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

OMB No. 1545-0047

	partment of the Treasury enal Revenue Service  The organization may have to use a copy of this return to satisfy state reporting requirements.  Open to Public Inspection									
A	For t	he 2006 ca	dendar	year, or tax year beginning				ending	roquiron	, 20
В	Check if	applicable:	Please	C Name of organization					D Emplo	yer identification number
	Addres	s change	use IRS label or	Affordable Hou	sing Resour	ces,	, In	iC.	58-1	L857324
	Name (	change	print or type.	Number and street (or P.O. box	if mail is not delivered to	street a	ıddress)	Room/suite	_	one number
	Initial re	eturn	See	1011 Cherry Av					615-	-251-0025
	Final re	eturn	Specific instruc-	City or town, state or country,	and ZiP + 4					ng method: Cash Accrual
	Amend	ed return	tions.	Nashville, TN	37203				_	her (specify)
	Applica	tion pending	• Sec	tion 501(c)(3) organizations an	d 4947(a)(1) nonexem	ot chari	table			to section 527 organizations.
_		, .		ts must attach a completed Sch	edule A (Form 990 or 9	90-EZ).				n for affiliates? Yes 🗶 No
G	Websit	te: ►www	.anr	housing.org				• •		per of affiliates >
j	Organi	rganization type (check only one) ► ∑ 501(c) ( 3 ) ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527 H(c) Are all affilia								ided? Yes No t. See instructions.)
	Check here ▶ if the organization is not a 509(a)(3) supporting organization and its gross  H(d) Is this a separa								•	
	receipts	s are normali	y <b>not</b> mo	re than \$25,000. A return is not red	quired, but if the organiza	u its gr ition cho	oss oses	organization	covered b	y a group ruling? 🔲 Yes 🔀 No
	to file a	offile a return, be sure to file a complete return.					nption N	umber ▶		
L	Gross	receipts: A	dd lines	6b, 8b, 9b, and 10b to line 1	0.5					the organization is not required
P	art [			penses, and Changes i		Fund	Ralar	to attach s	inctru	form 990, 990-EZ, or 990-PF).
	1			pifts, grants, and similar an		unu	Dalai	ives (See III)	iiiSii u	เป็นเปียง)
	a	Contribu	tions to	o donor advised funds	iounts received:	1a				
	b			pport (not included on line		1b		181,805		
	C	Indirect a	oublic s	support (not included on lir	: (a)	1c		TOT, 00	<u>'</u>	
	ď			ntributions (grants) (not inc		1d		449,266		
	e	Total (ad	d lines	ta through 1d) (cash \$ 6	10ded off lifte 1a)			0)	1e	631,071
	2									394,619
	3	Members	ship du	es and assessments	ent lees and contrac		nran	VII, IIIIE 93)	3	331,313
	4			ngs and temporary cash in			• • •		4	35,462
	5	Dividend	s and i	nterest from securities	vestificitis				5	33/ ±02
•	6a	Gross re			• • • • • •	6a	• • •	14,200		
	b	Less: rer	ntal exp	enses		6b		2,687		
	С	Net renta	ıl incon	ne or (loss). Subtract line 6	b from line 6a	·			6c	11,513
ē	7	Other inv	estmer	nt income (describe 🕨			•	)	7	
Revenue	8a	Gross ar	nount f	rom sales of assets other	(A) Securities		(B	) Other		
æ		than inve				8a				
				r basis and sales expenses		8b				
				ttach schedule) [	0	8c		0		
		Net gain	or (loss)	. Combine line 8c, columns	(A) and (B)				8d	0
	9	Special ev	ents and	d activities (attach schedule). If	any amount is from g	jaming	, check	k here 🕨 🔲		
	а			not including \$	of					
		contribut	ions re	ported on line 1b)		9a			4 1	
	b	Less: dir	ect exp	enses other than fundraisi	ng expenses	9b			_	0
		Orana	ne or (	oss) from special events.	Subtract line 9b from		9a	626 565	9c	0
	10a	Loos sa	les of i	nventory, less returns and		10a		,830,292 480,715	Andrew of the Sanda Cont	
				oods sold		10b		,480,715	- F110096000000000000000000000000000000000	240 577
	11	Other rev	mur (108 venue /4	ss) from sales of inventory (atta from Part VII, line 103)					10c	349,577
	12	Total rev	enue. A	add lines 1e, 2, 3, 4, 5, 6c, 7		1			11	1,422,242
	13	Program	service	es (from line 44 column /P	, - =, ==, 100, and 1	'	<u> </u>	<u> </u>	13	1,611,064
Ses	14	Managen	nent an	es (from line 44, column (B	// · · · · ·				14	199,515
Expenses	15	3							15	1,99,010
Ж	16	Payment	s to aff	iliates (attach schedule)					16	
	17	Total ex	penses	. Add lines 16 and 44, col	umn (A)	• •			17	1,810,579
ets	18			it) for the year. Subtract lir					18	(388,337)
ssets	19			nd halances at beginning					10	7 436 422

Other changes in net assets or fund balances (attach explanation).

