PUBLIC DISCLOSURE COPY

(Rev. January 2020)

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

A For the 2019 calendar year, or tax year beginning

and ending JUN 30, 2020

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

JUL 1, 2019

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

Open to Public Inspection

OMB No. 1545-0047

В	Check if applicable:	C Name of organization			D Employer ide	entificat	ion number			
	Address	HOUSING TRUST SILICON VALLEY								
	change Name change	Doing business as			77-0545	135				
	Initial return	Number and street (or P.O. box if mail is not deliv	ered to street address)	Room/suite	E Telephone nu					
	Final return/	75 E. SANTA CLARA STREET	·	L350	(408) 703					
	termin- ated	City or town, state or province, country, and Z	P or foreign postal code		G Gross receipts \$		36,075,	278.		
	Amende return		3 1		H(a) Is this a gro	up retur	'n			
	Applica tion	F Name and address of principal officer: κΕντίν	ZWICK		for subordir	•		No		
	pending	SAME AS C ABOVE			H(b) Are all subordin			No		
			(insert no.) 4947(a)(1) d	or 527	If "No," atta	ch a list	(see instructions	s)		
J	Website	www.Housingtrustsv.org			H(c) Group exen	nption n	umber 🕨			
		- gameanon	ociation Other >	L Year	of formation: 2000	M S	tate of legal domicil	le: CA		
Р		Summary								
	, 1 E	Briefly describe the organization's mission or most s			HOUSING TRUST					
Concuration		SILICON VALLEY IS TO MAKE BAY AREA A MO								
Š	<u> </u>		inued its operations or dispos	ed of more	than 25% of its ne	1 1	S.			
Š	<u> </u>	Number of voting members of the governing body (F	, , , , , , , , , , , , , , , , , , , ,			3		20		
		Number of independent voting members of the gove				4		20		
	<u>6</u> 5 7	otal number of individuals employed in calendar ye				5		34		
Activition 9	6 7	otal number of volunteers (estimate if necessary)				6		20		
2	7a] د ا .	otal unrelated business revenue from Part VIII, colu				7a		0.		
_	l br	Net unrelated business taxable income from Form 99	90-1, line 39			7b	0			
	, ,	Contributions and grants (Part VIII line 1h)			Prior Year 8,548,3	10	Current Year 15,224,			
9	8 (5,318,9		8,335,				
	9 F				1,067,7		· · · ·	974.		
Č	10	nvestment income (Part VIII, column (A), lines 3, 4, a			-22,6		·	805.		
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9			14,912,4		24,483,			
_		<u>otal revenue - add lines 8 through 11 (must equal P</u> Grants and similar amounts paid (Part IX, column (A)			724,4		· · · ·	809.		
	1	Benefits paid to or for members (Part IX, column (A),			, , _	0.	,	0.		
	45 6	Salaries, other compensation, employee benefits (Partix)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2,682,8		3,075,			
Č	n 16a E	Professional fundraising fees (Part IX, column (A), lin			_,,-	0.	-,,	0.		
Ş		otal fundraising expenses (Part IX, column (D), line								
L	3 ₁₇ (Other expenses (Part IX, column (A), lines 11a-11d, 1			3,490,7	00.	6,144,	733.		
		otal expenses. Add lines 13-17 (must equal Part IX,			6,897,9		9,602,			
	1	Revenue less expenses. Subtract line 18 from line 12			8,014,4		14,880,	956.		
or	S				ginning of Current Y	ear	End of Year			
t Assets	텔 20 기	otal assets (Part X, line 16)			166,578,8	51.	223,956,	871.		
Ass	සූ වූ 21 1	otal liabilities (Part X, line 26)			91,517,9	96.	134,111,	912.		
Net	a	Net assets or fund balances. Subtract line 21 from li	ne 20		75,060,8	55.	89,844,	959.		
P	art II	Signature Block								
Un	der penal	ties of perjury, I declare that I have examined this return, in	ncluding accompanying schedules	and stateme	nts, and to the best	of my kn	owledge and belief,	it is		
tru	e, correct	, and complete. Declaration of preparer (other than officer)	is based on all information of wh	ich preparer	has any knowledge.					
					L					
Si	gn	Signature of officer			Date					
He	ere	JULIE MAHOWALD, CFO								
_		Type or print name and title		l r)oto I a		DTIM			
_			Preparer's signature		Oate Che	CK	PTIN			
Pa	-	ONG ZHANG, CPA		04	1/09/21 self Firm's EIN	employed	P01249785 2-0714325			
	·									
US	e Only	Firm's address 1861 INTERNATIONAL DRIVE,	SUITE 400			702 2	36 6400			
_		MCLEAN, VA 22102	<u> </u>		Phone no	./03-3	36-6400			
Ma	ay the IR	S discuss this return with the preparer shown above	e? (see instructions)				X Yes	No		

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE MISSION OF HOUSING TRUST SILICON VALLEY IS TO MAKE BAY AREA A MORE	
	AFFORDABLE PLACE TO LIVE. WE MAKE LOANS AND GRANTS TO INCREASE THE	
	SUPPLY OF AFFORDABLE HOUSING, ASSIST FIRST-TIME HOMEBUYERS, PREVENT	
	HOMELESSNESS AND STABILIZE NEIGHBORHOODS.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	d by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the tot	al expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 5,551,650. including grants of \$ 9,091.) (Revenue \$	7,456,169.
	THE COMPETITIVE REAL ESTATE MARKET IN THE GREATER BAY AREA CREATES A	
	CHALLENGING ENVIRONMENT FOR AFFORDABLE HOUSING DEVELOPMENT. HOUSING	
	TRUST - WHICH MAKES MORE LOANS THAN ANY OTHER NONPROFIT HOUSING LENDER	
	IN OUR REGION - IS HERE TO HELP. SINCE 2000, HOUSING TRUST HAS MADE	
	LOANS TO 156 AFFORDABLE HOUSING PROJECTS, TOTALING OVER \$298 MILLION IN	
	FUNDING AND RESULTING IN 11,419 AFFORDABLE RENTAL HOMES. OUR BORROWERS	
	ARE TYPICALLY COMMUNITY-BASED, NON-PROFIT AND MISSION ALIGNED	
	FOR-PROFIT AFFORDABLE HOUSING DEVELOPERS WHOSE COLLECTIVE MISSION IS TO	
	INCREASE AND PRESERVE THE AFFORDABLE HOUSING STOCK IN THE COMMUNITIES	
	THEY SERVE, AND BY SO DOING, REVITALIZE SUCH COMMUNITIES. WE LEND IN	
	THE GREATER BAY AREA INCLUDING ALAMEDA, CONTRA COSTA, MARIN, MONTEREY,	
	NAPA, SAN BENITO, SAN FRANCISCO, SAN JOAQUIN, SAN MATEO, SANTA CLARA,	
4b	(Code:) (Expenses \$ 706 , 336 . including grants of \$) (Revenue \$	621,137.
710	SIX-FIGURE DOWN PAYMENTS CAN PUT THE DREAM OF HOMEOWNERSHIP OUT OF	7
	REACH. HOUSING TRUST OFFERS FIRST TIME HOMEBUYERS THE EDUCATION AND	
	COUNSELING, DEFERRED INTEREST LOANS AND BELOW MARKET PURCHASE PROGRAMS	
	THAT CAN BRING THAT DREAM CLOSER TO REALITY. HOUSING TRUST'S HOMEBUYER	
	TEAM OFFERS HOMEBUYER AND FINANCIAL LITERACY EDUCATION IN GROUP	
	SETTINGS AS WELL AS ONE-ON-ONE SESSIONS THAT COVER TOPICS INCLUDING	
	SAVING FOR A DOWN PAYMENT AND RESERVES, HOW TO SELECT AND WORK WITH	
	REALTORS AND MORTGAGE LOAN OFFICERS AND WHAT TO EXPECT UPON CLOSING ON	
	A NEW HOME. HOUSING TRUST'S FINANCIAL PRODUCTS REDUCE THE BURDEN OF 20%	
	DOWN PAYMENT REQUIREMENTS AND BRIDGE THE GAP BETWEEN WHAT LOW- TO	
	MIDDLE-INCOME BUYERS CAN AFFORD TO BORROW AND THE EQUITY REQUIRED TO DO	
	SO. SINCE 2000 WE HAVE OFFERED HOMEBUYER DOWN PAYMENT ASSISTANCE AS	
4c	(Code:) (Expenses \$ 404,836. including grants of \$ 364,718.) (Revenue \$	
40	WE HELP NEIGHBORS EXPERIENCING HOMELESSNESS MOVE OFF THE STREETS AND	
	INTO HOMES, THIS IS A VITAL PIECE OF OUR COMPREHENSIVE MISSION, HELPING	
	OUR COMMUNITIES' LOWEST INCOME HOUSEHOLDS ACHIEVE STABILITY. HOUSING	
	TRUST HAS GRANT PROGRAMS THAT STRENGTHEN AND EXPAND CAPACITY OF SOCIAL	
	SAFETY NET PROVIDERS AND PROVIDE THE FINAL KEY TO INDIVIDUALS AND	
	FAMILIES TO PREVENT OR EXIT HOMELESSNESS. HOUSING TRUST PARTNERS WITH	
	SOCIAL SERVICE AGENCIES TO MAKE SECURITY DEPOSITS ASSISTANCE TO HOUSEHOLDS EXPEDIENCING OF AT DISK OF HOMELESSNESS ALLOWING FAMILIES	
	HOUSEHOLDS EXPERIENCING OR AT RISK OF HOMELESSNESS, ALLOWING FAMILIES TO MOVE THIS DEPMANENT HOUSING SINCE 2000 HOUSING TRUST HAS ALSO	
	TO MOVE INTO PERMANENT HOUSING. SINCE 2000, HOUSING TRUST HAS ALSO	
	HELPED 7,504 PEOPLE WITH OUR HOMELESSNESS ASSISTANCE GRANTS, TOTALING	
	\$5.3 MILLION. THESE PROGRAMS REACH THOSE AT THE VERY LOW END OF THE	
	INCOME SPECTRUM, WITH OVER 80% OF FUNDS REACHING EXTREMELY LOW-INCOME	
4d	Other program services (Describe on Schedule O.)	005
		,895.)
46	Total program service expenses 7.488.077.	

