK HOUSING IS A LOCAL NON-PROFIT ORGANIZATION DEDICATED TO BUILDING QUALITY AFFORDABLE HOUSING IN THE NORTH BAY. WE CREATE VIBRANT LOCAL COMMUNITIES THAT ARE CAREFULLY DESIGNED, PROFESSIONALLY MANAGED AND SUSTAINABLE, BOTH FINANCIALLY AND ENVIRONMENTALLY, TO FOSTER OPPORTUNITIES FOR PEOPLE WITH LIMITED INCOME ALL OF AGES, BACKGROUNDS AND SPECIAL NEEDS.

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 \$ 11,350,229 including grants of \$ 10,251) (Revenue \$ 11,475,202)
See Additional Data

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

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

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 11,350,229

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)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V		No
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.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
11c	Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
11d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	Yes	
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
12b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
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? If "Yes," complete Schedule F, Parts II and IV		No
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? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	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? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and controlled entities.

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 []

Table with 3 main columns: Question/Description, Yes, No. Rows include 1a (Form 1096), 1b (Forms W-2G), and 1c (gambling winnings).

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management control, governance changes, and meeting documentation.

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

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, written policies, conflict of interest, whistleblower, document retention, compensation, and joint ventures.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: THE ORGANIZATION 790 SONOMA AVENUE SANTA ROSA, CA 95404 (707) 526-9782

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See 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) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) 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) ELIZABETH LEHRER CHAIR	3.00 5.10	X		X				0	0	0
(2) BART VAN VOORHIS VICE CHAIR	3.00 5.40	X		X				0	0	0
(3) JON M STARK SECRETARY	3.00 5.10	X		X				0	0	0
(4) KIM AUGUST TREASURER	3.00 5.10	X		X				0	0	0
(5) WILLIAM W BOWMAN DIRECTOR	3.00 5.10	X						0	0	0
(6) ALEXANDER MALLONEE DIRECTOR	3.00 5.10	X						0	0	0
(7) STUART W MARTIN DIRECTOR	3.00 5.10	X						0	0	0
(8) DUANE HARTLEY DIRECTOR	3.00 5.40	X						0	0	0
(9) KOMRON SHAHHOSSEINI DIRECTOR	3.00 5.10	X						0	0	0
(10) NATE BELDEN DIRECTOR	3.00 5.10	X						0	0	0
(11) SHARON WRIGHT DIRECTOR	3.00 5.10	X						0	0	0
(12) TOMAS PHILLIPS DIRECTOR	3.00 5.10	X						0	0	0
(13) DOROTHY BEATTIE DIRECTOR	3.00 5.10	X						0	0	0
(14) ROBYN VAN EKELENBURG BROKER OF RECORD	25.00 17.40			X				36,428	0	0
(15) JEFFREY MOLINE CFO	25.00 17.40			X				159,753	0	6,780
(16) LAWRENCE FLORIN CEO	25.00 17.40			X				225,143	0	17,362
(17) KAREN MASSEY PROJECT MANAGER	29.00					X		247,760	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LARRY BOUGHTON CONSTRUCTION MANAGER	40.00					X		129,861	0	32,399
(19) LAURIE L HOAN DIR. OF COMMUNITY ENGAGEMENT	40.00					X		122,858	0	8,047
(20) RICHARD WALLACH DIR. OF DEVELOPMENT	40.00					X		113,389	0	15,802
(21) VOLKER STRIFLER CONSTRUCTION MANAGER	40.00					X		108,674	0	13,820
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)								1,143,866	0	94,210

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 ▶ 9

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
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>	Yes	
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>		No

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) Name and business address	(B) Description of services	(C) Compensation
PYATOK ASSOCIATES INC 1611 TELEGRAPH AVENUE STE 200 OAKLAND, CA 94612	ARCHITECT	272,690
BKF ENGINEERS 255 SHORELINE DRIVE STE 200 REDWOOD CITY, CA 94065	ENGINEER	223,266
WOLF INDUSTRIES INC PO BOX 2410 BATTLE GROUND, WA 98604	CONSTRUCTION	188,949
TIERNEYFIGUEIREDO ARCHITECTS AIA 817 RUSSELL AVENUE STE H SANTA ROSA, CA 95403	ARCHITECT	153,687
MICHAEL ROGERS 6508 RAYMOND STREET OAKLAND, CA 94609	PROJECT MGMT CONSULTANT	148,605

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 ▶ 11

Part VIII Statement of Revenue

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

Table with 5 columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, related organizations, government grants, and noncash contributions, plus a total line 1h.