Net assets or fund balances at end of year. Combine lines 18, 19, and 20

7,048,085

20

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising			
<b>22</b> a	Grants paid from donor advised funds (attach schedule)								
	(cash \$ noncash \$)				artist the extra				
	If this amount includes foreign grants, check here 🕨 🗌	22a	0						
22b	State and all of the fatta of the date)					gromers are:			
	(cash \$ noncash \$)	]							
	If this amount includes foreign grants, check here 🕨 🗌	22b	0						
23	Specific assistance to individuals (attach schedule)	23	800	800					
24	Benefits paid to or for members (attach schedule)	24	0		and provided a second				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A (attach schedule)	25a	185,745	157,883	27,862				
	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach schedule)	25b	0						
С	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c	0						
26	Salaries and wages of employees not included on lines 25a, b, and c	26	489,689	416,236	73,453				
27	Pension plan contributions not included on lines 25a, b, and c	27	20,590	17,481	3,109				
28	Employee benefits not included on lines 25a - 27	28	78,095	66,381	11,714				
29	Payroll taxes	29	56,255	47,817	8,438				
30	Professional fundraising fees	30	0						
31	Accounting fees	31	59,649	50,702	8,947				
32	Legal fees	32	32,451	27,583	4,868				
33	Supplies	33	31,078	27,294	3,784				
34	Telephone	34	19,224	16,340	2,884				
35	Postage and shipping	35	9,572	8,136	1,436				
36	Occupancy	36	21,758 29,835	18,494	3,264				
37 38	Equipment rental and maintenance	37	29,835	25,360	4,475				
39	Printing and publications	38 39	29,179	24,802	4,377				
40	Travel	40	10,755	9,142	1,613				
41	Interest	41	19,218	16,335	2,883				
42	Depreciation, depletion, etc. (attach schedule)	42	30,441	25,875	4,566				
43	Other expenses not covered above (itemize):			23,0.3					
а	Advertising & promotion	43a	61,826	52,552	9,274				
b	Amortization of grants	43b	350,917	350,917	0				
C	Mortgage banking	43c	123,045	123,045	0				
d	Contract labor	43d	87,980	74,783	13,197				
е	Insurance	43e	34,502	29,327	5,175				
f	Auto/Truck	43f	26,487	22,514	3,973				
g	Tax & license	43g	1,488	1,265	223				
44	<b>Total functional expenses.</b> Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)		1,810,579	1,611,064	199,515				
Join	t Costs. Check > I if you are following SOP	98-2.	<del>- "</del>						
Are a	Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?   Ves  No								
	s," enter (i) the aggregate amount of these joint costs	\$		e amount allocated	_	s \$;			
(m) th	e amount allocated to Management and general \$		; and (iv) the	e amount allocated	to Fundraising \$				

### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

a Provide lending, down-payment & closing cost assistance to low-income families  (Grants and allocations \$ 175,766) If this amount includes foreign grants, check here ▶ 488,137  b Provide home-ownersip counseling to low-income families  (Grants and allocations \$ 2,500) If this amount includes foreign grants, check here ▶ 313,243  c Provide housing to low-income families through rental, construction & sales  (Grants and allocations \$ 271,000) If this amount includes foreign grants, check here ▶ 809,684  d  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ 60 ther program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ 61 Total of Program Service Expenses (should equal line 44, column (8), Program services). ▶ 1.611.064	All of	nat is the organization's primary exempt purpose?   to provide low-income housing organizations must describe their exempt purpose achievements in a clear and concise manner. State the number clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
b Provide home-ownersip counseling to low-income families  (Grants and allocations \$ 2,500) If this amount includes foreign grants, check here ▶ □  313,243  c Provide housing to low-income families through rental, construction & sales  (Grants and allocations \$ 271,000) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ 271,000) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	а	Provide lending, down-payment & closing cost assistance to low-income families	
C Provide housing to low-income families through rental,  Construction & sales  (Grants and allocations \$ 271,000) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □  (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	b	1/3, /66/ it this amount includes foreign grants, check here	488,137
d  Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □  e Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ □	С	Provide housing to low-income families through rental.	313,243
e Other program services (attach schedule)  (Grants and allocations \$ ) If this amount includes foreign grants, check here	d	(Grants and allocations \$ 271,000) If this amount includes foreign grants, check here ▶ □	809,684
, a the aniotic melades folding, check here F		Other program services (attach schedule)	
	f	(Grants and allocations \$ ) If this amount includes foreign grants, check here ► ☐  Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	1,611,064

Form 990 (2006)

Like	IFE IV	Balance Sheets (See the instructions	· <u>)</u>				
N	iote:	Where required, attached schedules and amounts column should be for end-of-year amounts only.	within th	e description	(A) Beginning of year		<b>(B)</b> End of year
	45	Cash—non-interest-bearing			982,185	45	829,667
	46	Savings and temporary cash investments .			651,664	46	579,146
		, , , , , , , , , , , , , , , , , , , ,				1	
	47a	Accounts receivable	47a	605,102			
	l	Less: allowance for doubtful accounts	47b		528,219	47c	605,102
					· · · · · · · · · · · · · · · · · · ·		<u> </u>
	48a	Pledges receivable	48a				
		Less: allowance for doubtful accounts	48b			48c	0
	49	Grants receivable				49	
	1			70			
	JVa	Receivables from current and former officers key employees (attach schedule)		50a			
	,		******	000			
		Receivables from other disqualified persons (4958(f)(1)) and persons described in section 495	as detin	led under section		50b	
	E4		0(0)(3)(0	) (attach schedule)		-300	
(A)	Sia	Other notes and loans receivable (attach	51a	3,572,192			
Assets	h	schedule)	51b	211,459	3,885,609	51c	3,360,733
As	52				11,701,871	52	16,417,357
	53	Inventories for sale or use			13,712	53	13,434
					13,712	54a	
		Investments—publicly-traded securities				54b	
		Investments—other securities (attach schedu	ne) 🟲	LJ Cost LJ FMV		340	
	) ၁၁a	Investments—land, buildings, and	55a				
		equipment: basis	Joa		•		
	D	Less: accumulated depreciation (attach	55b			55c	0
	56	schedule)	000			56	
		Investments—other (attach schedule)	   57a	752,292		30	
	1	Land, buildings, and equipment: basis	Jia	1,22,252			
	a	Less: accumulated depreciation (attach	57b	210,731	564,347	57c	541,561
	F0	schedule)	<u> </u>		JU4,J41	3/6	<u> </u>
	58	Other assets, including program-related inve (describe > Escrow funds held		,	18,883	58	40,771
	59	Total assets (must equal line 74). Add lines		) uah 58	18,346,490	59	22,387,771
	60				1,037,080	60	1,383,714
	61	Accounts payable and accrued expenses .			1,037,000	61	1,303,714
	62	Grants payable				62	
Se	1	· · · · · · · · · · · · · · · · · · ·			·····	02	
	63	Loans from officers, directors, trustees, and				63	
Liabiliti	645	schedule)			· · · · · · · · · · · · · · · · · · ·	64a	
=======================================	04a	Tax-exempt bond liabilities (attach schedule)	) 		9,872,988	64b	13,955,972
	65	Mortgages and other notes payable (attach s Other liabilities (describe ►			5,072,500	65	13,333,314
		Outer habilities (describe		)		00	
	66	Total liabilities. Add lines 60 through 65 .			10,910,068	66	15,339,686
	Oras	nizations that follow SFAS 117, check here ▶			,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		**************************************
t)	0.90	67 through 69 and lines 73 and 74.	- LI ai	id complete lines			,
ĕ	67	Unrestricted		a constant	2,136,569	67	1,813,932
<u>a</u>	68	Temporarily restricted			3,300,606	68	3,014,906
Fund Balances	69	Permanently restricted		•	1,999,247	69	2,219,247
b	1	nizations that do not follow SFAS 117, check		•	,		
ᆵ	J.g.	complete lines 70 through 74.	K Hele P	Lanc			
ō	70	Capital stock, trust principal, or current fund	le	į		70	
	71	Paid-in or capital surplus, or land, building, a		71			
Net Assets	72	Retained earnings, endowment, accumulated		72			
As	73	Total net assets or fund balances. Add line		140			
ē	70 through 72. (Column (A) <b>must</b> equal line 19 and column (B) <b>must</b>						
_		equal line 21)		7,436,422	73	7,048,085	
	74	Total liabilities and net assets/fund balance			18,346,490	74	22,387,771