Form 990 (2019) HOUSING TRUST SILICON VALLEY Part IV Checklist of Required Schedules

			162	INO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	L
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	15		Х
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	16		Х
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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
		20b		
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	21	Х	
			200	

Form 990 (2019) HOUSING TRUST SILICON VALLEY

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	l		
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
ام	any tax-exempt bonds?	24c 24d		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		\vdash
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		\vdash
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	<u> </u>
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 104 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
C	(gambling) winnings to prize winners?	1c	Х	
	V V			4

77-0545135

Form 990 (2019) HOUSING TRUST SILICON VALLEY

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 3	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account,	ccount)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Action (Control of Foreign Bank) and Financial (C	counts (FBAR).			
5a			<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				_v
	any contributions that were not tax deductible as charitable contributions?		6a		Х
р	If "Yes," did the organization include with every solicitation an express statement that such contribution are expressed as the state of the state o				
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	visce provided to the pover?	7-		х
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and sense. If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	s required	10		
·	to file Form 8282?	•	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	•	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file For		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots		9b		
10	Section 501(c)(7) organizations. Enter:	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	_		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4		
11	Section 501(c)(12) organizations. Enter:	1			
а		11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	146			
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b 10412	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	-		
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.		104		
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
	Did the second of the second o		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			000	

Form 990 (2019) HOUSING TRUST SILICON VALLEY 77-0545135 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

							X
Sec	tion A. Governing Body and Management						
		1 1				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		20			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with ar	ny other				
	officer, director, trustee, or key employee?			.	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision				
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form				4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		Х
6	Did the organization have members or stockholders?			-	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint o	ne or				
	more members of the governing body?			.	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockholo	lers, or				
	persons other than the governing body?			. L	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the	following:				
а	The governing body?			.	8a	Х	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real						
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	<u>evenue C</u>	Gode.)				
				_		Yes	No
	Did the organization have local chapters, branches, or affiliates?			-	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapters,	affiliates,				
				·· ⊢	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly before	filing the form?	- 1	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			├	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If $^{"}$	Yes," de	scribe				
	in Schedule O how this was done			. -	12c	X	
13	Did the organization have a written whistleblower policy?			├	13	X	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approv	-	ependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					v	
	The organization's CEO, Executive Director, or top management official				15a	X	
b	Other officers or key employees of the organization			.	15b	X	
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		L _				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange				10-		Х
	taxable entity during the year?			.	16a		Α
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation is in the organization and the organization of the organi	-	•				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga				4Ch		
Sec	exempt status with respect to such arrangements? tion C. Disclosure			- 1	16b		
17 18	List the states with which a copy of this Form 990 is required to be filed ►CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 000 T	(Section 501/a)	/(3/~ -	oply)	availa	hle
10	for public inspection. Indicate how you made these available. Check all that apply.	iu 330-1	(06011011 001 (0)	_{/(} U)S (orny)	uvand	OI C
		n on O=1	adula Ol				
19	Was own website Was Another's website Was Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, continuous		,	and f	inano	ial	
13	statements available to the public during the tax year.	ornact Of	microst policy,	uiiU l	ıı ıaı ıC	nai	
20	State the name, address, and telephone number of the person who possesses the organization's bo	nks and	records -				
	JULIE MAHOWALD, CFO - (408) 703-3837	CINO AITO					
	75 F CANTA CLADA CEDERT CHITTE 1350 CAN JOSE CA 95113						

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

• 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 r	(C)					isate	(D)	(F)		
(A) (B) Name and title Average				Pos	ition			Reportable	(E) Reportable	Estimated
	hours per	box	, unles	ss per	rson i	than o	n an	compensation	compensation	amount of
	week		cer an	d a d	irecto	r/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	or di	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	ıl trus		ee/	m pen		(***-2/1099-10130)		and related
	below	dualt	Institutional trustee	-	Key employee	Highest compensated employee	er			organizations
	line)	Indiv	Instit	Officer	Key e	Highe empl	Former			
(1) CRAIG ROBINSON	4.00									
CHAIR		Х		Х				0.	0.	0.
(2) LORENA MENDEZ-QUEZADA	1.00									
FIRST VICE-CHAIR		Х		Х				0.	0.	0.
(3) KATIA KAMANGAR	1.00									
SECOND VICE-CHAIR		Х		Х				0.	0.	0.
(4) ART FATUM	1.00									
TREASURER	1 00	Х		Х				0.	0.	0.
(5) SHILOH BALLARD	1.00									
SECRETARY	1 00	Х		Х				0.	0.	0.
(6) JOE ANZALONE	1.00	,								_
(7) MIKE BEASLEY	1 00	Х						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	_
(8) GEORGE BROWN	1.00	Λ						0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0.
(9) MARY CHANDLER	1.00	21						· · ·	· ·	<u>.</u>
DIRECTOR	1.00	х						0.	0.	0.
(10) KEVIN DEEBLE	1.00								•	<u>·</u>
DIRECTOR		х						0.	0.	0.
(11) THANG DO	1.00									
DIRECTOR		х						0.	0.	0.
(12) JONATHAN FEARN	1.00									
DIRECTOR		х						0.	0.	0.
(13) PAPIA GAMBELIN	1.00									
DIRECTOR		Х						0.	0.	0.
(14) CANDICE GONZALEZ	1.00									
DIRECTOR		х						0.	0.	0.
(15) LISA GUTIERREZ	1.00									
DIRECTOR		Х						0.	0.	0.
(16) SHARON LEE	1.00									
DIRECTOR		Х						0.	0.	0.
(17) JIM MORGENSEN	1.00									
DIRECTOR		Х						0.	0.	0.

Form **990** (2019) 932007 01-20-20

10111330 (2013)										r ago -		
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)			(0	C)			(D)	(E)	(F)		
Name and title	Average hours per week	box	not c , unles cer an	ss per	more son i	than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other		
	(list any hours for related organizations below line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(18) HILDA RAMIREZ	1.00											
DIRECTOR		Х						0.	0.	0.		
(19) MEG MCGRAW-SCHERER	1.00											
DIRECTOR		Х						0.	0.	0.		
(20) RACHEL COLTON (ENDING 01/31/20)	1.00											
DIRECTOR		Х						0.	0.	0.		
(21) SPARKY HARLAN	1.00											
DIRECTOR		Х						0.	0.	0.		
(22) NATHAN HO (ENDING 08/23/19) DIRECTOR	1.00	x						0.	0.	0.		
(23) KEVIN ZWICK	40.00											
CHIEF EXECUTIVE OFFICER				х				265,222.	0.	40,751.		
(24) JULIE MAHOWALD	40.00											
CHIEF FINANCIAL OFFICER				х				199,801.	0.	19,020.		
(25) CRAIG MIZUSHIMA	40.00											
CHIEF COMPLIANCE & RISK OFFICER				х				145,947.	0.	24,978.		
(26) JULIE QUINN	40.00											
CHIEF DEVELOPMENT OFFICER				Х				133,762.	0.	7,872.		
1b Subtotal							▶	744,732.	0.	92,621.		
c Total from continuation sheets to Part VI	I, Section A							244,427.	0.	37,173.		
d Total (add lines 1b and 1c)			<u></u>				_	989,159.	0.	129,794.		
2 Total number of individuals (including but n							o re	ceived more than \$100.	000 of reportable			

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

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
RSM US LLP		
5155 PAYSPHERE CIRCLE, CHICAGO, IL 60674	AUDIT AND TAX SERVICES	122,060.