Table for Program Service Revenue with 5 columns (A-D) and rows 2a-2f for Developer fees, Rental income, Property management fees, Other income, and Recovery of home ownership notes, plus a total line 2g.

Table for Other Revenue with 5 columns (A-D) and rows 3-12 for Investment income, Royalties, Rental income, Net gain or loss from sales of assets, Fundraising events, Gaming activities, and Sales of inventory, plus a total line 12.

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	10,251	10,251		
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	445,466	36,428	409,038	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,426,468	1,107,903	318,565	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	185,671	109,242	76,429	
10 Payroll taxes	113,847	59,849	53,998	
11 Fees for services (non-employees):				
a Management	221,268	221,268		
b Legal	563,711		563,711	
c Accounting	88,391		88,391	
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				
13 Office expenses				
14 Information technology	19,740			19,740
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	32,071	32,071		
20 Interest	1,466,797	1,466,797		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,248,888	1,248,888		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PARTNERSHIP ACTIVITY	4,914,528	4,914,528		
b OPERATING & MAINTENANCE	575,989	575,989		
c UTILITIES	474,686	474,686		
d TAXES & INSURANCE	439,586	439,586		
e All other expenses	652,743	652,743		
25 Total functional expenses. Add lines 1 through 24e	12,880,101	11,350,229	1,510,132	19,740
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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,093,549	1	3,896,257
	2 Savings and temporary cash investments	6,237,782	2	3,883,402
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,010,701	4	1,383,996
	5 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		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	121,223	9	158,145
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	41,233,393		
	b Less: accumulated depreciation	8,059,644		
	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	2,456,049	13	-1,983,066
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	32,133,510	15	42,835,664
16 Total assets. Add lines 1 through 15 (must equal line 34)	56,729,050	16	83,348,147	
Liabilities	17 Accounts payable and accrued expenses	707,122	17	1,756,191
	18 Grants payable		18	
	19 Deferred revenue	1,815,518	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	21,405,399	23	48,829,642
	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	3,564,991	25	3,450,740
	26 Total liabilities. Add lines 17 through 25	27,493,030	26	54,036,573
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	18,507,769	27	23,623,313
	28 Net assets with donor restrictions	10,728,251	28	5,688,261
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	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 Total net assets or fund balances	29,236,020	32	29,311,574	
33 Total liabilities and net assets/fund balances	56,729,050	33	83,348,147	

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	12,791,623
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,880,101
3	Revenue less expenses. Subtract line 2 from line 1	3	-88,478
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	29,236,020
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	183,816
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-19,784
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,311,574

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 94-2837785

Name: BURBANK HOUSING DEVELOPMENT CORPORATION

Form 990 (2019)

Form 990, Part III, Line 4a:

THE ORGANIZATION OWNS AND OPERATES APARTMENT PROPERTIES FOR LOW-INCOME FAMILIES, ELDERLY AND HANDICAPPED PERSONS. THE ORGANIZATION ALSO PROVIDES COMMUNITY DEVELOPMENT ACTIVITIES.

SCHEDULE A
(Form 990 or 990-EZ)

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 for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number
94-2837785

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 or 990-EZ).)
- 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 **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 in 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		
Total						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	428,922	2,460,061	3,478,308	10,586,514	944,897	17,898,702
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	428,922	2,460,061	3,478,308	10,586,514	944,897	17,898,702
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						
6 Public support. Subtract line 5 from line 4.						17,898,702

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .	428,922	2,460,061	3,478,308	10,586,514	944,897	17,898,702
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	221,945	265,380	242,815	330,938	403,077	1,464,155
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 Total support. Add lines 7 through 10						19,362,857
12 Gross receipts from related activities, etc. (see instructions)					12	63,880,916

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	92.440 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	93.590 %

16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	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>		
	1		
2	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>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
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>		
	3b		
c	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>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
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>		
	4b		
c	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>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	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>		
	9a		
b	Did one or more disqualified persons (as defined in 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>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	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>		
	10a		
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>		
	10b		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <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 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>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <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>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <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>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <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>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <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>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
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>		

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.