Pa	Reconciliation of Revenue per Audinstructions.)	dited Financial Statem	ents With Rev	•	
a b	Total revenue, gains, and other support per audi Amounts included on line a but not on Part I, line			a	1,422,242
1	Net unrealized gains on investments		b1		
2	Donated services and use of facilities		b2		
3			b3		
-	Recoveries of prior year grants		03		
4	Other (specify):		b4		
	Add lines b1 through b4			. b	0_
С	Contribution of the class of the contribution			С	1,422,242
d	Amounts included on Part I, line 12, but not on I		• • • • •		
1	Investment expenses not included on Part I, line	•	d1		
2	Other (specify):				
			d2		
	4 7 7 11 14 4 4 4		L	d	n
е	Total revenue (Part I, line 12). Add lines c and d			. ▶ e	1,422,242
Pa	t IV-B Reconciliation of Expenses per Au	idited Financial State	ments With Ex	penses per Retu	rn
а	Total expenses and losses per audited financial:	statements		a	1,810,579
b	Amounts included on line a but not on Part I, line	e 17:			
1	Donated services and use of facilities		b1		,
2	Prior year adjustments reported on Part I, line 20		b2		
3	Losses reported on Part I, line 20		b3		
4	Other (specify):				
·			b4		
	Add lines <b>b1</b> through <b>b4</b>	1,	——————————————————————————————————————	ь	0
С	Codebook Book & Comp. B			· · ·   c	1,810,579
d		<i></i>			1,010,373
	Amounts included on Part I, line 17, but not on I		: _1#		
1	Investment expenses not included on Part I, line	6b	d1		
2	Other (specify):				
	Add lines d1 and d2		d2		0
е	Total expenses (Part I, line 17). Add lines c and	d		d   e	1,810,579
Par	t V-A Current Officers, Directors, Trustees or key employee at any time during the ye	s, and Key Employees	(List each perso	n who was an office	r, director, trustee, )
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employe benefit plans & deferred compensation plans	(E) Expense account and other allowances
E.	D. Latimer	40 hrs/wk		VVIII PURE PROPERTY P	
		Exec Dir	185,745	4,389	0
	ard of Directors	2 hrs/wk	203,713	17305	<del>                                     </del>
	e List Attached	14 IIIS/WK	0	0	0
	e bibe Acedened	····	<u> </u>	0	-
		-		•	
					-
	4				
		1			
		1			
		+			
				-	
		+			
			L		

Pa	rt V-A Current Officers, Directors, Trustees	s, and Key Employe	es (continued)			Yes	No
75a	Enter the total number of officers, directors, and tr			n business at board 14			
b	Are any officers, directors, trustees, or key employees listed in Schedule A, Part I, or hig contractors listed in Schedule A, Part II-A or relationships? If "Yes," attach a statement that ide	jhest compensated p II-B, related to each	professional and	other independent family or business	75b		X
d	Do any officers, directors, trustees, or key compensated employees listed in Schedule A, independent contractors listed in Schedule A, organizations, whether tax exempt or taxable, that the definition of "related organization.".  If "Yes," attach a statement that includes the info Does the organization have a written conflict of in the total process of the trustees. Trustees, and officer, director, trustee, or key employee re	employees listed in Part I, or highest co Part II-A or II-B, recat are related to the ormation described in Interest policy?  Key Employees That I eceived compensation or	Form 990, Par ompensated profesive compensati rganization? See the instructions.	t V-A, or highest essional and other on from any other the instructions for	the ve	ar, lis	X X ormer
-	person below and enter the amount of comp  (A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid,	(D) Contributions to employee benefit plans & deferred	(E)	Expense nt and	other
Noi	ne		enter -0-)	compensation plans	allo	owance	
		-					
		-					
					ļ		
							<del></del>
Par	t VI Other Information (See the instruction				<u> </u>	Yes	No
76	Did the organization make a change in its activitie	· · · · · · · · · · · · · · · · · · ·		? If "Yes," attach a	76	ies	X
77	Were any changes made in the organizing or gov If "Yes," attach a conformed copy of the changes	S.			77		X
	Did the organization have unrelated business grothis return?				78a 78b		X X
79	Was there a liquidation, dissolution, termination, of a statement				79		X
	Is the organization related (other than by associa common membership, governing bodies, truste organization?	ees, officers, etc., to	any other exer	npt or nonexempt	80a	X	
	If "Yes," enter the name of the organization $ ightharpoonup$ $ ightharpo$	he Resource :	Foundation	1			
ชาล b	Enter direct and indirect political expenditures. (S Did the organization file Form 1120-POL for this	ee line 81 instructions year?	s.) <u>[81a  </u> 	<u> </u>	81b		x

Pai	rt VI Other Information (continued)	-	Yes	No			
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		x			
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II.						
835	(See instructions in Part III.)	02-					
	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a 83b	x				
84a	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions? Did the organization solicit any contributions or gifts that were not tax deductible?	84a		х			
	If "Yes," did the organization include with every solicitation an express statement that such contributions or	140					
	gifts were not tax deductible?	84b		X			
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a					
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b					
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.						
	Dues, assessments, and similar amounts from members						
	Section 162(e) lobbying and political expenditures		0.46	100			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices						
f	Last						
g	o was the pay and deduction about of the day of the day of the day.						
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?						
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a						
	Gross receipts, included on line 12, for public use of club facilities 86b			ede a			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)						
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.						
	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b					
	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶						
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X			
c	Enter: Amount of tax imposed on the organization managers or disqualified			100			
	persons during the year under sections 4912, 4955, and 4958						
	Enter: Amount of tax on line 89c, above, reimbursed by the organization >						
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X			
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		x			
	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the		3.5	10000			
9	supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g					
90a List the states with which a copy of this return is filed ► TN							
þ	b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)						
91a	The books are in care of $\blacktriangleright$ E.D. Latimer Telephone no. $\blacktriangleright$ 615-25	1-0	025				
Located at ► 1011 Cherry Avenue, Nashville ZIP + 4 ► 37203							
b At any time during the calendar year, did the organization have an interest in or a signature or other authority							
	over a financial account in a foreign country (such as a bank account, securities account, or other financial						
	account)?						
	If "Yes," enter the name of the foreign country						
••••	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.						