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

Form 990 HOUSING TRUS!	I SILICON V	АЬЬ	ΕY						77-05451	135
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd H	lighe	est	Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(cl				арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	١.				yee		the	organizations	compensation
	(list any	rector				old me		organization	(W-2/1099-MISC)	from the
	hours for	ordi	96			ated		(W-2/1099-MISC)		organization
	related organizations	ustee	trust		99	ubeus				and related organizations
	below	dual tr	tiona	_	nploy	stcor	_			Organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) FATHIA MACAULEY	40.00	_	_		_	_				
CHIEF LENDING OFFICER	10.00			Х				39,835.	0.	3,716.
(28) ADRIA Y QUINONES-MASUR	40.00							02,000.	••	0,720.
DIRECTOR, HOMEBUYER PROGRAMS						х		103,191.	0.	7,683.
(29) VIVIAN VO	40.00									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ACCOUNTING MANAGER						х		101,401.	0.	25,774.
		ł								
		}								
			\vdash			\vdash				
		1								
			\vdash		\vdash					
Total to Part VII, Section A, line 1c								244,427.		37,173.
TOTAL TO LAIL VII, OCCUOLITA, IIIIC TO								,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Form 990 (2019) HOUSING TRE
Part VIII Statement of Revenue

		Check if Schedule O co	ontains a	response	or note to any line	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							lunction revenue	business revenue	sections 512 - 514
ည တ	1 a	Federated campaigns		1a					
au nu				1b					
ΩĔ		Fundraising events		1c	348,619.				
ifts		Related organizations		1d	·				
nis G		Government grants (contrib		1e	890,333.				
Sir		All other contributions, gifts, g		-	·				
e E	-	similar amounts not included a		1f	13,985,496.				
	g			1g \$, ,				
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f		·3 +		15,224,448.			
		Totally last mice fair			Business Code				
o l	2 a	INTEREST INCOME ON I	LOA		531390	5,579,314.	5,579,314.		
ķ	_ b	PROGRAM SERVICE FEE			531390	2,755,888.	2,755,888.		
Ser	c						, ,		
E S	d								
gra Re	۰ و								
Program Service Revenue	f	All other program service re	evenue						
		Total. Add lines 2a-2f				8,335,202.			
	3	Investment income (includi				, , ,			
	Ū	other similar amounts)				826,677.			826,677.
	4	Income from investment of				,			· · · · · · · · · · · · · · · · · · ·
	5	Royalties		-	- I				
	Ū	1 loyurilos	() Real	(ii) Personal				
	6 a	Gross rents	6a	,					
	b		6b						
	c	Rental income or (loss)	6c						
	d	Net rental income or (loss)			•				
		Gross amount from sales of	(i) S	ecurities	(ii) Other				
	, u			540,536.	(,,				
	h	Less: cost or other basis	, u						
<u>o</u>	-		7b 11.5	524,239.					
eun	c	Gain or (loss)		16,297.					
Revenue	d	Net gain or (loss)				116,297.			116,297.
ther F		Gross income from fundraising				, -			, -
Đ.	0 4	including \$3							
		contributions reported on I							
		Part IV, line 18	,		46,416.				
	b	Less: direct expenses		I					
		Net income or (loss) from fi				-20,804.			-20,804.
		Gross income from gaming							
		Part IV, line 19	-						
	b	Less: direct expenses							
		Net income or (loss) from g							
		Gross sales of inventory, le							
		and allowances							
	b	Less: cost of goods sold							
		Net income or (loss) from s							
		, , =	<u>::</u>		Business Code				
Miscellaneous Revenue	11 a	OTHER INCOME			900099	1,999.			1,999.
ane inte	b								
eve	С								
Aisc	d	All other revenue							
2		Total. Add lines 11a-11d)	1,999.			
	12	Total revenue. See instruction	ns		>	24,483,819.	8,335,202.	0.	924,169.

77-0545135

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).