Section A - Adjusted Net Income		(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	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(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):	1	
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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
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)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 94-2837785

Name: BURBANK HOUSING DEVELOPMENT CORPORATION

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

Facts And Circumstances Test

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047 2019 Open to Public Inspection

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.

Name of the organization BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number 94-2837785

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 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year. Includes questions about donor notification and grant fund usage.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, monitoring, and reporting. Includes a table for 'Held at the End of the Year' with rows 2a, 2b, 2c, 2d.

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.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for art and historical treasures.

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 are a 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 programs
 - 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:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
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** Temporarily restricted 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:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

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		9,248,990		9,248,990
b Buildings		31,085,795	7,717,561	23,368,234
c Leasehold improvements				
d Equipment		898,608	342,083	556,525
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				33,173,749

Part VII Investments—Other Securities.

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)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

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)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CONSTRUCTION IN PROGRESS	17,610,777
(2) DEPOSITS AND LOAN FEES	359,151
(3) LIMITED PARTNERSHIP RECEIVABLE, NET	8,149,298
(4) NOTE RECEIVABLE FROM PARTNERSHIP	16,415,942
(5) LOAN FEES, NET & GOODWILL	289,295
(6) HOMEOWNER NOTES RECEIVABLE, NET	11,201
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	42,835,664

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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	3,450,740

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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.

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 94-2837785

Name: BURBANK HOUSING DEVELOPMENT CORPORATION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	BURBANK HOUSING DEVELOPMENT CORPORATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE CORPORATION'S FEDERAL AND STATE INCOME TAX RETURNS FOR THE YEARS 2015 THROUGH 2018 ARE SUBJECT TO EXAMINATION BY REGULATORY AGENCIES, GENERALLY FOR THREE YEARS AND FOUR YEARS AFTER THEY WERE FILED FOR FEDERAL AND STATE, RESPECTIVELY.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number 94-2837785

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [] No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Row 1: (1) NON-PROFIT HOUSING ASSOCIATION OF NORTHERN CALIFORNIA, 369 PINE STREET 350 SAN FRANCISCO, CA 94104, EIN 94-2741597, IRC 501(C)(3), Amount 7,500, Purpose TO SUPPORT THE ORGANIZATION INVOLVED IN AFFORDABLE HOUSING.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1
3 Enter total number of other organizations listed in the line 1 table

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	GRANTS ARE GENERALLY MADE TO DOMESTIC ORGANIZATIONS.

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization
BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number
94-2837785

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	No								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number
94-2837785

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>DEBT FORGIVENESS</u>)	X	1	46,670	BOOK VALUE
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		No
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)**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 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number