Form 990 (2006)		4.5	1 .			P	age 8
Part VI Other Information (continued)						Yes	No
c At any time during the calendar year, did the or If "Yes," enter the name of the foreign country I Section 4947(a)(1) nonexempt charitable trusts and enter the amount of tax-exempt interest recommendations.	► filina Form 99	00 in lieu of <b>Form</b>	1041—Check	here			x ▶□
Part VII Analysis of Income-Producing Activ	vities (See t	he instructions.)	<u> </u>				
Note: Enter gross amounts unless otherwise	Unrelated	business income	Excluded by sec	tion 512, 513, or 514		(E)	
indicated.	(A)	(B)	(c)	(D)	Related exempt fu		
93 Program service revenue:	Business code	Amount	Exclusion code	Amount	income		<del></del>
a Mortgage loan interest b Loan servicing fees							989
Counceling food	<del></del>					57,2	
d Mortgage fees							516 855
e						، ر د د	333
f Medicare/Medicaid payments		<del> </del>					
g Fees and contracts from government agencies					-		
94 Membership dues and assessments							
95 Interest on savings and temporary cash investments							
96 Dividends and interest from securities							Gazara e
97 Net rental income or (loss) from real estate:							
a debt-financed property     b not debt-financed property			-				
<ul><li>b not debt-financed property</li><li>98 Net rental income or (loss) from personal property</li></ul>		<u> </u>					
99 Other investment income							
100 Gain or (loss) from sales of assets other than inventory							
101 Net income or (loss) from special events .							
102 Gross profit or (loss) from sales of inventory							· · · · ·
103 Other revenue: a							
b						-	
C		<del></del>			-		
d		<del></del>					
104 Subtotal (add columns (B), (D), and (E))		0		0	30	94.	619
105 Total (add line 104, columns (B), (D), and (E)) .		523		<b>•</b>			619
<b>Note:</b> Line 105 plus line 1e, Part I, should equal the a	amount on line	e 12, Part I.		-		,	<u> </u>
Part VIII Relationship of Activities to the Acco	omplishment	of Exempt Purp	oses (See ti	ne instructions.)			
Explain how each activity for which income of the organization's exempt purposes (other	is reported in our than by provi	column (E) of Part V ding funds for such	II contributed purposes).	importantly to the	accor	mplish	ment
Part IX Information Regarding Taxable Subsi		Disregarded Entit	ti <b>es</b> (See the	instructions.)	······	(F)	
Name, address, and EIN of corporation, partnership, or disregarded entity own	(B) ercentage of ership interest	(C) Nature of a	ctivities	(D) Total income	En	(E) d-of-y assets	ear
	<u>%</u> %			1	-		
					<del>                                     </del>		
	%						
Part X Information Regarding Transfers Assoc		rsonal Benefit Co	ntracts (See	the instructions.)			<del></del>
<ul> <li>(a) Did the organization, during the year, receive any funds, dire</li> <li>(b) Did the organization, during the year, pay prem</li> <li>Note: If "Yes" to (b), file Form 8870 and Form 472</li> </ul>	ectly or indirectly, iums, directly	to pay premiums on a	personal benefi	t contract?	☐ Ye	es 🗆	No No

Fart	is a controlling organiza	I fransfers to and Fro ition as defined in section	<b>m Controlled El</b> <i>in 512(b)(13).</i>	ntities. Comp	lete only if the or	ganız	ation
106	Did the reporting organization <b>n</b> the Code? If "Yes," complete the	nake any transfers to a co ne schedule below for each	ntrolled entity as o	defined in secti	on 512(b)(13) of	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descri	C) ption of nsfer	(D) Amount of		fer
a							
b							
С							· · ·
	Totals						
107	Did the reporting organization re 512(b)(13) of the Code? If "Yes,	eceive any transfers from " complete the schedule b	a controlled entity elow for each con	as defined in	section	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Descri	C) ption of isfer	(D) Amount of	trans	fer
a							
b							
c							
	Totals						
108	Did the organization have a bind rents, royalties, and annuities de	escribed in question 107 a	bove?			Yes	No X
Please Sign Here	Signature 4 office Wayne A. Reed	at I have examined this return, included the property of the property (other property (other property)).	have examined this return, including accompanying schedules and statements, and to the best of the Declaration of preparer (other than officer) is based on all information of which preparer has				
Paid Preparer	Type or pfrint name and title  Preparer's signature	Da	ate	Check if self-	Preparer's SSN or PTIN (	See Gen	. Inst. X
Use Only				EIN Phone n	<b>▶</b> o. <b>▶</b>		

#### SCHEDULE A (Form 990 or 990-EZ)

### **Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

2006

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

90 or 990-EZ

Name of the organization Employer identification number Affordable Housing Resources, Inc. 58-1857324 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 2 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (a) Name and address of each employee paid more (e) Expense (b) Title and average hours account and other than \$50,000 (c) Compensation employee benefit plans & per week devoted to position deferred compensation allowances Barbara Holland Director of 1011 Cherry, Nashville, Lending 40 51437 1530 0 Steve Neighbors Director of 1011 Cherry, Nashville Construction40 106744 0 2483 Jennifer Deal Director of 1011 Cherry, Nashville Neighborhood40 74167 2290 0 Bob Ogle Controller 40 1011 Cherry, Nashville, 94872 2546 0 Total number of other employees paid over \$50,000 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over \$50,000 for professional services Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation AEX Builders Nashville, TN Construction 832062 Everton, Oglesby Askew Architects Nashville, TN Architecture 639499 Diaz Construction Nashville, TN Construction 128472 Mark Sturtevant Nashville, TN Construction 121235 Dan Eaton Nashville, TN Construction 114000 Total number of other contractors receiving over