Do not include amounts reported on lines 60, Page 20, 86, 80, 80, and 100 of Part VIII.	0001	on 501(c)(3) and 501(c)(4) organizations must comple Check if Schedule O contains a respons			proto corarriir (r y.	
Totals and other assistance to domestic organizations and domestic governments. See Part IV, line 21 159,091. 159,092.	Do i	· I	(A)	(B)	(C)	(D)
and domestic povernments. See Part IV, line 21		• • • • • • • • • • • • • • • • • • • •	Total expenses			
2 Gards and other assistance to domestic individuals. See Part IV, line 22	1	Grants and other assistance to domestic organizations				
Individuals, See Part V, line 22 223,718, 223,718,		and domestic governments. See Part IV, line 21	159,091.	159,091.		
3 Grafts 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 6 Compensation of included above to disqualified persons (as defined under section 4986(f)(17) and persons described in section 4986(f) and	2	Grants and other assistance to domestic				
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		individuals. See Part IV, line 22	223,718.	223,718.		
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 950,990. 417,753. 421,347. 111,890. 6 Compensation not included above to disqualified persons (as officined in section 4958(IV)(II) and persons (ascribed in section 4958(IV)(III) and persons (ascribed in section 4958(IV)) and 400(II) ampleyer contributions (Include section 401(IV) and 400(III) ampleyer contributions (III) and III) and III, III, III, III, III, III, III, II	3	Grants and other assistance to foreign				
## Benefits paid to or for members 950,990 417,753 421,347 111,890						
5 Compensation of current officers, directors, trustees, and key employees 950,990. 417,753. 421,347. 111,890. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(f)) and persons described in section 4958(f)(f) and 405(f) employer contributions (include section 401(f)) and 401(f) employer (include section 401(f)						
Trustees, and Keye miptoyees 950, 990, 417,753, 422,347, 111,890.	4					
6 Compensation not included above to disqualified persons (as defined under section 4958(pt(1)) and persons described in section 4901(k) and 403(t) employer contributions (include section 401(k) and 403(t) employer contribution 401(k) and 403(t) employer contributions (include section 401(k) and 403(t) employer contribution 401(k) and 403(t) employer contributions emplo	5	•	252 222	445 550	404 045	444 000
persons (as defined under section 4986/ft/1) and persons described in section 4986/ft/1) and persons described in section 4986/ft/1) and approximate the section 408/ft/2 and 403(0) employee contributions (include section 401(k) and 403(0) employee contributions) 9 Other employee benefits			950,990.	417,753.	421,347.	111,890.
persons described in section 4958(c)(3)(B) 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 111, 448. 60,035. 38,671. 12,742. 10 Payroll taxes 174,568. 105,815. 47,405. 21,348. 11 Fees for services (concemployees): a Management b Legal C Accounting 1 Lobbying Professional fundraising services. See Part IV, line 17 I Investment management fees G Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 88,277. 6,987. 1,511. 79,779. 13 Office expenses 142,749. 42,749. 42,749. 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expensess to rar ny federal, state, or local public Officials 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 11 Payments to affiliates 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliates 10 Personal fundraising services on Sch 0.) 2 Payments to affiliates 10 Depreciation, depletion, and amortization 17 Fayed 18 Payments of travel or entertainment expenses to any federal, state, or local public Officials 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliates 10 Depreciation, depletion, and amortization 17 Fayed 18 Payments to affiliates 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliates 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliates 10 Depreciation, depletion, and amortization 17 Fayed 18 Payments to affiliates 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliates 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliates 19 Conferences, conventions, and meetings 1,694,052. 1,694,052. 1 Payments to affiliate deepenses on Schedule (0) 2 Payments to affiliate deepenses on Schedule (0) 3 Payments to affiliate deepenses on Schedule (0) 4 Payments of travel or on the appearation reported in column	6	·				
To Other salaries and wages Pension plan accusals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Other employee benefits 111, 448. 00, 035. 38, 671. 12, 742. 252, 891. 150, 610. 75, 607. 26, 674. 174, 568. 115, 567. 26, 674. 174, 568. 116, 515. 174, 405. 21, 348. These for services (nonemployees): a Management b Legal C Accounting Other comployees See Part IV, line 17 f Investment management fees Other, Iffiline 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion Other expenses Travel Occupancy 10 Conferences, conventions, and meetings Ontered, Iffine 11g amount expenses for any federal, state, or local public officials Payments to affiliates Onterences, conventions, and meetings Ontered, Iffine 12g amount expenses on Sch 0.) Payments to affiliates Operation of travel or entertainment expenses for any federal, state, or local public officials Payments to infiliates Onterences, conventions, and meetings Onteres (Instead and amortization and amortization and amortization should be supposed above (Is intime 24e amount exceeds 10% of line 25, column (A) amount, list line 110 expenses 11 Conventions and amortization and amortiz						
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 111, 448. 60,035. 38,671. 12,742. 26,674. 10 Payroll taxes 174,568. 105,815. 47,405. 21,348. 11 Fees for services (nonemployees): 8 Management 10 Legal 552,228. 552,228. 124,619. 12	_		1 505 424	1 050 479	267 110	167 927
section 401(k) and 403(b) employer contributions) 252,991, 150,610, 75,607, 26,674, 252,991, 150,610, 75,607, 26,674, 11 Fees for services (nonemployees): a Management b Legal			1,305,424.	1,030,478.	307,119.	107,027.
9 Other employee benefits	8		111 110	EU USE	38 671	12 7/2
10 Payroll taxes	•				<u>'</u>	
11 Fees for services (nonemployees): a Management b Legal						
a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Agrantising and promotion 14 Advertising and promotion 15 Royalties 16 Occupancy 17 Tavel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Royaltisting 24 expenses on line 24e. If line 24e expenses on line			174,500.	103,013.	17,103.	21,340.
b Legal 52, 228. 52, 228.						
C Accounting	_		52 228		52 228	
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 Sch O.) 22 Advertising and promotion 88,277. 6,987. 1,511. 79,779. 23 Office expenses 34,736. 24,319. 7,923. 2,494. 14 Information technology 15 Royalties 27,477. 20,345. 67,833. 22,763. 17 Travel 27,477. 20,345. 6,484. 648. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 70. 19 Conferences, conventions, and meetings 7,066. 6,080. 986. 10 Interest 1,604,052. 1,604,052. 21 Payments to affiliates 2. 22 Depreciation, depletion, and amortization 76,386. 53,542. 17,104. 5,740. 23 Insurance 37,125. 750. 36,375. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School 11, 800. 11, 800. 25 Total functional expenses. Add lines 1 through 24e 9,602,863. 7,488,077. 1,573,591. 541,195. 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 tree 1 Intercolours and solicitation. Check tree 1 Intercolours and solicitation. Check tree 1 Intercolours and solicitation.				13 088.		
e Professional fundraising services. See Part IV, line 17 f Investment management fees						
f Investment management fees 42,749. 42,749. g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 569,897. 285,235. 208,616. 76,046. 12 Advertising and promotion 88,277. 6,987. 1,511. 79,779. 13 Office expenses 34,736. 24,319. 7,923. 2,494. 14 Information technology 302,935. 212,339. 67,833. 22,763. 16 Occupancy 302,935. 212,339. 67,833. 22,763. 17 Travel 27,477. 20,345. 6,484. 648. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 7,066. 6,080. 986. 19 Conferences, conventions, and meetings in Interest 1,604,052. 1,604,052. 1 11 Payments to affiliates 2 2 2 1,71,044. 5,740. 20 Interest amount exceeds 10% of line 25, column (a) amount, list line 24e amount exceeds 10% of line 25, column (b) amount, list line 24e amount exceeds 10% of line 25, column (a) amount, list line 24e axpress on Schoule C.) 2,975,464. 2,975,464. 2,975,464. 2 1,						
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion 88,277. 6,987. 1,511. 79,779. Office expenses 34,736. 24,319. 7,923. 2,494. Information technology 9 Royalties 9 Cocupancy 302,935. 212,339. 67,833. 22,763. 9 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 1,604,052. 1,604,052. 1 Payments to affiliates 9 Depreciation, depletion, and amortization 76,386. 53,542. 17,104. 5,740. 1 Insurance 10 Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) PONITION FOR LOAN LOSS 2,975,464. 2,975,464. 1 DONATIONS & SPONSORSHIP 59,000. 47,200. 11,800. 9 Interest 10 Joint costs. Complete this line only if the organization reported in column (B) lpint costs from a combined educational campaign and fundraising solicitation. Check there ▶	_	· · · · · · · · · · · · · · · · · · ·	42,749.		42,749.	
column (A) amount, list line 11g expenses on Sch 0.) 569,897. 285,235. 208,616. 76,046. Advertising and promotion 88,277. 6,987. 1,511. 79,779. Office expenses 34,736. 24,319. 7,923. 2,494. Information technology 57. 24,319. 7,923. 2,494. Information technology 57. 221,339. 67,833. 22,763. Travel 77. 20,345. 6,484. 648. 648. Payments of travel or entertainment expenses for any federal, state, or local public officials 7,066. 6,080. 986. 11,604,052. 1,604,052. 11			,		,	
12 Advertising and promotion 88,277. 6,987. 1,511. 79,779. 13 Office expenses 34,736. 24,319. 7,923. 2,494. 14 Information technology	3	,	569,897.	285,235.	208,616.	76,046.
13 Office expenses 34,736. 24,319. 7,923. 2,494. 14 Information technology 15 Royalties	12	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	88,277.	6,987.	1,511.	
14 Information technology 15 Royatties 16 Occupancy 17 Travel 27,477. 20,345. 6,484. 648. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 7,066. 6,080. 986. 19 Conferences, conventions, and meetings 7,066. 6,080. 986. 20 Interest 1,604,052. 1,604,052. 21 Payments to affiliates 2 22 Depreciation, depletion, and amortization 76,386. 53,542. 17,104. 5,740. 23 Insurance 37,125. 750. 36,375. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on Inie 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 2,975,464. 2,975,464. a PROVISION FOR LOAN LOSS 2,975,464. 2,975,464. 41,214. 13,244. c DONATIONS & SPONSORSHIP 59,000. 47,200. 11,800. d e All other expenses Ald incurrent payments and fundraising solicitation. Onest here lance of the payments and fundraising solicitation. Onest here lance of the	13		34,736.	24,319.	7,923.	
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 11, 604,052. 11, 604,052. 120 Interest 120 Depreciation, depletion, and amortization 131 Insurance 14 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 15 PROVISION FOR LOAN LOSS 16 ONATIONS & SPONSORSHIP 27 OLOANTIONS & SPONSORSHIP 28 All other expenses. Add lines 1 through 24e 29 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. 17 Check here	14					
16 Occupancy 302,935. 212,339. 67,833. 22,763. 17 Travel 27,477. 20,345. 6,484. 648. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials conferences, conventions, and meetings 7,066. 6,080. 986. 19 Conferences, conventions, and meetings 7,066. 6,080. 986. 20 Interest 1,604,052. 1,604,052. 21 Payments to affiliates 76,386. 53,542. 17,104. 5,740. 23 Insurance 37,125. 750. 36,375. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 2 PROVISION FOR LOAN LOSS 07,975,464. 2,975,464. 00 THER OPERATING EXPENSE 125,634. 71,176. 41,214. 13,244. 00 THER	15					
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for any federal, state, or local public officials 19 Conferences, conventions, and meetings	17		27,477.	20,345.	6,484.	648.
19 Conferences, conventions, and meetings 7,066. 6,080. 986. 20 Interest 1,604,052. 1,604,052. 21 Payments to affiliates 2 22 Depreciation, depletion, and amortization 76,386. 53,542. 17,104. 5,740. 23 Insurance 37,125. 750. 36,375. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 24 PROVISION FOR LOAN LOSS 2,975,464. 2,975,464. 25 OTHER OPERATING EXPENSE 125,634. 71,176. 41,214. 13,244. 26 DONATIONS & SPONSORSHIP 59,000. 47,200. 11,800. 27 Total functional expenses. Add lines 1 through 24e 9,602,863. 7,488,077. 1,573,591. 541,195. 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	18	Payments of travel or entertainment expenses				
20 Interest		for any federal, state, or local public officials				
21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a PROVISION FOR LOAN LOSS b OTHER OPERATING EXPENSE c DONATIONS & SPONSORSHIP d All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here infollowing SOP 98-2 (ASC 958-720)	19	Conferences, conventions, and meetings			986.	
22 Depreciation, depletion, and amortization	20		1,604,052.	1,604,052.		
Insurance 37,125. 750. 36,375. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a PROVISION FOR LOAN LOSS b OTHER OPERATING EXPENSE 125,634. 71,176. 41,214. 13,244. c DONATIONS & SPONSORSHIP 59,000. 47,200. 11,800. d All other expenses 25 Total functional expenses. Add lines 1 through 24e 9,602,863. 7,488,077. 1,573,591. 541,195. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	21	Payments to affiliates				
Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a PROVISION FOR LOAN LOSS b OTHER OPERATING EXPENSE DONATIONS & SPONSORSHIP Total functional expenses. Add lines 1 through 24e All other expenses 25 Total functional expenses. Add lines 1 through 24e All other expenses	22	Depreciation, depletion, and amortization	·			5,740.
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PROVISION FOR LOAN LOSS 2,975,464. 2,975,464. DONATIONS & SPONSORSHIP DONATIONS & SPONSORSHIP All other expenses Total functional expenses. Add lines 1 through 24e 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	24	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
b OTHER OPERATING EXPENSE DONATIONS & SPONSORSHIP e All other expenses Total functional expenses. Add lines 1 through 24e 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	а		2,975,464.	2,975,464.		
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d e All other expenses 25 Total functional expenses. Add lines 1 through 24e 9,602,863. 7,488,077. 1,573,591. 541,195. 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 in if following SOP 98-2 (ASC 958-720)	c					,
e All other expenses 25 Total functional expenses. Add lines 1 through 24e 9,602,863. 7,488,077. 1,573,591. 541,195. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	d		, ,	,	,	
Total functional expenses. Add lines 1 through 24e 9,602,863. 7,488,077. 1,573,591. 541,195. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		All other expenses				
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)			9,602,863.	7,488,077.	1,573,591.	541,195.
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)						
educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)						
Check here if following SOP 98-2 (ASC 958-720)		· · · · · · · · · · · · · · · · · · ·				
		Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2019) Part X Balance Sheet