94-2837785

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 3	THE ORGANIZATION ENGAGES RELATED CORPORATIONS, BURBANK HOUSING MANAGEMENT CORPORATION AND BURBANK HOUSING PROPERTY CORPORATION, TO MANAGE AND OPERATE ITS OWNED AFFORDABLE HOUSING PROPERTIES.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CFO OVERSEES THE PREPARATION OF FORM 990. THE DRAFT FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE FOR A DETAILED REVIEW, AND THEN TO THE FULL BOARD FOR A CURSORY REVIEW AND APPROVAL.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION COVERS ITS POLICIES REGARDING CONFLICTS OF INTEREST IN ITS BY-LAWS, PERSONNEL POLICIES AND THROUGH A POLICY STATEMENT SIGNED BY EACH BOARD MEMBER. A PERMANENT BOARD AGENDA ITEM REQUESTS DISCLOSURE OF POTENTIAL CONFLICTS BY BOARD MEMBERS AT EACH MEETING. WHERE A CONFLICT ARISES, THE CEO OR BOARD REVIEWS THE CONFLICT AND DETERMINES APPROPRIATE ACTION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	BURBANK OBTAINS INDUSTRY SURVEYS. THE SALARY LEVELS OF THE CEO AND CFO ARE REVIEWED AND APPROVED BY THE AUDIT COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	ALL DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	ADJUSTMENT FOR LAVELL VILLAGE TRANSFER 25,000. ADJUSTMENT FOR BODEGA HILLS TRANSFER 25,000 . ADJUSTMENT FOR SEA RANCH 31 TRANSFER 25,000. ADJUSTMENT FOR SEA RANCH 14 TRANSFER 25,000 . ADJUSTMENT FOR MONTE VISTA & COLBAN SYNDICATION COST TRANSFER -201,728. ADJUSTMENT FOR R OWAN CT SYNDICATION COST TRANSFER -68,056. ADJUSTMENT FOR OLD ELM PARTNERS II DEMAND NOTE 25,000. ADJUSTMENT FOR GRAVENSTEIN APTS DEMAND NOTE 25,000. ADJUSTMENT FOR LAVELL VILLAGE DEMAND NOTE 25,000. ADJUSTMENT FOR BODEGA HILLS DEMAND NOTE 25,000. ADJUSTMENT FOR SEA RAN CH 31 DEMAND NOTE 25,000. ADJUSTMENT FOR SEA RANCH 14 DEMAND NOTE 25,000.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE OVERSIGHT PROCESS HAS NOT BEEN CHANGED FROM PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
BURBANK HOUSING DEVELOPMENT CORPORATION

Employer identification number
94-2837785

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

See Additional Data Table

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

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) BURBANK HOUSING COMMUNITIES CORP 790 SONOMA AVENUE SANTA ROSA, CA 95404 95-3214230	AFFORDABLE HOUSING OWNERSHIP	CA	501(C)(3)	LINE 10	BURBANK HOUSING DEVELOPMENT CORP	Yes	
(2) BURBANK HOUSING MANAGEMENT CORP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0328717	AFFORDABLE HOUSING MANAGEMENT	CA	501(C)(3)	LINE 12A, I	BURBANK HOUSING DEVELOPMENT CORP	Yes	
(3) BURBANK HOUSINGSR CORPORATION 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3184523	AFFORDABLE HOUSING OWNERSHIP	CA	501(C)(3)	LINE 12A, I	BURBANK HOUSING DEVELOPMENT CORP	Yes	
(4) CHARLES STREET VILLAGE INC 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0403961	AFFORDABLE HOUSING OWNERSHIP	CA	501(C)(3)	LINE 10	BURBANK HOUSING DEVELOPMENT CORP	Yes	
(5) GROSMAN APARTMENTS INC 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3185284	AFFORDABLE HOUSING OWNERSHIP	CA	501(C)(3)	LINE 10	BURBANK HOUSING DEVELOPMENT CORP	Yes	
(6) MARTHA WAY CORPORATION 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3185162	AFFORDABLE HOUSING OWNERSHIP	CA	501(C)(3)	LINE 10	BURBANK HOUSING DEVELOPMENT CORP	Yes	
(7) VINECREST SENIOR APARTMENTS INC 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0384782	AFFORDABLE HOUSING OWNERSHIP	CA	501(C)(3)	LINE 10	BURBANK HOUSING DEVELOPMENT CORP	Yes	

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

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) BURBANK HOUSING PROPERTY CORPORATION 790 SONOMA AVENUE SANTA ROSA, CA 95404 75-3170447	AFFORDABLE HOUSING MANAGEMENT	CA	BURBANK HOUSING DEVELOPMENT CORP	C				Yes	
(2) STONY POINT APARTMENTS INC 790 SONOMA AVENUE SANTA ROSA, CA 95404 91-1846280	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	C				Yes	