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

\$50,000 for other services

Schedule A (Form 990 or 990-EZ) 2006

Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	attemp	the year, has the organization attempted to influence national, state, or local legislation, including any to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid red in connection with the lobbying activities   (Must equal amounts on line 38, A, or line of Part VI-B.)	1		Х
	organiz	rations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of bying activities.			
2	substar with an	the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ortial contributors, trustees, directors, officers, creators, key employees, or members of their families, or y taxable organization with which any such person is affiliated as an officer, director, trustee, majority or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the tions.)			
a	Sale, ex	change, or leasing of property?	2a		x
b	Lending	of money or other extension of credit?	2b		х
c	Furnish	ing of goods, services, or facilities?	2c		х
d	Paymer	nt of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		х
е	Transfe	r of any part of its income or assets?	2e		x
3a	Did the	organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation the organization determines that recipients qualify to receive payments.)	3a		х
b	Did the	organization have a section 403(b) annuity plan for its employees?	3b	х	
С	Did the space,	organization receive or hold an easement for conservation purposes, including easements to preserve open the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3с		x
d	Did the	organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	x	
	lines 4f		4a		X
		organization make any taxable distributions under section 4966?	4b		X
		organization make a distribution to a donor, donor advisor, or related person?	4c	l	] X
d	Enter th	e total number of donor advised funds owned at the end of the tax year			0
е	Enter th	e aggregate value of assets held in all donor advised funds owned at the end of the tax year		·-	0
f	funds in	e total number of separate funds or accounts owned at the end of the tax year (excluding donor advised acluded on line 4d) where donors have the right to provide advice on the distribution or investment of s in such funds or accounts		и,	. 0
g	Enter th	e aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			0

Pa —							ions.)				
cer 5	tity '	that the organization is not a privat			•	plicable box.)					
3	Ш	A church, convention of churches	s, or association o	of churches. Section 170	J(b)(1)(A)(i).						
6		A school. Section 170(b)(1)(A)(ii). (	Also complete Pa	art V.)							
7		A hospital or a cooperative hospit	tal service organi:	zation. Section 170(b)(1)	(A)(iii).						
8		A federal, state, or local government	ent or governmer	ntal unit. Section 170(b)(	1)(A)(v).						
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the <b>Support Schedule</b> in Part IV-A.)									
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)									
11b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)									
12	X	An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 331/3% 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). (Also complete the Support Schedule in Part IV-A.)									
13		An organization that is not control requirements of section 509(a)(3).  Type I Type II	Check the box th	ualified persons (other nat describes the type o II-Functionally Integrate	f supporting o	on managers) a organization: ]Type III-Othe					
		Provide the following info	rmation about th	ne supported organizat	ions. (See pad	ge 7 of the inst	ructions.)				
(a) Name(s) of supported organization(s		(a)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the second organization the superior organical control organica	d) upported on listed in pporting zation's documents?	(e) Amount of support				
					Yes	No					
Tota											
· ota	· .		<del></del>	<u> </u>	· · · · · ·	<u> </u>					
14		An organization organized and op	erated to test for	public safety. Section 5	09(a)(4). (See	page 7 of the	instructions.)				

Note	e: You may use the worksheet in the instructions	y a you checked a for converting fro	a box on line 10, om the accrual to	the cash method	asn metnoa of f of accounting.	accounting.
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do					
	not include unusual grants. See line 28.) .	471807	1389757	1162243	1459974	4483781
16	Membership fees received					0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1125330	1294042	889599	1050088	4359059
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	22928	6509	8373	9522	47332
19	Net income from unrelated business activities not included in line 18		0303		3322	0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					0
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	1.600065	0.600000	0000015	0510504	0
24	Line 23 minus line 17	1620065	2690308	2060215	2519584	8890172
25		494735 16201	1396266	1170616	1469496	4531113
26	Enter 1% of line 23	<b>a</b> Enter 2% of	26903	20602	25196 ▶ <b>26</b> a	
b	Prepare a list for your records to show the nan governmental unit or publicly supported organizamount shown in line 26a. <b>Do not file this list wi</b> Total support for section 509(a)(1) test: Enter line	ne of and amount zation) whose tota ith your return.Er ne 24. column (e)	contributed by e I gifts for 2002 the oter the total of all	each person (other crough 2005 exce these excess am	er than a seded the counts > 26b	
d	Add: Amounts from column (e) for lines: 18 22		19 26b		▶ 26d	
e f	Public support (fine 26c minus line 26d total)  Public support percentage (line 26e (numera	_			▶ 26e	%
27	Organizations described on line 12: a Fo person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and i	otal amounts rec	eived in each vea	vere received fro ar from, each "dis	m a "disqualified qualified person."
	(2005) <u>83000</u> (2004)	88500	(2003)	94500	(2002)	72000
b	For any amount included in line 17 that was received show the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:	ved from each pers year, that was mor 5 through 11b, as w	son (other than "de than the larger of the l	isqualified person of (1) the amount Do not file this li or (2), enter the s	s"), prepare a list on line 25 for the	for your records to year or (2) \$5,000.
С	Add: Amounts from column (e) for lines: 15  17 4359059 20					
_	17 <u>4359059</u> 20	0	21	<u> </u>	. ▶ 27c	
d	Add: Line 27a total 338000	and line 27b total		0	► 27a	338000
e	Public support (line 27c total minus line 27d to	tal)			<b>▶</b> 27e	8504840
f	Total support for section 509(a)(2) test: Enter al	mount from line 2	3, column (e)	. ► [27f] 88	301/2	05 67
g h	Public support percentage (line 27e (numera Investment income percentage (line 18, colu	itor) divided by I mn (e) (numerat	ine 27f (denomi or) divided by li	nator)) ne 27f (denomir	► 27g nator)) ► 27h	0 -0
28	Unusual Grants: For an organization describe prepare a list for your records to show, for ear description of the nature of the grant. Do not f	ch year, the name	of the contribute	tor, the date and	amount of the	grant, and a brief

Pa	rt V Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)		<u> </u>	ugo o
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	15-15-1	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
•				
32 a	Does the organization maintain the following:	00		
b	and administrative state	32a		<del>                                     </del>
	basis?	32b		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:		7, .	
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
C	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	<u>.</u>	
e	Educational policies?	33e		
	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
			8-0	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05			
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	1	