Par	τX	Balance Sneet					
		Check if Schedule O contains a response or i	note to a	ny line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			436.	1	600.
	2	Cash - non-interest-bearing Savings and temporary cash investments			45,576,470.	2	46,674,485.
	3	Pledges and grants receivable, net			606,791.	3	1,135,064.
	4	Accounts receivable, net			, -	4	564,345.
	5	Loans and other receivables from any current				•	,
		trustee, key employee, creator or founder, su		· · · · · · · · · · · · · · · · · · ·			
		controlled entity or family member of any of t				5	
	6	Loans and other receivables from other disqu	•				
		under section 4958(f)(1)), and persons descril		•		6	
"	7	Notes and loans receivable, net			109,696,530.	7	170,324,566.
Assets	8	Inventories for sale or use			, , ,	8	, ,
Ass	9	B			102,716.	9	191,048.
		Land, buildings, and equipment: cost or othe			,		,
		basis. Complete Part VI of Schedule D		401,982.			
	b				190,558.	10c	197,679.
	11	Investments - publicly traded securities		<u>, </u>	9,067,269.	11	4,869,084.
	12	Investments - other securities. See Part IV, Iir			, ,	12	, ,
	13	Investments - program-related. See Part IV, lin				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,338,081.	15	0.
	16	Total assets. Add lines 1 through 15 (must e	166,578,851.	16	223,956,871.		
	17	Accounts payable and accrued expenses	1,023,608.	17	1,282,491.		
	18	Grants payable			, ,	18	, ,
	19	Deferred revenue			1,695,150.	19	215,909.
	20	Tax-exempt bond liabilities			, ,	20	,
	21	Escrow or custodial account liability. Comple				21	1,485,214.
	22	Loans and other payables to any current or for		***************************************			, ,
Liabilities		trustee, key employee, creator or founder, su					
igi		controlled entity or family member of any of t				22	
Lis	23	Secured mortgages and notes payable to uni	· ·			23	14,892,380.
	24	Unsecured notes and loans payable to unrela			75,879,087.	24	96,070,945.
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li					
		of Schedule D		, .	12,920,151.	25	20,164,973.
	26	Total liabilities. Add lines 17 through 25			91,517,996.	26	134,111,912.
		Organizations that follow FASB ASC 958, o	check he	ere 🕨 🗓			
es		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			34,836,229.	27	40,154,494.
Bal	28	Net assets with donor restrictions			40,224,626.	28	49,690,465.
nd		Organizations that do not follow FASB ASG					
F		and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current fun	ıds			29	
set	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			75,060,855.	32	89,844,959.
_	33	Total liabilities and net assets/fund balances			166,578,851.	33	223,956,871.

Form **990** (2019)

Form **990** (2019)

Pa	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	24	,483,	819.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9	602,	863.
3	Revenue less expenses. Subtract line 2 from line 1	3	14	,880,	956.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	75	,060,	855.
5	Net unrealized gains (losses) on investments	5		-96,	852.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	89	844,	959.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	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?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
-	Act and OMB Circular A-133?		За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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

Name of the organization **Employer identification number** HOUSING TRUST SILICON VALLEY 77-0545135 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support							
Cale	ndar 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.")	14,398,752.	8,137,030.	9,488,914.	8,548,310.	15,224,448.	55,797,454.	
2	Tax revenues levied for the organ-							
	ization'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	14,398,752.	8,137,030.	9,488,914.	8,548,310.	15,224,448.	55,797,454.	
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)						9,727,165.	
	Public support. Subtract line 5 from line 4.						46,070,289.	
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
7	Amounts from line 4	14,398,752.	8,137,030.	9,488,914.	8,548,310.	15,224,448.	55,797,454.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	862,950.	1,230,475.	2,573,838.	968,523.	826,677.	6,462,463.	
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.)				42,349.	48,415.	90,764.	
11	Total support. Add lines 7 through 10						62,350,681.	
12	Gross receipts from related activities,	•				12	13,654,194.	
13	First five years. If the Form 990 is for	ŭ	first, second, third	l, fourth, or fifth ta	x year as a section	1 501(c)(3)		
800							P	
				olumn (f)		14	73 89 ^/	
10a								
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,		ū				•		
	,		•		•		.	
18	•			•	,			
15 16a b 17a	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)) 15 Public support percentage from 2018 Schedule A, Part II, line 14 16 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 17 3 10% -facts-and-circumstances test - 2019. 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 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							

Page 3

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.)

Sec	tion A. Public Support		,				
Cale	ndar 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 per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		1	Γ	1	1	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				L		<u></u>
14	First five years. If the Form 990 is for	-			•		
Sac	check this box and stop heretion C. Computation of Publi						P
	Public support percentage for 2019 (I			oolumn (f))		15	0/
	Public support percentage from 2018					16	<u>%</u> %
	etion D. Computation of Inves	·			•••••	1 10 1	70
	Investment income percentage for 20			ne 13 column (f)		17	%
	Investment income percentage from 2					18	<u>%</u>
	33 1/3% support tests - 2019. If the						
.Ja	more than 33 1/3%, check this box ar						. —
h	33 1/3% support tests - 2018. If the						
J	line 18 is not more than 33 1/3%, che	· ·				•	
20	Private foundation. If the organization						

Page 4

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **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))? *If* "Yes," *provide detail in* **Part VI.**
- **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? If "Yes." provide detail in **Part VI.**
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
_		
3a		
3b		
3c		
4-		
4a		
4b		
4c		
5a		
Ja		
5b		
5c		
6		
7		
8		
0-		
9a		
9b		
9с		
10a		
401		
10b		

	dule A (Form 990 or 990-EZ) 2019 HOUSING TRUST SILICON VALLEY	77-0545135	Pa	age 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	<u> </u>		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? 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	4		
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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? 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.	2		
Sec	tion 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)? 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).	1		
<u>Sec</u>	tion 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?	1		
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? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion 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 instr	uctions)		
a	The organization satisfied the Activities Test. Complete line 2 below.	4011011011		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below.</i>			
c	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.	(See Instructions,	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			.,,,
ŭ	the supported organization(s) to which the organization was responsive? 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	22		
l.	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
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? 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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Sche	edule A (Form 990 or 990-EZ) 2019 HOUSING TRUST SILICON VALLEY			77-0545135 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on N	ov. 20, 1970 (explain in I	Part VI). See instructions. All
	other Type III non-functionally integrated supporting organizations must con	mplete Sect	tions A through E.	
Sect	tion 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		
Sect	tion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		1
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		
Sect	tion 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	Check here if the current year is the organization's first as a non-functionall	y integrated	Type III supporting orga	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Section	on D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	
	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	he organization is responsive		
	(provide details in Part VI). See instructions.	9		
9	Distributable amount for 2019 from Section C, line 6			
	Line 8 amount divided by line 9 amount			
-10	Elife o amount divided by line o amount	(i)	(ii)	(iii)
Section	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
-	line 7:			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2019, if			
•	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
е	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A	(Form 990 or 990-EZ) 2019 HOUSING TRUST SILICON VALLEY	77-0545135	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 1 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, 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; Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ac (See instructions.)	nes 1 and 2; Part IV, Section Part V, Section B, line 1e; Pa	ı C,