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?		Yes	No
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b	Gift, grant, or capital contribution to related organization(s)		No
c	Gift, grant, or capital contribution from related organization(s)	Yes	
d	Loans or loan guarantees to or for related organization(s)	Yes	
e	Loans or loan guarantees by related organization(s)		No
f	Dividends from related organization(s)		No
g	Sale of assets to related organization(s)	Yes	
h	Purchase of assets from related organization(s)		No
i	Exchange of assets with related organization(s)		No
j	Lease of facilities, equipment, or other assets to related organization(s)		No
k	Lease of facilities, equipment, or other assets from related organization(s)		No
l	Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o	Sharing of paid employees with related organization(s)	Yes	
p	Reimbursement paid to related organization(s) for expenses	Yes	
q	Reimbursement paid by related organization(s) for expenses	Yes	
r	Other transfer of cash or property to related organization(s)		No
s	Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BURBANK HOUSING MANAGEMENT CORPORATION	Q	850,080	FMV - ARMS LENGTH
(2) GRAVENSTEIN APARTMENTS LP	G	10,100,000	FMV - ARMS LENGTH
(3) BURBANK HOUSING COMMUNITIES CORPORATION	C	100,893	FMV - ARMS LENGTH

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation
EXPLANATION OF RELATED ORGANIZATION:	BURBANK HOUSING PROPERTY CORPORATION AND STONY POINT APARTMENTS INC. ARE ORGANIZED UNDER CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION LAW. THERE ARE NO SHAREHOLDERS IN THESE CORPORATIONS. THE CORPORATIONS' AFFAIRS AND ACTIVITIES ARE MANAGED BY THE BOARD OF DIRECTORS WHO ARE ALSO DIRECTORS OF BURBANK HOUSING DEVELOPMENT CORPORATION.

Additional Data

Software ID:
Software Version:
EIN: 94-2837785
Name: BURBANK HOUSING DEVELOPMENT CORPORATION

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
AMOROSA 1 GENERAL PARTNER LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404 82-2790061	AFFORDABLE HOUSING OWNERSHIP	CA	0	0	BURBANK HOUSING DEVELOPMENT CORP
AMOROSA II LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	28,836	74,495	BURBANK HOUSING DEVELOPMENT CORP
BELL MANOR LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	27,068	-867,388	BURBANK HOUSING DEVELOPMENT CORP
BURBANK CENTER STREET APARTMENTS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404 81-5348127	AFFORDABLE HOUSING OWNERSHIP	CA	0	0	BURBANK HOUSING DEVELOPMENT CORP
BURBANK PARKWOOD APARTMENTS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	0	0	BURBANK HOUSING DEVELOPMENT CORP
CROSSROADS APARTMENTS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	25,750	67,368	BURBANK HOUSING DEVELOPMENT CORP
FIFE LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	25,093	186,169	BURBANK HOUSING DEVELOPMENT CORP
FOREST WINDS 2 LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	28,983	-939,505	BURBANK HOUSING DEVELOPMENT CORP
GRAVENSTEIN APARTMENTS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404 83-1785631	AFFORDABLE HOUSING OWNERSHIP	CA	12,500	-5,022,003	BURBANK HOUSING DEVELOPMENT CORP
GRAY'S MEADOW 2 LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	23,186	-1,070,649	BURBANK HOUSING DEVELOPMENT CORP
LOGAN PLACE LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	23,883	948,254	BURBANK HOUSING DEVELOPMENT CORP
MADRONE VILLAGE 2 LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	25,082	-660,671	BURBANK HOUSING DEVELOPMENT CORP
MONTE VINA LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	0	0	BURBANK HOUSING DEVELOPMENT CORP
OLD ELM PARTNERS II LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	0	25,000	BURBANK HOUSING DEVELOPMENT CORP
PARK LANE APARTMENTS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404 47-3924718	AFFORDABLE HOUSING OWNERSHIP	CA	28,138	53,038	BURBANK HOUSING DEVELOPMENT CORP
ROUND WALK VILLAGE LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	628	-2,013,631	BURBANK HOUSING DEVELOPMENT CORP
ROWAN COURT LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	25,000	366,470	BURBANK HOUSING DEVELOPMENT CORP
STODDARD HOUSING LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	10,346	34,513	BURBANK HOUSING DEVELOPMENT CORP
TOWER 2 APARTMENTS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	29,853	-837,567	BURBANK HOUSING DEVELOPMENT CORP
WINDSOR REDWOODS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404	AFFORDABLE HOUSING OWNERSHIP	CA	22,530	1,601,052	BURBANK HOUSING DEVELOPMENT CORP