Pa	t VI-A Lobbying Expenditures by E (To be completed ONLY by ar	lecting Public	Charities (Se	ee page 10 of t	he instructions	s.)				
Che	ck ▶a ☐ if the organization belongs to an affilia			you checked "a" a		' provisions apply.				
	Limits on Lobbyi (The term "expenditures" mea	- ,			(a) Affiliated group totals	(b) To be completed for all electing organizations				
36	Total lobbying expenditures to influence public	N/A								
37	Total lobbying expenditures to influence a legis									
38	Total lobbying expenditures (add lines 36 and									
39	Other exempt purpose expenditures									
40	Total exempt purpose expenditures (add lines	38 and 39)								
41	Lobbying nontaxable amount. Enter the amount	104	645644							
	If the amount on line 40 is—         The leading of the leading	obbying nontaxa								
	Over \$500,000 but not over \$1,000,000 \$100,0									
		000 plus 10% of th				State of the Anna State of the				
		000 plus 5% of the		1 1000000000		A GALLERY COLUMN				
	Over \$17,000,000 \$1,000	0,000		i j ka						
42	Grassroots nontaxable amount (enter 25% of i	ine 41)		42						
43	Subtract line 42 from line 36. Enter -0- if line 4									
44	Subtract line 41 from line 38. Enter -0- if line 4	I is more than lir	ne 38							
	Caution: If there is an amount on either line 43	3 or line 44, you i	nust file Form 4	720.						
	4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the instructions for lines 45 through 50 on page 13 of the instructions.)									
		ear Averaging P	Period							
	Calendar year (or fiscal year beginning in) ▶	(a)	(b)	(c)	(d)	(e)				
	instal year beginning in)	2006	2005	2004	2003	Total				
45	Lobbying nontaxable amount									
46	Lobbying ceiling amount (150% of line 45(e))		och the star Special Countries							
47	Total lobbying expenditures									
48	Grassroots nontaxable amount									
49	Grassroots ceiling amount (150% of line 48(e))									
50	Grassroots lobbying expenditures									
Pa	rt VI-B Lobbying Activity by Nonele (For reporting only by organiza			Part VI-A) (See	page 13 of the	ne instructions,)				
Duri	ng the year, did the organization attempt to influnct to influnct to influence public opinion on a legislative n	ence national, st	ate or local legis	slation, including	- ·····					
	Volunteers		,							
b	Paid staff or management (Include compensati	on in expenses re	eported on lines	c through h.).						
C	Media advertisements		·			N/A				
d	Mailings to members, legislators, or the public									
6	Publications, or published or broadcast statem									
f	Grants to other organizations for lobbying purp				• •					
g h	Direct contact with legislators, their staffs, government, demonstrations, seminars, conventions				• •	-				
i	Total lobbying expenditures (Add lines <b>c</b> through	ula la V			- Longer and Longer	0				
	If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.									

		A (Form 990 or 990-EZ)	****						age 7
Pa	rt V		n Regarding T ganizations (Se	ransfers To and Transa e page 13 of the instructio	ctions and Rela	ntionships With	None	chari	table
51	Did 501	the reporting orga I(c) of the Code (otl	nization directly or her than section 50	indirectly engage in any of the 1(c)(3) organizations) or in secti	following with any c	other organization d	escribe s?	d in s	ection
a		nsfers from the rep					Yes	No	
(i) Cash							51a(i)		<u> </u>
	(ii)	Other assets .					a(ii)		<u> </u>
b	Oth	er transactions:					Ì		
	(i)	Sales or exchange	es of assets with a	noncharitable exempt organiza	tion		b(i)		
	(ii)	Purchases of asse	ets from a nonchar	itable exempt organization			b(ii)		<u> </u>
	(iii)	Rental of facilities	s, equipment, or oth	ner assets			b(iii)	<u> </u>	
	(iv)	Reimbursement a	ırrangeme <b>nt</b> s . ,			b(iv)	<u> </u>		
	(v)	Loans or loan gua	arantees	. <b></b>			b(v)		
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations			b(vi)	ļ	ļ
C				sts, other assets, or paid emplo			<u>c</u>	<u> </u>	
d 	goo	ids, other assets, o	r services aiven by	complete the following scheduler the reporting organization. If to column (d) the value of the good	he organization recei	ved less than fair i	market narket v	value value	of the in any
	<b>а)</b> е по.	(b) Amount involved	Nome of pers	(c) haritable exempt organization		(d)			
			INAME OF HORG	maritable exempt organization	Description of transfe	ers, transactions, and st	naring arr	angem	ents
<u> </u>	<u> </u>								
								··-	
				-					
					<u> </u>				
						· · ·			
*									
	des	he organization dir cribed in section 50 Yes," complete the	01(c) of the Code (	affiliated with, or related to, or other than section 501(c)(3)) or :	ne or more tax-exen in section 527?		☐ Ye	s [	] No
		(a) Name of organiz	zation	(b) Type of organization	_	(c) escription of relationshi	_		
		. Taking or Digorniz		Type of organization		escription of relationshi	μ		
		····							
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		*******************************				···
			·						
					<del> </del>				
					1				
								······································	
			• • • • • • • • • • • • • • • • • • • •						