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

Employer identification number

2019

OMB No. 1545-0047

HOUSING TRUST SILICON VALLEY 77-0545135 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

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

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

HOUSING TRUST SILICON VALLEY

77-0545135

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Name, audress, and ZiF + 4	\$ \$65,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

HOUSING TRUST SILICON VALLEY

77-0545135

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

Name of o	organization			Employer identification number	er	
HOUSING	TRUST SILICON VALLEY			77-0545135		
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	through (e) and the following line charitable, etc., contributions of \$1,00	ne entry. For organiz), (8), or (10) that total more than \$1,000 for the yeations (Enter this info. once.) \$	ar	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					_ _ _	
		(e) Transfer o	of gift			
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee		
					<u> </u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					_ _ _	
		(e) Transfer o	of gift			
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee		
					_ _ _	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					_	
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee		
					<u> </u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
					_ _ _	
		(e) Transfer o	f gift			
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee	_	
					_	
					-	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

) (see separate instructions), then	ing a Commission Book III			
	Section 501(c)(4), (5), or (6) organizat ne of organization	lons: Complete Part III.		Fm	ployer identification number
IVAII	•	JST SILICON VALLEY		-""	77-0545135
Pa		anization is exempt unde	er section 501(c)	or is a section 527 o	
•		amzation io exempt and	51 000tion 001(0)	51 10 G 000tion 027 0	- garnizationii
4	Provide a description of the organiz	ation's direct and indirect politics	al campaign activities i	n Part IV	
	Political campaign activity expendit	•			¢
	Volunteer hours for political campai				Φ
3	Volunteer flours for political campai	gri activities			
Pa	art I-B Complete if the org	anization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955	>	\$
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	>	\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 t	for this year?		Yes No
4a	Was a correction made?				Yes No
_ k	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt unde	er section 501(c),	except section 501(c)(3).
1	Enter the amount directly expended	by the filing organization for sec	tion 527 exempt funct	ion activities	\$
2	Enter the amount of the filing organ	ization's funds contributed to oth	ner organizations for se	ection 527	
	exempt function activities			>	\$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here ar	nd on Form 1120-POL,		
	line 17b			>	\$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and em	nployer identification number (EIN	N) of all section 527 pol	litical organizations to which	ch the filing organization
	made payments. For each organization	tion listed, enter the amount paid	I from the filing organiz	ation's funds. Also enter t	ne amount of political
	contributions received that were pro	• •		•	ite segregated fund or a
	political action committee (PAC). If	additional space is needed, provi	de information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Schedule C (Form 990 or 990-EZ) 2019						545135 Page 2
Part II-A Complete if the org section 501(h)).	ganization	ı is exem	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
	ation belong	s to an affili	ated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha	re of excess	lobbying e	xpenditures).			
3 Check ▶ ☐ if the filing organiza	ation checke	ed box A an	d "limited control" pro	visions apply.		
	its on Lobby		ditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	luence public	c opinion (g	rassroots lobbying)		0.	
b Total lobbying expenditures to infl	luence a legi	slative body	y (direct lobbying)		88,000.	
c Total lobbying expenditures (add l	lines 1a and	1b)			88,000.	
d Other exempt purpose expenditur					9,514,863.	
e Total exempt purpose expenditure					9,602,863.	
f Lobbying nontaxable amount. Ent	er the amou	nt from the			630,143.	
If the amount on line 1e, column (a)			oying nontaxable amo			
Not over \$500,000		20% of t	he amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000	\$100,00	0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	0 plus 10% of the exce			
Over \$1,500,000 but not over \$17	,000,000	\$225,00	0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,0	000.			
g Grassroots nontaxable amount (er	nter 25% of I	ine 1f)			157,536.	
h Subtract line 1g from line 1a. If zer	ro or less, er	nter -0			0.	
i Subtract line 1f from line 1c. If zer	o or less, en	ter -0			0.	
j If there is an amount other than ze	ero on either	line 1h or li	ne 1i, did the organiza	tion file Form 4720		
reporting section 4911 tax for this	year?					Yes No
(Some organizations t	that made a	section 50	raging Period Under ነ1(h) election do not h ite instructions for lin	nave to complete all o	f the five columns be	elow.
	Lobby	ying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount		373,291.	317,939.	494,896.	630,143.	1,816,269
b Lobbying ceiling amount (150% of line 2a, column(e))						2,724,404
c Total lobbying expenditures	=	163,662.	148,000.	88,000.	88,000.	487,662
d Grassroots nontaxable amount		93,323.	79,485.	123,724.	157,536.	454,068
 Grassroots ceiling amount 						

21,791.

Schedule C (Form 990 or 990-EZ) 2019

681<u>,102.</u>

21,791.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2019 HOUSING TRUST SILICON VALLEY 77-0545135 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

the lob	"Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	, , ,	1)	(b)	
	bying activity.	Yes	No	Amo	ount
1 Dur	ring the year, did the filing organization attempt to influence foreign, national, state, or				
	al legislation, including any attempt to influence public opinion on a legislative matter				
or r	eferendum, through the use of:				
a Vol	unteers?				
	d staff or management (include compensation in expenses reported on lines 1c through 1i)?				
с Ме	dia advertisements?				
	ilings to members, legislators, or the public?				
e Pul	plications, or published or broadcast statements?				
f Gra	ants to other organizations for lobbying purposes?				
g Dire	ect contact with legislators, their staffs, government officials, or a legislative body?				
n Ral	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Oth	ner activities?				
j Tot	al. Add lines 1c through 1i				
	the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	Yes," enter the amount of any tax incurred under section 4912				
: If "`	Yes," enter the amount of any tax incurred by organization managers under section 4912				
	ne filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	-A Complete if the organization is exempt under section 501(c)(4), section	1 501(c)(5), or sec	ction	
	501(a)(6)				
	501(c)(6).			Yes	
rt III			1	Yes	
rt III We	re substantially all (90% or more) dues received nondeductible by members?			Yes	
We Did Did	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5	2 3 5), or sec	etion	
We Did Did	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."	e prior year? 1 501(c)(5	2 3 5), or sec (b) Part	etion	
We Did Did art III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members	e prior year? n 501(c)(5 'No" OR (2 3 5), or sec (b) Part	etion	
We Did Did rt III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."	e prior year? n 501(c)(5 'No" OR (2 3 5), or sec (b) Part	etion	
We Did Did Int III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part	etion	
We Did Did rt III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political penses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5 No" OR (2 3 5), or sec (b) Part	etion	
We Did Did Tt III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political points for which the section 527(f) tax was paid). Trent year Tryover from last year	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part	etion	
Wee Did Did Did Trt III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political points for which the section 527(f) tax was paid). Trent year Tryover from last year	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c	etion	
We Did	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the Sol1(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members extion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political political political expenditures (for not include amounts of political expenses for which the section 527(f) tax was paid). Trent year Tryover from last year	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c	etion	
Due Sec exp Curb Carot Agg	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members cition 162(e) nondeductible lobbying and political expenditures (do not include amounts of political tenses for which the section 527(f) tax was paid). Trent year received amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5 No" OR (2 3 5), or sec (b) Part 1 2a 2b 2c	etion	
We Did Did rt III	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." es, assessments and similar amounts from members ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political penses for which the section 527(f) tax was paid). The rent year prover from last year all gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception is a substantial province of the exception of the exception in the section of the exception is a substantial province of the exception of the exception in the section of the exception of the exception in the section of the exception of the exception in the section of the exception	e prior year? 1 501(c)(5) No" OR (2 3 5), or sec (b) Part	etion	
Due Sec exp Curl does not do control of the control	re substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree to carry over lobbying and political campaign activity expenditures from the 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." es, assessments and similar amounts from members ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). The rent year all gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues cotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polenditure next year? Each capture of the section of the excess the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polenditure next year? Each capture of the section of the excess the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polenditure next year? Each capture of the section of the excess the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polenditure next year?	e prior year? 1 501(c)(5 No" OR (2 3 5), or sec (b) Part	etion	3, i