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
AMOROSA I LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 26-4297460	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	22,210	1,118,725		No		Yes		1.000 %
AMOROSA II LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 27-1324630	AFFORDABLE HOUSING OWNERSHIP	CA	AMOROSA II LLC	RELATED	28,801	128,691		No		Yes		0.010 %
ARBORS ROHNERT PARK APARTMENTS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 86-1134061	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	-88,665	856,089		No		Yes		0.010 %
BELL MANOR LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 45-4774740	AFFORDABLE HOUSING OWNERSHIP	CA	BELL MANOR LLC	RELATED	27,034	1,013,596		No		Yes		0.010 %
CARRILLO PLACE LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 81-0561436	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	53,557	76,733		No		Yes		0.010 %
COLGAN MEADOWS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 33-1131205	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	-226,332	1,213,426		No		Yes		30.000 %
CROSSROADS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 81-1369540	AFFORDABLE HOUSING OWNERSHIP	CA	CROSSROADS APARTMENTS LLC	RELATED	25,680	2,765,868		No		Yes		0.010 %
FIFE CREEK COMMONS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 27-0670874	AFFORDABLE HOUSING OWNERSHIP	CA	FIFE LLC	RELATED	25,034	188,830		No		Yes		0.010 %
FIREHOUSE PARTNERS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3364095	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	25,468	893,087		No		Yes		0.010 %
FMT LIMITED PARTNERSHIP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0194408	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING MANAGEMENT CORPORATION	RELATED	17,693	65,210		No		Yes		1.000 %
FOREST WINDS 2 LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 46-3944772	AFFORDABLE HOUSING OWNERSHIP	CA	FOREST WINDS 2 LLC	RELATED	28,969	478,003		No		Yes		0.010 %
GRAVENSTEIN APARTMENTS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 83-1837688	AFFORDABLE HOUSING OWNERSHIP	CA	GRAVENSTEIN APARTMENTS LLC	RELATED	12,477	14,011,964		No		Yes		0.010 %
GRAY'S MEADOW 2 LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 46-2034528	AFFORDABLE HOUSING OWNERSHIP	CA	GRAY'S MEADOW 2 LLC	RELATED	23,167	900,068		No		Yes		0.010 %
GROSMAN APARTMENTS INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0296476	AFFORDABLE HOUSING OWNERSHIP	CA	MARTHA WAY CORPORATION AND BURBANK HOUSING COMMUNITIES CORP	RELATED				No			No	
HEALDSBURG FAMILY APARTMENTS INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0438463	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	13,997	97,718		No		Yes		0.010 %