## AFFORDABLE HOUSING RESOURCES FIXED ASSET LEDGER

ASSET BUILDINGS	IN-SVC DATE	12-31-04 F/A BAL	2005 ADDITIONS	2005 SALES	12-31-05 E/A BAL	2006 ADDITIONS	2006 SALES	12-31-06 F/A BAL
4 UNITS-BELLSHIRE	Dec-93	0	<u>o</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>o</u>	<u>0</u>
LEASEHOLDS LEASEHOLDS-212								
CAPITOL BLVD	Jan-93	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>o</u>	0
LAND								
6 UNITS-BELLSHIRE	Dec-93	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
SOFTWARE LOAN SYSTEM	Sep-98	4,500	<u>0</u>	<u>o</u>	4,500	0	<u>0</u>	4,500
COMPUTERS NETWORK/ACER SYST	Oct - 98	7,224			5 004			
PC SERV	Jun-99	13,720			7,224 13,720			7,224 13,720
PC SERV	Jul-99	5,565			5,565			5,565
PC SERV OVATION	Aug-99 Mar-00	4,008			4,008			4,008
OVATION	May-00	924 986			924 986			924 986
OVATION	Oct-00	878			878			878
OVATION	Jan-01	1,072			1,072			1,072
CTC-SERVER	Feb-01	12,485			12,485			12,485
2 DELL COMPUTERS DELL COMPUTER	Oct-01 Nov-01	2,186 1,058			2,186 1,058			2,186 1,058
3 DELL COMPUTERS	Mar-02	2,436			2,436			2,436
DELL SERVER	Aug-02	3,808			3,808			3,808
DELL COMPUTER	Aug-02	1,247			1,247			1,247
LAPTOP FROM COMP 2 DELL COMPUTERS	Oct-02	2,375			2,375			2,375
DELL COMPUTER	Jun-03 Jul-03	2,234 699			2,234 699			2,234 699
2 DELL COMPUTERS	Mar-04	2,038			2,038			2,038
2 DELL COMPUTERS	May-04	3,649			3,649			3,649
3 DELL COMPUTERS 2 DELL LSR PRNTRS	Oct-04	2,451 550			2,451			2,451
DELL COMP&PRINTER		0	2,075		550 2,075			550 2,075
2 DELL 4700 COMP	Jul-05	0	1,990		1,990			1,990
DELL EMAIL SERVER		0	2,204		2,204			2,204
DELL 2-DIM 5100 DELL LAT 610	May-06 May-06					2,404		2,404
DELL INSPIRON 640						1,828 1,039		1,828 1,039
DELL SERVER UPGRAI	Jan-07					2,033		1,000
FIREBOX	Mar-07							
		71,593	6,269	<u>0</u>	77,862	5,271	<u>o</u>	83,133
EOUIPMENT								
PHNE EQUIP	Aug-00	1,200			1,200			1,200
NORSTAR EQUIP	Jun-01	1,720			1,720			1,720
VOICE MAIL	Jul-02	3,000			3,000			3,000
SONY PROJECTOR CAMERA-WOLF CAM	Sep-02 Nov-02	1,995 1,400			1,995 1,400			1,995
PHOTOSHOP-WINDOWS		635			635			1,400 635
PHONE EQUIP-EXPAN		0	924		924			924
CANON IMAGERUNNER	Mar-06					2,665		2,665
		9,950	<u>924</u>	<u>0</u>	<u>10,874</u>	<u>2,665</u>	<u>0</u>	<u>13,539</u>
OFFICE BUILDING	_							
1011 CHERRY AVE	Jul-99	275,769			275,769			275,769
BUILD-OUT FRONT ENTRANCE	Aug-99 Dec-00	14,110 295			14,110 295			14,110 295
FRONT ENTRANCE	Feb-01	4,364			4,364			4,364
NEW ROOF	Mar-01	15,487			15,487			15,487
NEW CARPET	Oct-06					1,101		1,101
		310,025	<u>o</u>	<u>o</u>	310,025	1,101	<u>o</u>	311,126
OFICE EXPANSION	Sep-01	101,683	<u>0</u>	<u>0</u>	101,683	<u>o</u>	<u>0</u>	101,683
OFICE EXPANSION 2	May-05	8,896	108,516	<u>0</u>	117,412		<u>o</u>	117,412
OFFICE LAND	Jul-99	53,500	<u>o</u>	<u>0</u>	<u>53,500</u>	<u>o</u>	<u>0</u>	53,500

## AFFORDABLE HOUSING RESOURCES DEPRECIATION

ASSET	IN-SVC DATE	12-31-04 ACC_DEP	2005 DEPREC	2005 SALES	12-31-05 ACC_DEP	2006 DEPREC	2006 SALES	12-31-06 ACC DEP
BUILDINGS 6 UNITS-BELLSHIRE	Dec-93	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
LEASEHOLDS LEASEHOLDS-212 CAPITOL BLVD	Jan-93	<u>o</u>	<u>0</u>	<u>0</u>	<u>o</u>	<u>o</u>	<u>o</u>	<u>o</u>
SOFTWARE LOAN SYSTEM	Sep-98	<u>4,500</u>	<u>o</u>	<u>o</u>	4,500	<u>o</u>	<u>0</u>	4,500
COMPUTERS NETWORK/ACER SYST PC SERV PC SERV PC SERV PC SERV OVATION-3 YTS OVATION-3 YTS OVATION-3 YTS CTC-SERVER-3 YTS 2 DELL COMPUTERS DELL COMPUTERS DELL COMPUTER LAPTOP FROM COMP 2 DELL COMPUTER LAPTOP FROM COMP 2 DELL COMPUTERS DELL COMPUTERS DELL COMPUTERS DELL COMPUTERS DELL COMPUTERS DELL COMPUTERS 2 DELL COMPUTERS 3 DELL COMPUTERS 2 DELL COMPUTERS 2 DELL COMPUTERS 2 DELL COMPUTERS 2 DELL SERVER DELL COMPUTERS 2 DELL SERVER DELL COMPUTERS DELL C	Jun-99 Jul-99 Aug-99 Mar-00 May-00 Oct-00 Jan-01 Feb-01 Oct-01 Mar-02 Aug-02 Aug-02 Oct-02 Jun-03 Jul-03 Mar-04 May-04 Oct-04 Mar-05 Jul-05	7,224 13,720 5,565 4,008 924 986 878 1,072 12,485 2,186 1,058 2,301 3,067 1,005 1,782 1,179 349 566 710 204 46 0	135 741 242 593 745 233 680 1,217 818 184 577 333 61		7,224 13,720 5,565 4,008 924 986 878 1,072 12,485 2,186 1,058 2,436 3,808 1,247 2,375 1,924 582 1,246 1,927 1,022 230 577 333 61	310 117 680 1,217 818 184 692 663 735 534 406		7,224 13,720 5,565 4,008 924 986 878 1,072 12,485 2,186 1,058 2,436 3,808 1,247 2,375 2,234 699 1,926 3,144 1,840 414 1,269 996 796 534 406
DELL INSPIRON 640 DELL SERVER UPGRA FIREBOX	-	<u>61,314</u>	6,559	<u>o</u>	67,812	144 6,500	<u>0</u>	144 74,373
EQUIPMENT		01,514	0,333	<u> </u>	67,812	6,500	<u>u</u>	14,373
PHONE EQUIP NORSTAR EQUIP VOICE MAIL SONY PROJECTOR CAMERA-WOLF CAM PHOTOSHOP PHONE EQUIP-EXPAN CANON IMAGERUNNER	Jun-05	1,060 1,232 1,500 931 607 85	140 344 600 399 280 127 92		1,200 1,576 2,100 1,330 887 212 92	144 600 399 280 127 185 444		1,200 1,720 2,700 1,729 1,167 339 277 444
		5,415	1,982	<u>0</u>	7,397	2,179	<u>0</u>	9,576
OFFICE BUILDING 1011 CHERRY AVE BUILD-OUT FRONT ENTRANCE FRONT ENTRANCE NEW ROOF NEW CARPET	Jul-99 Aug-99 Dec-00 Feb-01 Mar-01 Oct-06	48,149 2,432 44 572 3,869	8,754 449 12 146 1,031	<u>0</u>	56,903 2,881 56 718 4,900	8,754 449 12 146 1,031 28	0	65,657 3,330 68 864 5,931 28
		22,000	10,332	<u>u</u>	93,438	10,420	<u>0</u>	13,018
OFFICE EXPANSION	Sep-01	11,554	3,467	<u>0</u>	15,021	3,467	0	18,488
OFFICE EXPANSION	:May-05	<u>0</u>	2,668		2,668	4,574	<u>0</u>	7,242