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

2019 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

HOUSING TRUST SILICON VALLEY 77-0545135 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 5 are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (for example, recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ______ 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	rt III Organizations Mainta	aining Coll	ections of Ar	t, Histo	orical Tre	easures, o	r Other	Similar	Assets	(contin	nued)	
3	Using the organization's acquisitio											
	collection items (check all that app	oly):										
а	Public exhibition		d	ı 🔲 ı	Loan or exc	hange progra	am					
b	Scholarly research		е	(Other							
С	Preservation for future gener	rations										
4	Provide a description of the organi	ization's colle	ctions and explair	n how the	ey further th	ne organizatio	n's exem _l	ot purpos	e in Part	XIII.		
5	During the year, did the organization	on solicit or re	eceive donations of	of art, his	storical trea	sures, or othe	er similar a	ssets				
	to be sold to raise funds rather tha									Yes		No
Par	rt IV Escrow and Custodia	al Arrange	ments. Comple	ete if the	organizatio	n answered '	"Yes" on F	orm 990,	Part IV,	line 9, or		
	reported an amount on For	m 990, Part X	, line 21.									
1a	Is the organization an agent, truste	e, custodian	or other intermed	iary for c	ontribution	s or other ass	sets not in	cluded		_		
	on Form 990, Part X?								\square	Yes	X	No
b	If "Yes," explain the arrangement in	n Part XIII and	d complete the fol	lowing ta	able:							
										Amoun	t	
С	Beginning balance							1c				
d	Additions during the year							1d		1,	485,2	214.
е	Distributions during the year							1e				
f	Ending balance							1f			485,2	214.
2a	Did the organization include an am	nount on Form	n 990, Part X, line	21, for e	scrow or co	ustodial acco	unt liability	y?	Х	Yes		No
	If "Yes," explain the arrangement in										Х	
Pai	rt V Endowment Funds.	Complete if th	e organization an	swered	"Yes" on Fo	orm 990, Part				Т		
		<u> </u>	a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three ye	ears back	(e) Four	years t	ack
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, an	nd losses										
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance	L										
2	Provide the estimated percentage	of the current	year end balance	e (line 1g	ı, column (a)) held as:						
а	•			_%								
b	Permanent endowment		%									
С	Term endowment	%										
	The percentages on lines 2a, 2b, a		•									
3а	Are there endowment funds not in	the possessi	on of the organiza	tion that	t are held a	nd administer	ed for the	organiza	tion	ſ		
	by:										Yes	No
	(i) Unrelated organizations									3a(i)		
	(ii) Related organizations									3a(ii)		
b	If "Yes" on line 3a(ii), are the relate									3b		
4	Describe in Part XIII the intended u			wment fu	unds.							
Pai	rt VI Land, Buildings, and	• •										
	Complete if the organization	n answered "										
	Description of property		(a) Cost or o basis (investr		. ,	t or other (other)		cumulated reciation	d	(d) Boo	k value	!
1a	Land											
b												
С												
d												
е	Other					401,982.		204,3	303.		197,6	79.
Total	II. Add lines 1a through 1e. (Column	(d) must equa	al Form 990, Part	X, colum	n (B), line 1	0c.)			>		197,6	79.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1		
(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. (Col. (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 1	I1c. 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
<u>(1)</u>			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Complete if the organization answered "Yes"	on Form 000 Dort IV line 1	11d Coo Form 000 Part V line 15	
	Description	Tru. See Form 990, Fart A, line 15.	(b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line Part X Other Liabilities.	<u>e 15.) </u>)	
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1		
1. (a) Description of liability		· · · · · ·	(b) Book value
(1) Federal income taxes			
(2) NON-RECOURSE PARTICIPANT LOAN CAPITAL			20,164,973.
(3)			, ,
(3) (4)			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ... 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

20,164,973.

77-0545135

Par		nts With R	evenue per Ref	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				24,344,218.
1				1	24,344,216.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما	_06_852		
_	Net unrealized gains (losses) on investments		-96,852.		
b	Donated services and use of facilities				
_	Recoveries of prior year grants				
d	Other (Describe in Part XIII.) Add lines 2a through 2d			0-	-96,852.
_	•			2e	24,441,070.
3	Subtract line 2e from line 1 Amounts included on Form 990. Part VIII. line 12. but not on line 1:			3	21,111,070.
4	, , , , , , , , , , , , , , , , , , , ,	10	42,749.		
	Investment expenses not included on Form 990, Part VIII, line 7b		12,715.		
	Other (Describe in Part XIII.)			40	42,749.
	Add lines 4a and 4b			4c 5	24,483,819.
5 Par	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)t XII Reconciliation of Expenses per Audited Financial Stateme	nts With E	xpenses per R		21,103,013.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		mponioco poi i		
1	Total expenses and losses per audited financial statements			1	9,560,114.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				, , -
a	Donated services and use of facilities	2a			
	Prior year adjustments				
	Other losses				
d	Other (Describe in Part XIII.)				
	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	9,560,114.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				, ,
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	42,749.		
	Other (Describe in Part XIII.)		•		
	Add lines 4a and 4b			4c	42,749.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	9,602,863.
Par	t XIII Supplemental Information.				· · · ·
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V. lines 1b an	d 2b: Part V. line 4:	: Part X. li	ne 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	*		,	,
PART	IV, LINE 2B:				
IN M	ARCH 2020, HOUSING TRUST ENTERED INTO A SERVICES AGREEMENT WIT	H GOOGLE			
ENDE	AVOR, LLC, A WHOLLY OWNED FUND OF GOOGLE LLC (GOOGLE). GOOGLE	HAS			
~~					
COMM	ITTED \$50 MILLION TO CREATE A SEPARATE LAUNCH INITIATIVE FUND,	AN			
3.000		DIZZETON			
AFFO	RDABLE HOUSING FUND AIMED TO ACCELERATE THE START-UP AND PRESE	RVATION			
OF H	OMES. LAUNCH INITIATIVE IS A STRATEGIC PARTNERSHIP WHICH ENHAN	CEG			
OF H	DMES, DAUNCH INITIATIVE IS A STRATEGIC PARTNERSHIP WHICH ENHAN	CES			
HOUS	ING TRUST'S LENDING CAPACITY AND PROVIDES HOUSING TRUST AND GO	OGLE			
11000	ING INODE & BENDING CHENCITE IND INOVIDED HOUSING INODE IND GO	0011			
OPPO	RTUNITIES TO INVEST IN A BROADER RANGE OF AFFORDABLE HOUSING P	ROJECTS.			
HOUS	ING TRUST'S RESPONSIBILITIES INCLUDE SOURCING, UNDERWRITING, C	LOSING			
	· · · · · · · · · · · · · · · · · · ·				
AND	SERVICING LOANS, TAKING AT LEAST A 10% PARTICIPATION IN THE LO	ANS AND			
		<u></u>			
PROV	IDING MANAGEMENT SERVICES FOR THE FUND INCLUDING ACCOUNTING. A	S THE			
SERV	ICER, AT JUNE 30, 2020, HOUSING TRUST HOLDS \$1,485,214 BELONGI	NG TO			

Schedule D (Form 990) 2019 HOUSING TRUST SILICON VALLEY Part XIII Supplemental Information (continued)	77-0545135	Page 5
Part XIII Supplemental Information (continued)		
GOOGLE WHICH IS INCLUDED AS RESTRICTED CASH AND CASH EQUIVALENTS, AND THE		
ASSOCIATED LIABILITY AS FUNDS HELD FOR OTHERS ON THE CONSOLIDATED		
STATEMENTS OF FINANCIAL POSITION.		
PART X, LINE 2:		
HOUSING TRUST 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. HOUSING TRUST'S FEDERAL AND)	
STATE INFORMATION RETURNS FOR THE YEARS 2016 THROUGH 2019 ARE SUBJECT TO		
EXAMINATION BY REGULATORY AGENCIES, GENERALLY FOR THREE AND FOUR YEARS		
AFTER THEY WERE FILED FOR FEDERAL AND STATE, RESPECTIVELY.		

SCHEDULE I (Form 990)

Department of the Treasury

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.

2019
Open to Public

Internal Revenue Service Inspection ► Go to www.irs.gov/Form990 for the latest information. **Employer identification number** Name of the organization 77-0545135 HOUSING TRUST SILICON VALLEY Part I **General Information on Grants and Assistance** 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 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. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) SILICON VALLEY COMMUNITY FOUNDATION - 2440 WEST EL CAMINO 20-5205488 501(C)(3) REAL - MOUNTAIN VIEW, CA 94040 0 COVID-19 RELIEF FUND 150,000. FAMILY SUPPORTIVE HOUSING 692 N. KING RD SAN JOSE, CA 95133 77-0101637 501(C)(3) 0. PARTIAL LOAN FORGIVEN 9,091. 2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SECURITY DEPOSIT GRANT	158	202,718.	. 0.		
GUARDINO SCHOLARSHIP	4	12,000.	0.		
ADU PLANNING GRANT	6	9,000.	0.		
Part IV Supplemental Information. Provide the information r	equired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
THE ORGANIZATION PUBLISHES INITIAL GRANT GUIDELIN	IES AND ACCEPTS	3			
APPLICATIONS FROM QUALIFIED ORGANIZATIONS. THE PR	OGRAM COMMITTE	EE REVIEWS			
ALL GRANT APPLICANTS AND APPROVES THE AWARD OF A	L GRANTS. THE	RECIPIENT			
ORGANIZATION MUST REPORT MONTHLY THE STATUS OF AI	L GRANT FUNDS	RECEIVED AND			
THE WAY IN WHICH THESE FUNDS HAVE BEEN DISBURSED	IN ACCORDANCE	WITH THE			
INITIAL PURPOSE.					