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
JAY'S PLACE PARTNERS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0462705	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	34,049	838,655		No		Yes		0.010 %
LARKFIELD OAKS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 61-1488141	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	25,997	605,237		No		Yes		0.010 %
LOGAN PLACE LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 45-3592165	AFFORDABLE HOUSING OWNERSHIP	CA	LOGAN PLACE LLC	RELATED	23,816	989,364		No		Yes		0.010 %
MADRONE VILLAGE 2 LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 47-3911424	AFFORDABLE HOUSING OWNERSHIP	CA	MADRONE VILLAGE 2 LLC	RELATED	11,246	1,262,740		No		Yes		0.010 %
MEDA CYPRESS RIDGE LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 74-3066057	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	44,012	367,934		No		Yes		0.010 %
MONTE VINA LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 84-2034636	AFFORDABLE HOUSING OWNERSHIP	CA	MONTE VINA LLC AND BURBANK HOUSING COMMUNITIES CORP	RELATED	-800			No		Yes		1.000 %
MONTE VISTA COMMUNITY LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 26-0111337	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	-189,643	938,404		No		Yes		0.010 %
OAK RIDGE APARTMENTS ASSOCIATES LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 42-1713768	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	-13,976	12,509		No		Yes		0.010 %
OLD ELM PARTNERS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0409165	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	42,881	333,908		No		Yes		0.010 %
OLD ELM PARTNERS II LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 84-3382606	AFFORDABLE HOUSING OWNERSHIP	CA	OLD ELM PARTNERS II LLC AND BURBANK HOUSING COMMUNITIES CORP	RELATED	-800			No		Yes		1.000 %
OLIVE GROVE APARTMENTS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 56-2478983	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	-119,343	1,082,688		No		Yes		0.010 %
PALISADES CALISTOGA INVESTORS LLC 790 SONOMA AVENUE SANTA ROSA, CA 95404 26-2407465	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	3,635	96,324		No		Yes		50.000 %
PALISADES INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 38-3762120	AFFORDABLE HOUSING OWNERSHIP	CA	PALISADES CALISTOGA INVESTORS LLC	RELATED				No			No	
PAPAGO COURTAPPLE VALLEY INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3326395	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING COMMUNITIES CORP	RELATED				No			No	
PARK LAND SENIOR APARTMENT INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0421818	AFFORDABLE HOUSING OWNERSHIP	CA	STONY POINT APARTMENTS INC AND BURBANK HOUSING COMMUNITIES CORP	RELATED				No			No	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	(j) General or Managing Partner?		(k) Percentage ownership
							Yes	No		Yes	No	
PARK LANE LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 47-3887677	AFFORDABLE HOUSING OWNERSHIP	CA	PARK LANE APARTMENTS LLC	RELATED	28,090	76,520		No		Yes		0.010 %
PARKWOOD APARTMENTS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 85-1386876	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK PARKWOOD APARTMENTS LLC AND BURBANK HOUSING COMMUNITIES CORP	RELATED	-800			No		Yes		1.000 %
PAULIN CREEK INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3347018	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING COMMUNITIES CORP	RELATED				No			No	
ROUND WALK VILLAGE PARTNERS 2 LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 45-5400629	AFFORDABLE HOUSING OWNERSHIP	CA	ROUND WALK VILLAGE LLC	RELATED	579	1,067,525		No		Yes		0.010 %
ROWAN COURT PARTNERS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 65-1315951	AFFORDABLE HOUSING OWNERSHIP	CA	ROWAN COURT LLC	RELATED	24,936	1,493,187		No		Yes		0.010 %
SPRINGS VILLAGE LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 20-0915564	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	28,189	127,771		No		Yes		0.010 %
STODDARD HOUSING LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 82-3301739	AFFORDABLE HOUSING OWNERSHIP	CA	STODDARD HOUSING LLC	RELATED	10,322	17,222,030		No		Yes		0.010 %
STONY POINT APARTMENTS INVESTORS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 68-0400494	AFFORDABLE HOUSING OWNERSHIP	CA	STONY POINT APARTMENTS INC AND BURBANK HOUSING COMMUNITIES CORP	RELATED				No			No	
TIMOTHY COMMONS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 54-2097764	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP AND BURBANK HOUSING COMMUNITIES CORP	RELATED	13,411	59,939		No		Yes		0.010 %
TOWER 2 APARTMENTS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 46-1712211	AFFORDABLE HOUSING OWNERSHIP	CA	TOWER 2 APARTMENTS LLC	RELATED	29,836	292,827		No		Yes		0.010 %
VIDA NUEVA PARTNERS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 87-0769877	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	19,561	478,615		No		Yes		0.010 %
WEST OAKS APARTMENTS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 94-3309685	AFFORDABLE HOUSING OWNERSHIP	CA	STONY POINT APARTMENTS INC AND BURBANK HOUSING COMMUNITIES CORP	RELATED				No			No	
WILFORD LANE VILLAGE LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 71-0907858	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	31,147	142,826		No		Yes		0.010 %
WINDSOR REDWOODS LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 33-1131202	AFFORDABLE HOUSING OWNERSHIP	CA	WINDSOR REDWOODS LLC	RELATED	22,475	1,715,552		No		Yes		0.010 %
WINTER CREEK LP 790 SONOMA AVENUE SANTA ROSA, CA 95404 04-3696739	AFFORDABLE HOUSING OWNERSHIP	CA	BURBANK HOUSING DEVELOPMENT CORP	RELATED	19,986	70,992		No		Yes		0.010 %