#### AHR DEVELOPMENT FIXED ASSET LEDGER

TRUCK

TOTAL DEPRECIATION

ASSET BUILDINGS	IN-SVC DATE	12-31-05 <u>F/A_BAL</u>	2006 ADDITIONS	2006 SALES	12-31-06 F/A_BAL
2 UNITS-BELLSHIRE	Dec-93	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
435 TRINITY LANE	Jan-93	42,398	<u>0</u>	<u>0</u>	42,398
LAND-BELLSHIRE	Dec-93	0	<u>0</u>	<u>o</u>	<u>0</u>
LAND-TRINITY LANE	Apr-01	10,000	<u>0</u>	<u>o</u>	10,000
TRUCK	Feb-03	<u>15,000</u>		<u>0</u>	15,000
AHR DEVELOPMENT DEPRECIATION SCHEI	OUI.E				
ASSET BUILDINGS	IN-SVC DATE	12~31-05 <u>A/D_BAL</u>	2006 ADDITIONS	2006 SALES	12-31-06 A/D_BAL
2 UNITS-BELLSHIRE	Dec-93	0		0	0
435 TRINITY LANE	Apr-01	7,302	1,627	<u>0</u>	8,929

7,302

8,750

<u>16,052</u>

Feb-03

1,627

3,000

4,627

8,929

11,750

20,679

0

<u>0</u>

0

## Affordable Housing Resources, Inc. Board of Directors 2007

#### Brannan Atkinson (President)

(Resident) 3/04 Account Supervisor Atkinson Public Relations 2100 West End Ave #700 Nashville, TN 37203

Work: 320-7532 Fax: 329-2848 Direct: 963-1302

Other: 419-8483

batkinson@atkinsonpr.com

#### John A. Beam. III

(Resident) 3/05

Attorney

Beam, Miller & Rogers P.O. Box 280240

Nashville, TN 37228

Work: 726-3434

Fax: 252-6404 Cell: 414-3390

beam@musiccitylawyer.com

#### Sandra Campbell

(Resident) 3/06

Metro General Sessions Court 100 James Robertson Pkwy Ben West Blda #153

Nashville, TN 37201

Work: 880-3672

Fax: 862-5246 Cell: 310-2404

sandracampbell@jis.nashville.org

#### **David Crane**

(Business) 3/04

Owner, Crane Builders, LLC

195 Riverwood Drive Franklin, TN 37069

Work: 383-0300

Fax: 297-8572 Home: 794-0009

Cell: 642-7801

david@cranebuilders.com

#### **Howard Gentry**

(Government) 3/04

Vice Mayor

3502 Geneva Circle

Nashville, TN 37209

Work: 963-5915 Cell: 320-6080

howard.gentry@nashville.gov

#### **Charley Hankla**

Colliers, Turley, Martin, Tucker 5250 Virginia Way, Suite 100

Nashville, TN 37027 Work: 301-2837 Home: 371-0867

Fax: 301-2958 chankla@ctmt.com

### Reverend William R. Harris (Sec/Treas)

(Resident) 3/05 4117 Home Haven Dr Nashville, TN 37218 Church:327-3578

Home: 876-3075

Cell: 477-8738 Fax: 320-4008

Bobharris44@aol.com wm778@bellsouth.net

#### Dr. Eugene TeSelle

(Resident) 3/05

2007 Linden Avenue

Nashville, TN 37212

Home: 297-2629 Fax: 343-9957

teselle@bellsouth.net

### **Rosemary Plorin**

(Resident) 3/07

2021 Richard Jones Road

Suite 310

Nashville, TN 37215

Work: 297-7766 Fax: 297-4697

rosemary@lovell.com

#### **Betsy Hodgdon**

CTX Mortgage Company 7123 Crossroads Blvd.

# Affordable Housing Resources, Inc. Board of Directors 2007

Suite D
Brentwood, TN 37027
O: 615-277-4984
C: 615-424-5822
betsy.hodgdon@ctxmort.com

Cristina O. Allen

Caliente Consulting
Hispanic Marketing & Special Events
909 Brancaster Lane
Nashville, TN 37211
Tel: 615.369.3010
Fax: 615.831.3194

www.calienteconsulting.com cristina@calienteconsulting.com W. Perry Blandford

Ernst & Young LLP

SunTrust Financial Center

424 Church St. Center, Suite 1100

Nashville, TN 37219

Work: 252-2000 Direct: 252-2005

Fax: 242-9128

william.blandford@ey.com

## Affordable Housing Resources, Inc. Officers 2007

E. D. Latimer (CEO)
Affordable Housing Resources, Inc.
1011 Cherry Avenue
Nashville, TN 37203
Work: 251-0025
Fax: 256-9836

elatimer@ahrhousing.org

Janiro Hawkins (Deputy Director)
Affordable Housing Resources, Inc.
1011 Cherry Avenue
Nashville, TN 37203
Work: 251-0025
Fax: 256-9836

jhawkins@ahrhousing.org