SCHEDULE J (Form 990)

Compensation Information

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.

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

HOUSING TRUST SILICON VALLEY

Employer identification number 77-0545135

Pa	art I Questions Regarding Compensation			
	<u>-</u>		Yes	No
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.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
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	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the 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.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
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:			
а	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?			Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
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:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
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	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		l

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2019

HOUSING TRUST SILICON VALLEY 77-0545135 Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	penents	(B)(I)-(U)	reported as deferred on prior Form 990
(1) KEVIN ZWICK	(i)	238,222.	27,000.	0.	12,550.	28,201.	305,973.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JULIE MAHOWALD	(i)	179,258.	20,543.	0.	8,965.	10,055.	218,821.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CRAIG MIZUSHIMA	(i)	138,818.	7,129.	0.	7,129.	17,849.	170,925.	0.
CHIEF COMPLIANCE & RISK OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2019

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

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HOUSING TRUST SILICON VALLEY

Employer identification number 77-0545135

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
HOUSING TRUST IS LEADING THE EFFORT TO CREATE A STRONG AFFORDABLE
HOUSING MARKET IN THE GREATER BAY AREA, INCLUDING MAKING MORE LOANS
THAN ANY OTHER NONPROFIT HOUSING LENDER IN THE REGION. FROM THE
HOMELESS TO RENTERS TO FIRST-TIME HOMEBUYERS, WE ASSIST A WIDE RANGE OF
RESIDENTS WITH PROGRAMS ACROSS THE ENTIRE SPECTRUM OF HOUSING ISSUES.
OUR FINANCIAL EXPERTISE AND EXTENSIVE PRIVATE AND PUBLIC SECTOR
PARTNERSHIPS ENSURE WE MAKE THE MOST OUT OF EVERY DOLLAR SO LOCAL
RESIDENTS CAN SECURE STABLE AND AFFORDABLE HOUSING THAT WORKS FOR THEM
AND THEIR FAMILIES. TO DATE, HOUSING TRUST HAS INVESTED \$335 MILLION
AND OUR BORROWERS HAVE LEVERAGED HOUSING TRUST'S INVESTMENT OF \$4.8
BILLION TO CREATE 20,761 AFFORDABLE HOUSING OPPORTUNITIES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
SANTA CRUZ, SOLANO AND SONOMA COUNTIES. MULTI-FAMILY LENDING VOLUME HAS
GROWN SIGNIFICANTLY OVER THE PAST SEVERAL YEARS AND FY20 WAS OUR
BIGGEST LENDING YEAR TO DATE WITH \$96.4 MILLION COMMITTED TO FINANCE
1,661 HOMES.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
DEFERRED, AMORTIZING AND EQUITY SHARE LOANS, DEPENDING ON INCOME LEVEL
AND NEEDS OF THE BORROWER. OUR LOANS UNDER THESE PROGRAMS RANGE FROM
\$6,500 TO \$136,000. WE HAVE MADE 2,550 DOWN PAYMENT ASSISTANCE LOANS
TOTALING OVER \$50 MILLION SINCE OUR FOUNDING. AS THE ADMINISTRATOR OF
THE CITY OF SANTA CLARA'S BELOW MARKET PURCHASE PROGRAM, HOUSING TRUST
MANAGES THE SALE OF THEIR INCLUSIONARY HOMES SOLD TO ELIGIBLE BUYERS AT

Name of the organization HOUSING TRUST SILICON VALLEY	Employer identification number							
A COST THAT IS DETERMINED NOT BY THE MARKET BUT RATHER BASED ON WHAT A								
LOW- OR MODERATE-INCOME HOUSEHOLD CAN AFFORD. IN FY20, HOUSING TRUST								
PROVIDED EDUCATION AND COUNSELING TO 2,520 HOPEFUL HOMEBUYERS, MADE								
FIFTEEN DOWN PAYMENT ASSISTANCE LOANS AND COMPLETED TWO BELOW MARKET								
PURCHASE PROGRAM HOME SALES.								
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	_							
HOUSEHOLDS (THOSE EARNING 30% OR LESS OF THE AREA MEDIAN INCOME). THE								
LACK OF AFFORDABLE HOUSING AND HIGH COST OF RENT CAN FORCE EVEN								
EMPLOYED INDIVIDUALS INTO HOMELESSNESS. OUR DEPOSIT ASSISTANCE CLIENTS								
ARE OFTEN EMPLOYED AS RETAIL CLERKS, RESTAURANT WORKERS, HOSPITAL STAFF								
AND MANY OTHER PROFESSIONS OUR COMMUNITIES DEPEND UPON. IN FY20,								
HOUSING TRUST HELPED 298 PEOPLE AVOID OR EXIT HOMELESSNESS, GRANTING								
\$202,144.								
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	_							
OTHER PROGRAMS.								
EXPENSES \$ 825,255. INCLUDING GRANTS OF \$ 9,000. REVENUE \$ 257,895.								
FORM 990, PART VI, SECTION B, LINE 11B:								
THE 990 IS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE. THE ENTIRE BOARD								
RECEIVES A COPY OF THE FORM 990 PRIOR TO FILING IN SUFFICIENT TIME TO POSE								
ANY QUESTIONS OR GIVE COMMENTS.								
FORM 990, PART VI, SECTION B, LINE 12C:								
EACH BOARD MEMBER MUST COMPLETE AND SIGN A CONFLICT OF INTEREST POLICY								
ANNUALLY. NEW BOARD MEMBERS OR THOSE BEING CONSIDERED ARE EVALUATED TO SEE								
IF THERE EXIST ANY CONFLICT OF INTEREST. EMPLOYEES MUST ALSO SIGN A								

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

77-0545135

Part I Identification of Disregarded Entities. Comple	ete if the organization answered "Yes	s" on Form 990, Part IV, line 33	3.						
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) r Total inco		(e) End-of-year assets		s Direct controlling entity		
LTOA LLC - 46-0669111 75 E. SANTA CLARA STREET, #1350						HOUSING TRUS	ST SILI	CON	
SAN JOSE, CA 95113	AFFORDABLE HOUSING	CALIFORNIA				VALLEY			
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	n answered "Yes" on Form 990	, Part IV, line 34, t	pecause it had one	or more	related tax-exer	npt		
(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	Dire	(f) ct controlling entity	Section 5 contr	olled	
		3 ,,		501(c)(3))			Yes	No	

HOUSING TRUST SILICON VALLEY

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

	organizations troutes as a partitioning during the tax year.										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule	General of managin partner?	Percentage ownership	
		country)		sections 512-514)		455015	Yes	No	K-1 (Form 1065)	Yes No	
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]										
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	1										
											
	1										
	-										
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	-										
-	-										
	-										

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec	i) ction
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		tion b)(13) rolled tity?
		Couriery)						Yes	No
	-								

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

Part V	Transactions With Related Organizations.	Complete if the organization answered "	Yes" on Form 990, Part IV, line 34, 35b, or 36.
--------	--	---	---

1	During the tax year, did the organization engage in any of the following transactions	s with one or more re	elated organizations listed in	n Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	<i>/</i>			1a				
	Gift, grant, or capital contribution to related organization(s)								
С	Gift, grant, or capital contribution from related organization(s)				1c				
	Loans or loan guarantees to or for related organization(s)								
	Loans or loan guarantees by related organization(s)								
	•								
f	Dividends from related organization(s)				1f				
g	Sale of assets to related organization(s)				1g				
h	Purchase of assets from related organization(s)				1h				
i	Exchange of assets with related organization(s)				1i				
j Lease of facilities, equipment, or other assets to related organization(s)									
,,									
k	k Lease of facilities, equipment, or other assets from related organization(s)								
1	Performance of services or membership or fundraising solicitations for related organ	nization(s)			11				
m	Performance of services or membership or fundraising solicitations by related organ								
	Sharing of facilities, equipment, mailing lists, or other assets with related organization								
					1				
p Reimbursement paid to related organization(s) for expenses									
q	Reimbursement paid by related organization(s) for expenses				1q				
r	Other transfer of cash or property to related organization(s)				1r				
2	If the answer to any of the above is "Yes," see the instructions for information on whether the second seco					•			
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount	involved				
		type (a-s)							
1)									
2)									
3)									
4)									
5)									
6)									

Schedule R (Form 990) 2019 HOUSING TRUST SILICON VALLEY 77-0545135 Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									